

Official Robe Makers to the University.—The House resolved that it was desirable that official robe makers should be appointed.

**UNIVERSITY OF LEEDS.
DEGREES IN DENTAL SURGERY.**

At a meeting of the Court of the University, the following Ordinances were adopted with reference to the institution of degrees in Dentistry:

1. The degrees in Dental Surgery shall be: Bachelor of Dental Surgery (B.Ch.D.), Master of Dental Surgery (M.Ch.D.).

Degree of Bachelor of Dental Surgery.

2. All candidates for the degree of Bachelor of Dental Surgery shall be required to have passed the Matriculation Examination, to have pursued thereafter approved courses of study for not less than five academic years, two of such years at least having been passed in the University subsequently to the date of passing Parts I and II of the First Examination, and to have completed such period of pupillage or hospital attendance, or both, as may be prescribed by the regulations of the University. No candidate shall be admitted to the degree who has not attained the age of 21 years on the day of graduation.

3. All candidates shall be required to have passed the following examinations: The First Examination, the Second Examination, the Final Examination.

4. Each examination shall include practical work in the subjects offered.

5. All candidates shall be required, before presenting themselves for examination, to furnish to the Registrar certificates testifying that they have attended the prescribed courses of instruction in accordance with the regulations of the University in each of the subjects which they offer, and that they have fulfilled the other requirements of the Ordinance and regulations in respect of such examination.

At a subsequent meeting of the Senate the following were, on the recommendation of the Board of the Faculty of Medicine, adopted as the

Regulations for the Degree of Bachelor of Dental Surgery (B.Ch.D.).

1. In each examination the names of candidates who have satisfied the examiners shall be published in alphabetical order.

First Examination.—2. Candidates for Part I or Part II of the First Examination shall be required to have attended during at least one year, either in the University or in an institution recognized for this purpose by the University, courses of instruction, including laboratory work, in the subjects of the examination, namely:—Part I. Physics: Lectures and laboratory work. Chemistry, inorganic and organic: Lectures and laboratory work. Part II. Biology (zoology and botany): Lectures and laboratory work. 3. Every candidate for Part III of the First Examination shall be required to have spent two years in the prosthetic department of a recognized dental or general hospital, or in pupillage to a qualified and registered dental surgeon, and to have attended, during at least one year, courses of lectures and practical instruction approved by the University, in the subjects of the examination, namely—dental mechanics (including electrical appliances used in dentistry): Lectures and laboratory work. Dental metallurgy: Lectures and laboratory work. 4. The first examination shall be held twice in each calendar year.

Second Examination.—5. Candidates for the Second Examination shall be required to have attended courses of instruction approved by the University, as follows: anatomy lectures, two terms; practical anatomy and demonstrations, including the dissection of the head and neck, three terms; dental anatomy and physiology, one term; dental microscopy, one term; physiology lectures, two terms; physiological laboratory, one term; practical histology, one term; dental materia medica, one term. 6. The Second Examination shall be held twice in each calendar year.

Final Examination.—7. Candidates for the Final Examination shall be required to have attended courses of study, approved by the University, as follows: surgery lectures, two terms; special surgery of the mouth, six lectures; medicine lectures, two terms; dental surgery and pathology lectures, two terms; operative dental surgery lectures, one term; demonstrations on anaesthetics, two terms. 8. Candidates shall be required to present certificates of two years' medical, surgical, and dental practice at hospitals recognized by the University. These certificates must show that practical instruction has been received in medicine, surgery, and the administration of anaesthetics. Every candidate shall be required to have acted as clerk and as dresser for three months in each case in a hospital recognized by the University. 9. The Final Examination shall be held twice in each calendar year.

UNIVERSITY OF LIVERPOOL.

Civic Grant.

THE City Council, at its recent meeting, renewed the grant of £10,000 to the University of Liverpool for a period of twelve months. The opposition of a small minority of the Council afforded the opportunity for a discussion which was not without value. It is very desirable that periodically the City Council should be able to review the situation and to discuss the general conduct of university affairs. Those interested in the University can in this way learn how their work is regarded by those outside, and can remedy any real defects that may be pointed out. The condition attached to the grant that a report shall be received from the Government inspectors as to the educational methods of the University in relation to the needs and requirements of the city is to be welcomed. The information that this report will furnish will, it is believed, prove conclusively that the city obtains full value for its money, and will induce the most rigid economists to admit that the university grant is one of the last items of expenditure which should, in the interests of the city, be reduced.

Research Diploma.

The authorities have recently decided to grant diplomas under certain conditions to research students in anatomy, bacteriology, and bio-chemistry. These diplomas are intended for students, not necessarily medical men, who have worked

for three terms in the University laboratories and have carried on research work to the satisfaction of the Dean of the Faculty. Students who desire to obtain these diplomas must, before entering on their course of research, have passed an examination of high standard approved by the faculty in the subject selected. It is not improbable that soon the reputation of the school will be such that scholars will be attracted to Liverpool from all parts to study these specialized branches of learning.

UNIVERSITY OF BIRMINGHAM.

THE following candidates have been approved at the examinations indicated:

THIRD M.B., Ch.B. (Part I., Pathology and Bacteriology).—J. Adams, Charlotte Bailey, *J. Dale, G. H. C. Mold, D. P. Smith, E. V. Whitby. **Part II (Materia Medica and Practical Pharmacy).**—J. Adams, *J. Dale, H. A. Evans, E. V. Whitby, Charlotte Bailey.†

* Recommended for the Queen's Scholarship of 10 guineas awarded to the candidate taking the highest place at the examination.

† Class II.

FOURTH M.B., Ch.B.—Class I. C.*J. Feuton,*A. A. Sanders, F. B. Young, Class II. E. J. Boome, H. N. Crowe, E. T. Gaunt, J. K. Gaunt, P. J. Mason, N. C. Penrose, A. J. Smith, R. W. Thompson, N. V. Williams.

* Equal for first place, and recommended for the Queen's Scholarship of 10 guineas.

UNIVERSITY OF EDINBURGH.

THE following candidates have been approved at the examination indicated:

Final M.B., Ch.B.—G. P. Adshhead, J. H. Aikman, J. A. Ainscow, J. Alexander, M.A., A. W. Atkinson, R. C. E. Atkinson, M.A., A. F. Babonau, C. R. M. Baker, D. P. Blair, F. Blamire, J. D. Bowie, F. H. Bradley, I. W. Brebner, M.A., *T. G. Brown, B.Sc., C. H. Burgess, Alice Meredith Burn, E. Burnet, B.A., J. S. Caldwell, *S. T. Chantpoual, A. E. Chisholm, Marjorie D. Cohen, W. Core, M.A., S. G. Corner, M.A., D. Cotterill, Agnes Marshall Cowan, R. G. Cunningham, J. A. Currell, J. S. Daniell, J. Dass, S. K. Datta, B.A., R. Davidson, A. Davies, B.A., *A. M. Dick, T. H. Dickson, *A. M. Dretnan, J. D. C. Duncan, R. Duncan, D. D. Dunn, E. W. Dyer, S. S. Lykes, *J. S. Edwards, P. El-Karey, R. H. Fothergill, M. S. Fraser, J. W. Frew, P. W. Freyer, Jessie Handyside Gellatly, K. N. Gosh, G. H. R. Gibson, L. Gibson, J. Gilmour, E. C. Girling, *G. A. Gordon, J. E. Gordon, W. L. Gordon, E. R. Grieveson, B.A., W. M. A. P. Henderson, M.A., B.Sc., Isabella Hill, A. S. Holden, G. H. Howe, *T. B. Johnston, N. W. Kidston, A. G. K. Ledger, A. Leitch, Olive T. Leonard, J. Lindsay, P. Lorrie, J. P. Lowson, A. T. M'Donald, J. W. S. Macfie, B.A., B.Sc., G. B. Macgregor, T. S. M'Intosh, M.A., J. MacKenzie, J. N. MacLaughlin, M. Maclean, M.A., J. A. MacLeod, J. B. M'Orland, R. P. M'Orland, G. M'Mullan, A. C. B. M'Murtrie, W. J. Macnab, J. M. MacPhail, A. S. Mactavish, J. N. M'Turk, D. Mann, J. S. Manson, J. Mathewson, M.A., G. M. Melville, H. J. More, M.A., J. E. Murray, M. A. D. Naoroji, A. J. P. Nowell, J. L. H. Paterson, A. MacT. Pirrie, B.Sc., G. Pollock, H. B. Porteous, Agnes E. Porter, C. Pycroft, Edith G. Pycroft, Mabel L. Ramsay, G. Raubenheimer, *J. Ritchie, W. G. Rivers, *H. D. Robb, E. M. N. Robb, T. E. Roberts, G. Robertson, *E. Rose, M.A., F. Ross, J. M. Ross, Z. M. H. Ross, E. Russell, A. Sandison, Elsie B. Saunders, *W. O. Sclater, B.Sc., T. H. Scott, H. L. Sells, E. D. Simson, A. G. H. Smart, W. T. Smith, R. St. C. Stewart, *A. D. Stewart, G. H. de W. Stofberg, K. R. Tampl, B.A., D. R. Taylor, B.A., J. A. Taylor, C. H. Tewsley, M.A., E. R. Thompson, H. H. Thorburn, A. Todrick, J. N. Turnbull, Nettie B. Turnbull, Annie D. Urquhart, E. W. Vaughan, A. G. Visser, G. F. C. Wallis, R. H. Walton, W. H. Welsh, O. H. Williams, W. E. R. Williams, C. R. Wills, Ethel Wiseman, A. F. Wright, A. W. Young.

* With distinction.

UNIVERSITY OF GLASGOW.

PROPOSED DEGREE IN PHARMACY.

A PROPOSAL to institute a B.Sc. degree in pharmacy is blocked for the present. The University of Edinburgh has intimated an objection to the proposed scheme. Owing to the peculiar provision in the ordinances it is only necessary for one of the Scottish universities to intimate that it objects to prevent the carrying on of any scheme for instituting a new degree. The nature of the objection need not be stated for six months.

ROYAL COLLEGE OF SURGEONS OF ENGLAND.

At a meeting on June 14th the Council conferred the Fellowship on the following gentlemen:

E. V. Hugo, W. G. Mortimer, W. P. Noall, G. I. T. Stewart, A. F. Hayden, H. E. Ridewood, E. Ward, A. M. Webber, P. P. Cole, G. R. Footner, W. M. Mollison, W. J. O. Malloch, J. A. Coupland, V. B. Bennett, G. G. Farquhar, D. C. L. Fitzwilliams.

PUBLIC HEALTH

AND

POOR-LAW MEDICAL SERVICES.

POOR-LAW MEDICAL OFFICERS' ASSOCIATION OF ENGLAND AND WALES.

THE annual general meeting of this Association was held at the Trocadero, Piccadilly Circus, W., on June 26th, Surgeon

General Evatt, C.B., the President, being in the chair. A very satisfactory balance-sheet was presented and officers and council elected for the ensuing year.

After the general meeting the members and their guests dined together under the chairmanship of their President. Dr. Heron, in proposing "The Health of the Poor-law Medical Officers' Association," alluded to their latest annual report, and said that it was distressing to think that many of the grievances alluded to he could remember being complained of more than forty years ago. It was sad to think that so little had been achieved in the way of reform. He altogether disbelieved in Royal Commissions, and hoped that the Association did not expect much from that now sitting. It would probably be years before it reported, and then its recommendations would be pigeon-holed and nothing more heard about them.

The Honorary Secretary (Dr. Major Greenwood), in replying, said he was sorry that the proposer of the toast had been so depressing in his remarks. Their cause wanted rather stimulants and encouragement. Unfortunately, he could not deny the accuracy of what Dr. Heron had said. Among the archives of the Association was a copy of a report published by one of their past Presidents in 1853, in which nearly all the present grievances were enumerated. Dr. Balding was never tired of pointing out that practically all the duties of Poor-law medical officers were regulated by a Poor-law Order enacted in 1847. During the last year the Association had not been idle. Some might think from the little progress made that they had been simply marking time, but only those who did the work knew how much had to be done without any apparent effect; how many letters had to be written; how many rebuffs taken in good part; how many mistakes, even on the part of members—to be rectified—for he regretted that there was often want of care and thoughtlessness on the part of applicants for advice, who made their cases wellnigh hopeless before consulting the Association. Still, he did not think their work was thrown away. Hard, indeed, was the rock of official indifference, but *gutta cavat lapidem non vi sed saepe cadendo*, so he hoped that their puny efforts by constant repetition might yet make an impression. Much time had been devoted to the work of the Royal Commission now sitting, as it was thought very desirable that the grievances of the Poor-law Service should be brought before that body, and an attempt made to point out that they had an important bearing on the welfare of the sick poor. If the Poor-law Medical Service were underpaid, their poor patients must suffer in the long run. It would be a great mistake if the Commission regarded these matters as outside the scope of its inquiry. It ought to examine into the relations that existed between Poor-law medical officers and Boards of Guardians throughout the country. If it did so it would discover great abuses, and be able to remove the causes of the grievances complained of, which greatly affected the well-being of the most helpless of the poor, the sick and disabled. He was happy to say that the Commission had consented to hear the Association, and that he would have the honour of representing them at no distant date. He therefore asked members to furnish him with as much evidence as possible to lay before the Commissioners.

The President, in proposing the health of the guests, spoke of the excellent work done by Mr. Andrew Clark for the British Medical Association, which was always ready to assist Poor-law medical officers. He complimented Dr. F. de Havilland Hall on the admirable success of the Medical Sickness Society under his chairmanship, and commented on the great importance of the work it carried on. The Army Medical Service had once been as downtrodden as the Poor-law, but it had risen up again, as the Poor-law Service would assuredly do in the future.

Mr. Andrew Clark, in responding, spoke of the frequency with which Poor-law matters came before the British Medical Association, and its readiness to do all that was possible to promote Poor-law reform.

Dr. Hall said that his father had been a Poor-law medical officer for more than fifty years, and in his young days he had been very familiar with Poor-law matters. With regard to the Medical Sickness Society it must never be forgotten how much of its success was due to the energy and ability of the late Mr. Ernest Hart. Dr. Major Greenwood, too, had sat on the Executive Committee of the Society ever since its foundation, and had given great assistance in its development.

Dr. Holder proposed the health of the President, and said that Poor-law medical officers were greatly indebted to him, especially their brethren in Ireland, and that the Association were fortunate in having him as President.

The President then proposed the health of Mr. Livock, President of the London and District Branch of the Poor-law Officers' Association, who, he said, represented the large and important lay element of Poor-law workers; he had no doubt they were in sympathy with medical colleagues.

Mr. Livock thanked the Association, and spoke with admiration of the work of the medical department of the Service. He could assure them that the officers he represented were quite ready to assist as far as lay in their power, and he himself, in his thirty years' service, had had ample opportunity of seeing how unfairly Poor-law medical officers were often treated, considering the importance of their work and their great devotion to the service of the poor.

LETTERS, NOTES AND ANSWERS TO CORRESPONDENTS.

Queries, answers, and communications relating to subjects to which special departments of the BRITISH MEDICAL JOURNAL are devoted will be found under their respective headings.

QUERIES.

PRACTICE IN NEW ZEALAND.

A. W. T. asks for information as to the conditions (professional and living expenses, etc.) of practice in New Zealand, the part most suitable, and the minimal amount of capital necessary to take out, and whether *locum tenens* work is easy to obtain.

* * We are advised that the best practices are, as might be expected, to be had in the large cities—Auckland, Wellington, Dunedin, and Christchurch; but to obtain such a man must have funds to carry him on until he becomes known. A practice cannot be transferred by purchase, as is the case in England. No ill-will is felt against a man who arrives and commences on his own account. A few successful cases will make his reputation almost at once. Country practices, on the other hand, can be bought easily. There are several hospital appointments throughout the Colony worth from £150 to £300, with right of private practice. Cost of living is perhaps somewhat higher than in England, but not very much. *Locum tenens* work is not much in demand. The minimal amount of capital to take out would be about £500.

ANSWERS.

A. P., who is attending a primipara suffering, a week after labour, from retention of urine, should direct that hot water should be put in the utensil and let the patient sit upright upon it. Or let the patient sit in a hot hip bath and pass water into the bath. If that fails, the catheter should be used.

LETTERS, NOTES, etc.

MOTOR CYCLES AND MOTOR CARS.

DR. T. GORDON KELLY, D.P.H. Oxon. (Desford Grange, Leicester), writes: I have read with interest the letter of Dr. Thompson Bell in the BRITISH MEDICAL JOURNAL of June 16th 1906, p. 1447, and, like him, would draw the attention of those members of our profession who cannot afford the initial expense and upkeep of the motor car to the great advantage as a "time saver" of the modest motor bicycle. As Dr. Bell says, a long round of visiting in the country can be got through in half the time by using one of these handy little motors. Many men are deterred from purchasing through fear of breakdowns and, to some extent, like the cautious individual who is still waiting for the perfect bicycle, are postponing the venture until "they are more reliable." I can assure your readers that both motor cars and motor cycles are past the experimental stage and present no difficulties to any one who will take the trouble of understanding the mechanism. I have used for nearly three years a 2-h.p. Quadrant motor cycle with little or no trouble. Although I have also driven a car I find my small Quadrant very handy. For those who prefer the car I would strongly advise the 6-h.p. De Dion with three speeds. This car is certainly expensive, more so I believe than any other single cylinder car, but is assuredly worth the money. Having driven two other well-known 6-h.p. cars, I find the De Dion has far more power, but its great charm to me is the flexibility of the engine, which is equal to any two-cylinder car I have come across. The bugbear of the novice, gear changing, in this car is simplicity itself, and the veriest beginner cannot "miss the change." In conclusion, I may say that I am a strong advocate of the single-cylinder engine, provided it is a good one.

UNIVERSAL NAVAL AND MILITARY SERVICE.

DR. W. CULVER JAMES, Surgeon-Lieutenant-Colonel Honourable Artillery Company (London, W.), writes: I beg to thank you for your kind and sympathetic remarks, in your issue of April 28th, on the paper I recently read on the above subject. Intimately connected as universal naval and military training and service would be with the health and general well-being of the community, this subject should, and does, interest our profession in England. I beg, however, to protest, with all the force and earnestness I possess, against your statement that the gentle and mild compulsion I propose would be "penal." The BRITISH MEDICAL JOURNAL has always, and rightly, advocated compulsory vaccination and compulsory notification of certain infectious diseases. In my humble opinion it would be as unfair for a critic to say that you advocated "penal" vaccination, etc., as for you to make the following statement in reference to my proposal: