

preciation of slight differences of weight;" all of them subjects of curious interest, and also of scientific value, if worked out with care in a physiological laboratory, but beyond the sphere of ordinary observation, and hardly connected with anthropometry as usually understood by everyone except Mr. Galton, in this and other countries. It is necessary to point out this departure from the generally received application of the word anthropometry, as we fear that the very formidable list of expensive instruments given in the catalogue is likely to discourage and retard rather than promote the study of practical anthropometry.

The list of apparatus does not include a weighing machine, and is incomplete in other respects, and yet the total cost amounts to nearly £50; and even the cost of the few strictly anthropometric instruments is about £20, to which must be added from £5 to £10 for a weighing machine, a sum which is considerably in excess of the cost of the instruments in common use, and which have already produced excellent and trustworthy results in the hands of the Anthropometric Committee and other investigators. For laboratory work, such as was carried on at the Health Exhibition, strong, easily worked instruments are required, which will bear a great deal of wear and tear without getting out of order, and it is, no doubt, for work of this kind that the Scientific Instrument Company have constructed the instruments described in their catalogue.

As far as we can judge from the descriptions, the apparatus are well adapted for the purposes for which they are designed. We do not see any obvious reason why Mr. Galton should give up artificial eyes as standards of colour, as they were found to work well when tried by the Anthropometric Committee, and afterwards at the Health Exhibition. It is desirable that standards once found to work satisfactorily should not be changed, no matter how ingenious the substitutes may be, as all such changes tend to discourage continuous work, and to render former observations valueless for purposes of comparison.

There are some measurements on which anthropologists are not yet agreed, but which should be settled by anatomists familiar with actual measurements of the living body. The "span of arms" is one of these. Mr. Galton directs that the measuring rod should pass in front of the body, while other observers think it should pass behind, as the greater or less projection of the chest invalidates the measurement—a prominent well-developed chest producing a shorter relative measurement than a flat one. When taken across the back there is nothing to prevent the rod lying flat, and being in contact with the arms and trunk throughout, and thus obtaining uniform results.

It will be seen that, writing as we do for medical men who have a desire for practical results, we are disposed to identify anthropometry with anatomy rather than physiology, and that our objections to some of Mr. Galton's apparatus apply to the ground they cover and open up, rather than to the ingenuity and fitness of the instruments for the purposes for which they are intended. Most of the instruments employed in the physiological laboratory might with almost equal justice be called anthropometric apparatus, as they are all measuring instruments. The line must be drawn somewhere, and it may be asked whether it is not desirable that we should confine the term anthropometry to the determination of those qualities of the human body which are included under the term "physique." This is the meaning commonly attached to it elsewhere, and there is no reason why we who are behind other countries in our practice of anthropometry should give it a wider significance. It is certain that Quetelet, who first employed the term, did not give it such a wide application as Mr. Galton wishes to do.

SURGICAL SEARCH-LAMP.

THIS electric lamp is particularly useful in abdominal operations, when it is necessary to illuminate the deeper parts. In dealing with deeply-seated adhesions, securing bleeding points, etc., it will be found of the greatest use. The lamp being held in the hand, the whole of the abdominal cavity can be thoroughly explored, and the sense of sight called in to decide what is often now only determined by touch. The temperature of the lamp, when the current is running, does not reach a point at which the slightest harm can be done to any of the viscera; and it can be used with advantage for the detection of translucency in cysts, etc., for it may be pressed against the part without exciting the slightest discomfort. The lamp and wire can be soaked in 3 or 5 per cent. phenol solution, and thus rendered aseptic without damage. During the operation it is best kept in the antiseptic solution lying on a few layers of gauze, or a pad of wool. The lamp is frosted on one side so that the eye is not dazzled. This invention was specially designed by Messrs. Woodhouse and Rawson, of 11, Queen Victoria Street, E.C., for Mr. C. T. Dent, and has been very successfully used in operations at St. George's Hospital.

BRITISH MEDICAL ASSOCIATION.

SUBSCRIPTIONS FOR 1887.

SUBSCRIPTIONS to the Association for 1887 became due on January 1st. Members of Branches are requested to pay the same to their respective Secretaries. Members of the Association not belonging to Branches, are requested to forward their remittances to the General Secretary, 429, Strand, London. Post-office orders should be made payable at the West Central District Office, High Holborn.

The British Medical Journal.

SATURDAY, JULY 9th, 1887.

DEGREES FOR LONDON MEDICAL STUDENTS.

THE right of medical students, educated in London, to a medical degree, on reasonable and equitable terms, is now no longer disputed. The overwhelming evidence, not only of the justice of the claim, but of the existence of a strong opinion within the profession on this point, which we have been able to bring forward, has convinced both the University of London and the two Royal Colleges, and both are in motion. We last week published the essential points of the petition about to be presented, in the name of the Royal Colleges of Physicians and Surgeons, to the Queen in Council, praying that a "Senate of Physicians and Surgeons" may be created "for the purpose of conferring degrees in medicine and surgery on persons who, by passing the examinations formerly held by the Examining Board of the said two Colleges separately, or by passing the examination held by the Examining Board of the said two Colleges, or by passing any other examination to be held by the two Colleges jointly or separately, have already acquired or may hereafter acquire the qualifications for registration under the Medical Act, and who shall have also complied with such further regulations (if any), or undergone such further examination (if any) as it may be deemed proper to impose or require from time to time." The very existence of such a petition is a great gain, and the action of the two Colleges will be deservedly applauded. In its broader features the proposal is equitable, and meets the fundamental need; a degree would be placed by it within the reach of every London student of average diligence; it is, moreover, retrospective, and would give to every holder of the two diplomas an opportunity of obtaining the degree of M.D. on reasonable terms. Such at least would seem to be the intention of the petition, and probably such would be its effect; but all matters of detail, including the terms upon which the degrees should be granted, are left, as was perhaps inevitable, for the decision of the Senate, after that body has been constituted.

The precise constitution of the Senate, therefore, becomes a matter of great importance, and it is here that the scheme, which in other respects contains so many admirable points, is open to unfavourable criticism. It will be a source of wide-spread regret that the scheme put forward by the two Colleges is founded upon a narrow basis, and seeks to perpetuate the oligarchic system which has already brought these two bodies into conflict with the general mass of professional opinion in this country.

It is proposed to entrust the power of granting degrees to London

medical students to a Senate composed of the President of the College of Surgeons, with his twenty-three fellow councillors, and the President of the College of Physicians, with twenty-three Fellows selected by the Comitia. To this unwieldy body would be entrusted all the functions of a medical university; it would determine the conditions under which the degrees should be granted, it would lay down a curriculum, institute examinations, if any, and fix the fees. The curious poverty of invention discovered by this scheme is only equalled by the extreme respect displayed for vested interests. And whose vested interests? The interests of the students or the teachers? No; but the interests of the exclusive self-elected bodies which claim to rule the profession—the irresponsible Council of the College of Surgeons and the chance assemblies of the Fellows of the College of Physicians. These two bodies have shown themselves so blind to the wider interests, and so deaf to the loudly-expressed opinion of the profession at large during the recent discussion with regard to the claims of the Apothecaries' Society to be admitted to the Conjoint Board, that this proposal to place additional powers and greater influence in their hands cannot but be viewed with some apprehension.

The proposed constitution of this new university, for such it would be in fact if not in name, is not in unison with some of the strongest tendencies of the day in educational matters. The claim put forward by the collegiate teachers to be directly represented on the governing body of the university from which the majority of their pupils seek to obtain degrees is one which can be supported by many cogent arguments which have already found expression in these columns. Further, in dealing with a profession which has so many and such complex social relations as the medical, every class may justly claim to have a voice in the management of the bodies which regulate medical education. Thirdly, it is held by many, though upon this point there is an admitted conflict of precedent and opinion, that in every university the graduates are entitled to representation on the governing body and to a share in the life and work of the university. The scheme now put forward discloses no disposition to recognise any one of these claims. The proposal recently made in the name of the teachers and adopted by the Association for Promoting a Teaching University in London has been deliberately rejected. Were the two Royal Colleges to be dragged at the heels of University and King's Colleges it was asked? And this piece of exuberant rhetoric was taken to have effectually disposed of the weighty arguments advanced by responsible representatives of the teaching fraternity. The right of the profession at large to have a share in the management of its own affairs, and a voice in the regulation of medical education—a right recognised by the Legislature when the principle of direct representation on the General Medical Council was granted by the Medical Act of 1886—is entirely ignored, and the graduates of the future university have no place within it; they are to present themselves for examination, to pay their fees, accept their degrees, and *excunt!*

The profession is now called upon to ratify and support the decisions reached in secret conclave by a few delegates from the Councils of the two Colleges. This it cannot, with any self-respect, do without full discussion and investigation; and without the unanimous and hearty support of all the influence which the profession can command the success of any such scheme is more than doubtful. Objections will be, or have already been, lodged by existing universities—objections founded on the proposal to create a university with a single

faculty, on the exclusion of the elements of a general and scientific education, and on other weak points above indicated. A Royal Commission will be almost certainly necessary; let us at least go before it as a united profession, knowing our own needs and able to give a good account of the faith which is in us.

THE COLLEGES AND SCIENCE.

LAST week we discussed the manner in which the Erasmus Wilson Fund would probably be utilised by the College of Surgeons. Want of space prevented us from speaking of a subject perhaps more important—the union of the Colleges for the promotion of a scientific institution in connection with the Examination Hall on the Thames Embankment. The Report of the Colleges' Land Committee was received at an extraordinary meeting of the Fellows of the College of Physicians, and at a similar meeting of the Council of the College of Surgeons. This Committee, it must be remembered, considered and reported on the utilisation of the vacant ground adjoining the Examination Hall for scientific purposes, by which term was meant "the investigation and exposition of such branches of science connected with medicine and surgery as the two Colleges may from time to time determine." The Committee advised that a central theatre for demonstrations and lectures should be built so as to contain seats for about 250 persons, and that the Presidents of the two Colleges should appoint a subcommittee to investigate and report upon the best arrangements at present existing in scientific institutions in the construction of a lecture-theatre and laboratories.

The Council of the College of Surgeons adopted the report. The College of Physicians agreed to the appointment of a subcommittee to report on the working of other scientific institutions, but referred for reconsideration the proposition concerning the central theatre. The College wisely inferred that such a theatre ought to be much larger than just sufficient to contain "about 250 persons." In this they were well advised. The new institution is sure to become celebrated, and occasions will frequently arise when more than 250 persons will throng to its theatre. A small audience in a large theatre can do no harm except to the vanity of a sensitive lecturer; a crowd in a small theatre means intense discomfort and drowsiness, whereby brains loaded with over-carbonised blood are rendered incapable of following the words, arguments, and demonstrations of the teacher or orator. There is a good arrangement at the College of Surgeons by which the floor of the theatre, as usually arranged for examinations and the routine lectures, can be taken up, so that the room is enlarged by several tiers of seats, leaving a small arena convenient for the lecturer and the Council, when orations are delivered or when a celebrity gives a lecture. This arrangement might be adopted at the Examination Hall. The resolution concerning the investigation of other scientific institutions will meet with unqualified approval. We have repeatedly urged the necessity of an institution of this kind in London, and the combined action of the Colleges for its promotion is not the least important feature of the Jubilee year.

To return to the College of Surgeons, we believe that the enlargement of the Library will meet with universal satisfaction, and the Council will do wisely in appointing a professional librarian to supply the vacancy caused by the death of Mr. Chatto. The Council have further determined to appoint a Pathological Curator, the whole of whose time shall be at the disposal of the College, and who shall not be in practice. We have repeatedly noted the difficulties involved in

an appointment of this kind at the College of Surgeons. A Curator, "the whole of whose time shall be at the disposal of the College," would have some difficulty in competing with pathologists at the large hospitals. In certain universities, especially on the Continent, special regulations with hospitals ensure a steady supply of material, but it is doubtful whether this would be the case at Lincoln's Inn. In another way also the Curator would be at a disadvantage in relation to hospital pathologists. Pathology always thrives best not near but actually at its sources of supply. Facilities for gaining necessary clinico-pathological evidence, the excellent moral effect of compulsory instruction to students, and above all, the constant performance of necropsies in a systematic manner, all tend to make the hospital pathologist a first-class worker. Again, had as the habit of looking on so important an appointment as a mere stepping-stone to practice may be, it cannot be denied that prospects, however illusory, are a great stimulus to work in the case of the hospital pathologist. The Curator at the College would work under far less favourable conditions. He would enjoy the one advantage of a certain income, but this might influence his work unfavourably. Once more we must express our earnest hope that the College will give facilities for pathological study to all qualified persons who may desire to work in its new laboratories; though perhaps some arrangement to that end may be included in the duties of the new Curatorship, not yet defined. No doubt, it must be remembered, these facilities for study will be forthcoming at the new scientific institution on the Embankment.

MIDWIFERY FEES.

WE have before now had to call attention to the difficulty which medical practitioners frequently experience in recovering their fees in cases where they have been retained to attend a confinement, but where their services have not been actually required and rendered. We have pointed out that the right to recover fees in such cases depends on contract, and that the practitioner has no legal claim for fees in cases not actually attended, unless, at the time of being retained, he has stipulated for a fee in any event; but that, if he has so stipulated, and has held himself in readiness to attend, he is morally and legally entitled to be paid. A decision given recently by his Honour Judge Jordan at the Leek County Court, in a case of *Bluett v. Bryan*, if right, would show that fees in cases not actually attended are not recoverable at all; but, as reported, the decision seems thoroughly wrong. Dr. Bluett, the plaintiff, was retained to attend the defendant's wife in her confinement, and when entering the engagement in his book informed her that his fee would have to be paid whether he attended or not. His services were not required, and the defendant declined to pay. The judge decided for the defendant, on the ground that the Medical Acts prevent a contract *in futuro*, and that the plaintiff had not rendered any services for which the Acts authorised him to claim. The report before us is very short, and does not state the sections on which his Honour relied; and we are unable to find any which support his judgment. Section 32 of the Act of 1858 prohibits unregistered persons from recovering charges for "any medical or surgical advice, attendance, or for the performance of any operation, or for any medicine which he shall both have prescribed and supplied;" and thereby, no doubt, impliedly authorises registered practitioners to recover charges for the services there set out. But neither it, nor any other section of which we are aware, prohibits registered practitioners from entering into contracts and

having them enforced in courts of law. Section 6 of the Act of 1886 says that "a registered medical practitioner shall.....be entitled to practise medicine, surgery, and midwifery.....and to recover in due course of law in respect of such practice any expenses, charges in respect of medicaments or other appliances, or any fees to which he may be entitled." These words seem sufficiently wide to include the case before Judge Jordan, but possibly he was not aware of the section, as it only came into force in June this year. Apart from it, we think, on the facts as reported, the plaintiff made out his case and was entitled to succeed.

The difficulty of getting a rule established as to payment of fees in midwifery cases is that the amount of fees due in any particular case is small, and can only be sued for in a county court, from which there is no appeal except by leave of the judge, who is pretty sure to refuse it, if he doubts the correctness of his judgment. One judge allows such fees, while in the neighbouring district judgments are given for the defendants. It may be worth while for the profession to take up a test case, and try and get a decision of the High Court on appeal. But, if so, the case should be carefully selected and got up, and the plaintiff should be properly represented in the county court, otherwise the result may be disastrous.

FEEBLE-MINDED AND DELICATE CHILDREN IN PRIMARY SCHOOLS.

A TEACHER, giving evidence before the Royal Commission on Education, referred to her claim of exemption for "two paralysed; one idiot; two who were twelve years of age, but who had never been at school before; one obviously dull; and eight delicate." This looks a formidable list for a school of 870 children, but probably represents a fair average of what may be seen in schools. It does not appear that such a list excited any great desire on the part of the authorities to know more of the paralysed and delicate children, and of the methods used to train and brighten the faculties of the child described as an idiot. Our profession is much concerned with such cases; they appear in large numbers in our out-patient departments and at the hospitals for children.

This teacher was asked by the Commission, "Was that list submitted to any medical man before it was brought to the inspector's knowledge?" The reply was "No." This suggests that the condition of the children for whom exemption is claimed by teachers on grounds of health or feeble-mindedness ought to be reported on by some medical man. There are many children in every large school physically incapable of passing through the ordinary educational work with success or benefit to themselves. Exemptions on such grounds should be granted on competent authority, and the feeble children should be kept in school—in small-class-rooms, if needs be—and trained for their own benefit and the public good, but should not be compelled to pass the standards they are not fit to pass, and earn grants out of taxes to save the rates, for, after all, both are paid by the public. An educational system cannot be said to be without reproach which takes no special means to train those who are physically defective or fail from feebleness to do as much work as average children. Such feeble boys and girls require good, well-arranged, and suitable training, to prevent mental degeneration, and to fit them to make a footing in life. To provide suitable training for those least likely to help themselves is not only a duty, it is politic as a reasonable endeavour to lessen pauperism in the future. The consideration of this question seems to come within

the scope of the Commission, for we find in the syllabus of the points for inquiry "Instruction for exceptional children: (a) The effect of the system on the dull and in any way deficient. (1) Is there any tendency to neglect the dull for the clever? (2) Is any special provision for such children possible?" It is to be hoped that this portion of the inquiry will not be shirked; but that its investigation may lead to some practical results. It is a matter of national importance if we hope to improve the rising generation, and to hold our own in the competition with other nations.

TUMOURS OF THE UMBILICUS.

DR. FRANCIS VILLAR, of Paris, has recently published a work of considerable interest, *Tumeurs de l'Ombilic*. He classifies the varieties under the heads of innocent and malignant growths. In the first class are vascular tumours including angioma and lymphocele, granulomata, adenomata of the intestinal and gastric types, cysts sebaceous and dermoid, fibro-papillomata, and myxomata. The malignant forms are sarcomata and primary and secondary cancer. Angioma or nævus is rare. Graefe, Phillip Boyer, Chassaignac, Maunoir, and Braxton Hicks have observed erectile tumours, all congenital. Kœberlé's umbilical lymphocele is a tumour made up of sacciform dilations of the lymphatic vessels seen in cases of very large ovarian tumours. By granulomata Dr. Villar means to designate the umbilical fungosity seen in new-born children. This affection has been described by a great many writers, such as Guersant, Cooper Foster, and Holmes. It is not congenital, but appears a few days after the fall of the stump of the cord, as a red, moist, fleshy mass, becoming of a deeper colour when the infant cries, and liable to bleed. The granuloma discharges and sets up eczema in the integuments around the umbilicus. It tends to grow very slowly for months. It is advisable to remove it by means of scissors or ligature. The growth may recur; in a case described by Steiner it reappeared after repeated removals until the fourth year.

The most remarkable tumours of the umbilicus are the adenomata. They are generally pedunculated, and resemble in appearance the common fungosity of the umbilicus, but are histologically quite different. They are made up of tissue closely resembling the mucous membrane of the intestine, or of the stomach. When the tissue is of the gastric mucous membrane type, gastric juice containing pepsine is freely secreted. These adenomata are always congenital. Eleven cases are recorded; in all, excepting one described by Tillmanns, the tissue resembled intestinal mucous membrane. The intestinal form may be developed from persistence of the vitelline duct. Dr. Tillmanns' remarkable case (*Deutsche Zeitschrift für Chirurgie*, vol. xviii, 1883) occurred in a boy aged 13. It was described as a case of congenital prolapse of the gastric mucous membrane. There was a tumour the size of a nut, secreting gastric juice; it was removed with a bistoury, and the stump was touched with the thermo-cautery. Recovery was perfect. Considering that the stomach could not be examined, it appears doubtful that the tumour was necessarily a prolapse of the pyloric end of the stomach with eversion of the mucous membrane. It is singular that the patient had lived for thirteen years with no gastric disturbance and no escape of food or drink through the umbilicus. It would appear to us as though the growth was a true tumour imitating gastric mucous membrane. No doubt many adenomata have been mistaken for the simple fungosity; the etiology

of the two diseases is almost identical; here we have an excellent subject for general practitioners to study.

Sebaceous tumours and dermoid cysts are very rare in the umbilicus and must not be confounded with sebaceous concretions external to the epidermis. The dermoid cysts never appear to contain complicated epidermic structures such as are seen in the ovary. Only four cases of warty growths or fibro-papillomata have been described. Sarcoma is very rare and in only one case was the nature of the growth verified by proper microscopic examination. Primary epithelioma has been repeatedly observed, the secondary form is seen in cases of cancer of the abdominal viscera. The primary form rapidly infects the peritoneum, and when surrounded by much infiltration may be taken for phlegmonous erysipelas of the umbilicus.

THE Hospital Sunday Fund has reached a total of £34,000.

A MEETING of the Executive Committee of the General Medical Council has been summoned for Monday, July 25th.

THE Committee of Delegates appointed by the Royal Colleges of Physicians and Surgeons to consider the question of obtaining degrees for London medical students will meet this evening (Friday).

THE following gentlemen have intimated their intention to attend the International Medical Congress at Washington in September next. Robert Roberts, M.R.C.S., Tuhwntirbwlich, Portmadoc; J. A. Friend, Esq., Cahircoulis, Co. Limerick; Dr. Bower, Springfield House, Bedford; Mr. John Norton, Surgeon, 38, John Street, Bedford Row, W.C.; J. B. Greathead, M.B., Grahamstown, South Africa; F. Morgan, Esq., M.R.C.S., Lamberoft, Uffculme, Cullompton, Devon.

THE BUTTER SUBSTITUTES BILL.

THE Select Committee on the Butter Substitutes Bill met last week, when they decided to adopt Sir R. Paget's Bill, but considerably strengthened its provisions. The word "oleomargarine" has been struck out of the Bill, and the word "butterine" everywhere substituted. As the Bill now stands, it provides that every package containing butterine must have that name marked on it in letters not less than three-quarters of an inch square; that, when butterine is exposed for sale, the letters indicating the sale must be an inch and a half square; and that in every case where it is sold by retail the wrapper must be marked, in letters of at least a quarter of an inch square, "Butterine, not butter."

THE HEALTH OF THE CROWN PRINCE.

WE are pleased to be able to state that the Crown Prince continues to make satisfactory progress. He can now make his voice heard distinctly, though, of course, very faintly; the congestion caused by the cold from which he was suffering last week has almost entirely disappeared; the slight reaction following the last operation has subsided, and there is not the least sign of recurrence of the disease. The base of the growth will probably require a little further treatment later on. His Imperial Highness's general health is excellent, and his spirits are much improved. Although Professor Virchow's report on the microscopic appearances of the portion of the growth last removed has not yet been formally sent in, we hear from Berlin that it is entirely confirmatory of the favourable opinions already given by the eminent pathologist.

THE THAMES VALLEY BRANCH.

THE President of the Thames Valley Branch of the British Medical Association (Dr. Langdon Down), gave a very successful garden *fête* at his residence at Hampton Wick on July 2nd. The almost palatial

mansion and the magnificent grounds of Normansfield were visited by several hundred ladies and gentlemen, who passed a very agreeable afternoon, thanks to the kindness and courtesy of the genial host and hostess. The music was supplied by the Hungarian Band and the Royal Hand-bell Ringers, the performance of the latter exciting general admiration.

ELECTROLYSIS IN ANGIOMA.

DR. JULIAN ALVAREZ speaks favourably (*Revista Balear*) of electricity in the treatment of angioma. He uses Onimus's apparatus, the positive electrode being plunged into the tumour, while the negative is moved about over the surface of the latter.

ST. MARY'S HOSPITAL MEDICAL SCHOOL.

THE prizes of St. Mary's Hospital Medical School will be distributed on Thursday, July 21st, at 3 P.M., by Sir Edward Sieveking. At the same time it is proposed to present Sir Edward with a testimonial (on his retirement as senior physician), in recognition of the eminent services he has rendered to St. Mary's Hospital. Subscriptions for this fund should be sent to the Dean.

REFLEX NASAL NEUROSES.

DR. GUYE, of Amsterdam, confirming the observations of the late Professor Hack and other workers, details a number of cases of reflex neuroses of the nasal passages, generally caused by polypi, adenoid vegetations, or inflammation of the mucous membrane. The patients in most cases were in the habit of sleeping with their mouths open, and complained of dryness of the throat. The most usual reflex affections were headache, otalgia, tinnitus aurium, supra-orbital neuralgia, asthma, and nocturnal incontinence. The only satisfactory treatment is removal of the primary nasal affection.

APOMORPHINE AND MORPHINE IN WHOOPING-COUGH.

DR. P. F. FEDOROFF, of Arkhangelsk, states (*Proceedings of the Arkhangelsk Medical Society*, part 2, 1887, p. 92) that he has obtained good results in whooping-cough by the internal use of the following mixture:—℞ Morphine muriatic. gr.ij.; apomorphine muriatic. gr.j.; acid. muriatic. ℥ss; aq. destill. ℥viii, M.D.S., a tablespoonful four times a day. The paroxysms are lessened both in number and frequency after the few first doses of the mixture.

LOCALISED FACIAL SWEATING.

DR. N. A. PARFANOVITCH, of Kaluga, relates (*Proceedings of the Kaluga Medical Society*, part 1, 1886, p. 18) two instances of that rare affection, one occurring in his own person. About six years ago he went through an attack of typhus fever, complicated with suppuration of the right parotid gland; this left behind it a considerable impairment of sensibility in the masseter muscles and the skin of the cheek, with marked liability to localised sweating. The perspiration (which is so profuse that large drops run down the cheek) is limited to the right temporal region, and invariably occurs during mastication. Another case is that of a lady, who also had a right parotid abscess, with subsequent formation of a deep scar, and who sometimes suffers from sweating limited to her cheeks, and coming on only on mastication.

TREATMENT OF PEMPHIGUS.

ACCORDING to Dr. Chambard, pemphigus should be treated in the same manner as a burn. If the bullæ are intact, they should be punctured with a needle, and the greater part of the liquid contents allowed to escape, the derma being at the same time carefully protected. The surfaces are then to be treated like a blister; a poultice must be applied and left on from twelve to twenty-four hours, after which it should be replaced by layers of cotton-wool, which are only removed when the parts are supposed to be quite healed. Immobilisation and isolation form the basis of the treatment of chronic pemphigus when the bullæ have opened spontaneously or have been punctured. Hebra says that hydropathy has proved successful in

some cases. In acute pemphigus sulphate of quinine should be given, and in the case of robust patients blood-letting may be beneficial. In chronic pemphigus tonic treatment is indicated; iron, bark, arsenic, and sulphate of strychnine giving excellent results.

INFANTILE DYSPEPSIA.

AT a recent meeting of the Académie de Médecine, M. Hayem read a paper on the treatment of dyspepsia in infancy, and especially that form of it which is accompanied by green-coloured diarrhoea. He points out that the green colour seen in diarrhoea of infants at the breast is due to a substance produced by a particular bacillus. He maintains that the disease is contagious, and that the germs deposited on the napkins from the stools are contaminating agents. All linen or flannel, therefore, which is soiled either by vomited matter or dejecta should be removed as quickly as possible, and plunged into pails containing a 1 per cent. solution of corrosive sublimate. A teaspoonful of a 2 per cent. solution of lactic acid should be given to the infant a quarter of an hour before putting it to the breast. From five to eight doses are given in twenty-four hours, which represents about 40 to 60 centigrammes of pure lactic acid.

BINIODIDE OF MERCURY AS AN ANTISEPTIC.

DR. L. M. CHEIFETZ, of Professor Grube's surgical *clinique*, in Kharkov, fully supports (*Vratch*, No. 22, 1887, p. 448) Dr. Bolshesolsky's statements as to the powerful antiseptic properties of biniodide of mercury (see *JOURNAL*, April 9th, 1887, p. 789). He used the biniodide dressing in sixty cases (including ovariectomy, lithotomy, herniotomy, resection of the knee-joint, removal of the breast, etc.), in all with most satisfactory results. The salt was employed in much less quantity than is necessary in the case of corrosive sublimate. The sole drawback of the biniodide is said to be its price. Among the sixty cases eczema was developed in five, and symptoms of gastric disorder appeared in three during the treatment.

A LION TAMER'S FATE.

WE have never ceased to protest against the impropriety of gratifying the morbid curiosity of a crowd of sightseers by performances involving serious risk to life and limb on the part of the performer or performers. The risks incidental to the occupation of a lion tamer have been made painfully evident by several more or less serious accidents during the last month or two, and now a well-known tamer has paid the penalty of his rashness by being killed outright before any assistance could be brought to bear. The unfortunate man was in the employ of the Redenbach Menagerie, stationed for the time being at Bourges, and during a rehearsal he was attacked by one of the lions, and such serious injuries were inflicted on his head and spine that he was dead when removed from the cage. This lamentable occurrence ought to lead our own authorities to suppress exhibitions as opposed to good taste as they are to common sense.

FURTHER DELAY IN LOCAL GOVERNMENT REFORM.

ALL who are anxious for a thorough and speedy reform of local government will have been not a little disappointed by the statement of the First Lord of the Treasury in the House of Commons on Monday last, to the effect that the Local Government Bill which has been so long promised, and was in a special manner referred to in the Budget speech of the present Chancellor of the Exchequer, is not, after all our waiting, to see the light this session. The circumstances which have led up to this decision of the Government are too well known to need any comment here, but there are many persons who will regret that the Government do not see their way, even though the session be far advanced, to fulfil their earlier intention of laying their proposals before Parliament and the public. We have already pointed out that on this matter there is a mass of educated public opinion outside the Cabinet to be reckoned with, and that there would be obvious advantage to the Government in securing the calm expression

of that public opinion upon the more vital parts of the scheme before the Cabinet bind themselves to any definite line of policy by the introduction of their Bill. The public mind is, however, to be appeased by the appointment of "a Boundary Commission to readjust the local areas in connection with the Government measure," in anticipation, presumably, of the introduction of that measure next session. But inasmuch as the settlement of local areas is, as Mr. Ritchie admitted, an essential preliminary to the settlement of the main question, and is a matter which will necessarily occupy a considerable time, the question naturally arises, Why was not the Commission appointed months ago, at the beginning instead of at the close of the session? The opinion will be very generally held that this ought to have been done, and the present proposal is merely an afterthought.

THE ANNUAL SHOW AT THE COLLEGE OF SURGEONS.

ON Thursday, according to the usual custom, the specimens added to the Museum since July, 1886, were exhibited at the College. They will remain on view in the Council room until Tuesday evening, July 12th. The pathological series is much enriched by a number of preparations which accompanied the Jacksonian prize essay of Mr. James Berry, and illustrate diseases of the thyroid gland and myxœdema. Two large collections of pathological drawings have been presented by Mr. Jonathan Hutchinson and Mr. Oliver Pemberton. To the comparative anatomy department has been added an egg of *Epyornis maximus*, a number of skeletons of birds, and five human skulls from the Hindu-Kush, presented by Mr. Giles, F.R.C.S. Mr. Pearson has enlarged the fine series of dissections illustrating human anatomy by some preparations of the vessels and nerves of the abdomen, the muscles, nerves, and glands of the tongue, the deep muscles of the larynx, and the interosseous ligaments of the tarsus and metatarsus. Next week we shall notice the annual report of the Conservator, Professor Stewart.

THE WATER-FAMINE AT SWANSEA.

SWANSEA has recently been suffering from a serious and unexpected scarcity of water, and, as a result of the inconvenience that has ensued, many uncharitable expressions have been used against the Corporation. In recent years, public attention has on more than one occasion been directed to defects in the water service of Swansea, and outbreaks of disease associated with such defects have shown the need for radical improvement. In 1885 Dr. Ballard, the Government inspector, somewhat severely criticised the water-supply arrangements, and urged the Corporation to proceed expeditiously to increase the public supply, and to make such necessary improvements as would enable them to give everywhere a constant supply. He also urged them to secure their water from dangerous pollution. His advice seemed to stimulate the authority to accelerated action. But although a very considerable amount of money has been expended by the Corporation on their water-works, and in providing increased storage accommodation, their supply has failed at the critical moment, owing, it is alleged, to a leakage in one of the reservoirs; the result has been that for several days during the recent hot weather there was a veritable water-famine in the town. It is to be hoped that impure or doubtful sources of supply, such as disused mines, have not been recklessly resorted to. It is also to be hoped that the inhabitants have adopted the precaution of boiling all water before use for domestic purposes, and that the need for this precaution has been made publicly known.

THE PANAMA CANAL.

WHEN this gigantic undertaking, which is gradually approaching completion, is finished, the medical history of the undertaking ought to be written. A statement was recently made on apparently good authority to the effect that the annual mortality amounted to the appalling percentage of 60 for the coloured labourers and 80 for the white. These figures are very much greater than are justified by statistics, for, according to an official document recently published,

the average annual mortality on the works does not exceed 10 per cent, but even this figure is fearfully high. Probably very few enterprises in modern times have proved as fatal to the men engaged as this one, a result which is attributable to the extremely unhealthy nature of the climate and also to the insanitary conditions under which these large aggregations of men have had to live. The mortality at the commencement of the excavations was still higher, but the company has recently become alive to the fact that this high rate of mortality is very expensive, and have therefore taken some steps to render the dwellings and manner of living of the men less prejudicial to health and life. Unfortunately the disease and mortality statistics of such undertakings are almost invariably kept in a very perfunctory style. It would have been very instructive to have had some information with respect to death from disease and accident among the men employed in carrying out the recent metropolitan improvements. It would probably have been made apparent that the soil of old cities like London cannot be disturbed on a large scale without a corresponding tribute of mortality. The tunnel which is shortly to be driven beneath the Thames offers an excellent opportunity for the collection of precisely this kind of information.

REMOVAL OF TWENTY-SIX CALCULI BY LITHOTOMY.

AT the meeting of the Imperial and Royal Society of Practitioners in Vienna, Dr. Dittel read notes of a remarkable case of lithotomy which he had performed. The patient was a great wine-drinker. Fourteen years before operation he suffered from pains in the lumbar region and hæmaturia. The pains lessened gradually, but again became severe. After suffering great agony for six weeks he consulted Dr. Dittel. The presence of numerous calculi in the bladder was easily discovered by the use of the scund. The patient looked sickly, but was rather fat. The urine was putrid, and gave evidence of diphtheritic inflammation of the bladder. Washing out with solutions of carbolic acid and chloride of zinc hardly improved the condition of the bladder, though its capacity was increased. The case did not appear suitable for any form of lithotripsy. Dr. Dittel considered that the suprapubic operation was unadvisable, owing to the corpulence of the subject and the difficulty of keeping the wound aseptic. He determined, therefore, upon performing perineal lithotomy. The operation was performed on May 29th. During the whole of its course a solution of salicylic acid was made to run into the bladder through the urethra. Twenty-six calculi, "which could not exactly be called small," were removed. The patient was progressing favourably on June 10th, and the temperature had been high only on one occasion.

STUDENTS IN PARIS.

SOME interesting statistics are contained in a recent report of the General Council of the Faculties of Paris. The faculties contain altogether nearly 11,000 students, comprising 3,696 medical students, of whom 108 are females and 593 foreigners. Special allusion is made in this report to the diligence and success at examinations of the female portion of this scholastic community. No figures are given bearing on the nationality of the foreign students, but a large proportion of them are Roumanian. Of the female students, a large number are American and English, who seek on a foreign soil the facilities they are denied in their respective countries. No distinction is made in the course or place of study for the latter, and they share all the advantages of the male students. It will be remembered that they have been declared eligible for election to the resident appointments.

SMALL-POX IN JAMAICA.

SMALL-POX still prevails in Jamaica, though its virulence seems to have somewhat abated. Our latest advices show that from the 7th to the 21st of May 266 cases of the disease and 15 deaths occurred on the island. Twenty-one of these cases and two of the deaths were in Kingston. During the following fortnight 100 further cases, with 8

deaths occurred, of which 7 cases and 2 deaths were in Kingston. From the commencement of the epidemic in March, 1886, up to the 5th June, 1887, 7,341 cases of small-pox, including 677 deaths, occurred on the island, and of these 2,090 cases and 373 deaths were in Kingston. During the epidemic, especially during the earlier stages, there has been a curiously greater mortality from the disease in proportion to attacks in Kingston than in the rest of the island. It will be interesting if this point has been noticed by the local observers, and if a satisfactory explanation of it be forthcoming.

THE CASE OF MISS CASS.

THOUGH the defeat which befell the Government on Tuesday night is no more than a just punishment for its crass obstinacy in refusing even to inquire into the circumstances of the arrest of Miss Cass, many persons will be inclined to regret that the incident has ended in an implied censure on a Cabinet Minister, for the simple reason that its transformation into a political event will be apt to obscure the real issue. This is not so much the wisdom or unwisdom of Mr. Matthews and Mr. W. H. Smith as the fact disclosed by this incident that the Police authorities of this metropolis practically admit that no respectable woman can traverse Regent Street in the evening. This has frequently been asserted, and the reproach has been denied. It is something gained to have the truth admitted at last, and Mr. Newton, the police-magistrate, almost deserves to be forgiven his mistake. The condition of Regent Street, the Haymarket, and the adjoining thoroughfares, not only by night, but also during the afternoon, is a crying disgrace to our civilisation, and a standing menace to the moral and physical health of old and young.

LECTURES AT THE ROYAL COLLEGE OF PHYSICIANS.

THE first lectures under the new regulations of the Croonian Trust will be delivered by Dr. Donald Macalister, of St. John's College, Cambridge; the subject has not yet been selected. The inauguration of the new arrangements will afford a valuable opportunity for establishing a good precedent. Dr. Macalister will have a considerable sum at his disposal, over and above the honorarium, with which to carry out investigations; and if he takes advantage of this opportunity to give the results of really good original work—as he is well able to do—he will raise a standard to which his successors will always seek to attain. The Gulstonian Lectures next year will be given by Dr. Julius Mickle, and will relate to the pathology of insanity; the Lumleian Lectures by Dr. W. H. Dickinson, who has chosen for his subject the changes in the tongue considered with reference to constitutional and organic diseases—that is to say, considered symptomatically. Dr. Samuel West will deliver the Bradshaw Lecture on August 18th; his subject is Pneumothorax.

INSANITARY DWELLINGS AND THE LONDON POOR.

A LETTER has been addressed by Lord Henry Bruce to members of the House of Commons, asking their support in bringing the question of the dwellings of the poor in our large cities to a final and successful issue. As regards London, he maintains the evil has been allowed to increase so enormously that the figures are now so large that it is quite impossible for private enterprise to cope successfully with them; and that this movement must be undertaken by the Metropolitan Board of Works, which has failed in carrying out what were the intentions of Lord Salisbury's Commission. He adds that the Metropolitan Board of Works condemns a district, but in many instances does nothing further. "The result is that the landlord declines to do anything more for the improvement of his property, increases the already exorbitant rent, and fills these awful dens with more families (many of whom live underground) in order to get a greater value for the compulsory purchase of his property." "This," he adds, "is no exaggeration, and no other country but England would dream of tolerating such a transparent and inhuman fraud. It is well known that there are more than 50,000 families in London alone who have only one room each to live in, and who exist more like vermin than human beings. They are driven out of one place into another, although no better accommodation is provided for them. The Peabody Trustees

have certainly done a great deal of good, but they have not gone down to the lowest stratum." Lord H. Bruce expresses himself confident that better dwellings for the poor, if only given a fair trial, would positively pay their own way, and adds, "it is idle to talk about State-aided emigration when we neglect the primary duties of fellow-citizenship."

A NEW TEST FOR MORPHINE.

A NOVEL and very beautiful test for the presence of small quantities of morphine ($\frac{1}{100}$ gr.) has recently been suggested. To the solution to be tested add a few drops of strong sulphuric acid and about the same quantity of a solution of sulphate of sodium. Heat the mixture in a porcelain capsule, and directly it begins to give off sulphuric vapour cool it suddenly, when it assumes (if morphine be present) an intense violet colouration. If the mixture be further heated, it turns brown, and when cooled, the addition of a few drops of water determines a vivid red colouration, which turns a pale green if more water be added. If at this stage an equal bulk of chloroform be poured into the mixture and well shaken, the chloroform becomes of a bright blue colour.

HÆMOGLOBINOMETRY.

IN the *Correspondenz Blatt für Schweizer Aerzte*, No. 10, 1887, p. 299, Dr. Herman Sahli, of Berne, writes that, having found Gowers's hæmoglobinometer practically useless in artificial light, in consequence of the apparatus having too high figures under such conditions, he has prepared a new standard mixture of picric acid and carmine, which, under artificial illumination, has the same optical properties as a 1 per cent. solution of hæmoglobin. In daylight the colour of the two solutions is quite different. When the comparative procedure is undertaken, the tubes (one containing the blood to be examined, another containing Sahli's solution) must be placed against the white globe of a petroleum lamp or against a sheet of thin white paper held between the tubes and a candle. A series of control experiments showed that the results obtained by examining the blood with Sahli's solution in the evening, were almost identical with those given by the usual method in daylight.

PROFESSIONAL ETIQUETTE AND UNQUALIFIED PRACTITIONERS.

IT is on the whole very satisfactory to notice that the better portion of the lay press when they write on matters professional do not fail to see the uses of professional etiquette. "People are often unreasonably inclined to abuse professional etiquette," writes the *Spectator*, "as if it were mere nonsense.....Yet it is the public who really benefit by the etiquette, and not the doctors.....If it were once allowable for doctors to advertise themselves, every doctor would have to advertise himself or fall out of the ranks. There is nothing disgusting or demoralising in a man offering to sell stoves 'that save half the coal;' but there is something utterly disgusting in the idea of a doctor publicly offering to treat incurable diseases better than his fellows, or promising cures in an impossible time." That is plain speaking, and all the more undeniable in that it is plain. It would be as well sometimes if within the limits of professional literature the various disguises were torn aside, and the matter put equally plainly. Again, in the matter of unqualified assistants, we are very glad to find the *Spectator* coming to very much the same conclusions that we were expounding last week. It does not at all shrink from saying that the methods devised by the law to check the practice of the unqualified practitioner seem circuitous and anomalous when once we allow the unqualified practitioner to practise at all. We allow him the practice certainly, but we say his patients shall never be obliged to pay him anything. Of course, they may pay him what they like, and sometimes they do pay him what he likes. They can recover *ad infinitum* for damages and he can recover nothing for services. Much may go on, of course, without its coming into Court, and so far there is much to be regretted. But when once the matter is in Court,

the judges speak with no uncertain voice as to what is the law, and how sternly any attempts to "defeat the object and intention of the Act" will be met. When an action by an unqualified practitioner to recover money, like that of *Howarth v. Breatly*, is brought in a local Court, and decided against the plaintiff, and the decision is confirmed on appeal by the Lord Chief Justice and Mr. Justice Denman, it brings the matter to public notice after a fashion that excites many lay comments and conclusions in unprofessional quarters, which will not be easily forgotten, and will be very important in stopping a mischievous practice.

A SEXLESS BEING.

In the *Gazette Médicale de Paris*, Dr. Polaillon describes a remarkable case of malformation in a patient aged 31, who died of hepatic abscess in the Hôpital de la Pitié. The patient had been a tailor, then a general dealer. He presented the external appearances of a woman, being completely beardless, and bearing small but distinct mammæ. His voice was feminine, his stature low, and he was a great coward, displaying much mental perturbation at the prospect of dressing his abscess, and shrieking during the process. The pelvis was broad, and quite of the female type. From a distinct and prominent mons veneris ran two cutaneous folds, corresponding precisely to labia majora; they joined posteriorly in front of the anus. The penis was hardly an inch and a half long, but perfectly formed, and the relations of the corpora cavernosa, glans, and urethra were normal. The prepuce was long, and formed a phimosia. The scrotum was small and perfectly empty, and there was no depression or cavity representing a vaginal or vulvar orifice. The most remarkable feature of the case was the entire absence of testes, spermatic cord, and vesiculæ seminales. The neck of the bladder was of the male type; no trace of ovaries or uterus existed. The recto-vesical pouch was very deep.

HEMIOPIA V. WORD-BLINDNESS.

As the science of medicine becomes more differentiated, new terms come into use, and there is a tendency to restrict more and more the use of the older ones. This, although a great saving of trouble to the expert, occasionally causes some confusion to the novice, or to those who have allowed their knowledge to fall behind the time. Some years ago the terms amaurosis and glaucoma were frequently applied to conditions to which no one now would attach them. There is now a tendency to restrict further the application of the term hemiopia, and to employ it only for cases in which the lesion is obviously not intra-ocular. The loss of one half of the visual field may of course occur from an intra-ocular lesion, such as a hæmorrhage, or detachment of the retina, but in such cases the boundary line between the blind and the seeing portions of the field hardly ever coincides with the middle of the field, and is generally irregular, while the condition is usually uni-ocular. Although such a condition might be called hemiopia of one eye, and was formerly frequently so designated, it is now more usual to speak in such a case of a loss of the upper or lower portion of the visual field, etc., and to restrict the term hemiopia to cases in which the line of separation is vertical or nearly so, and nearly bisects the field. The terms hemianopia, hemianopsia, hemiopia, are used indifferently to express the same condition, and with English writers hemiopia is the favourite. Since hemianopia or hemianopsia means that one half of each visual field is blind, the terms left, right, temporal, and nasal hemianopia would respectively indicate that there was loss of function over the portions of the field named. The term hemiopia, or half sight, is, it must be remembered, used in exactly the same way, and although the word itself does not, as in the previous instance, indicate it, "left hemiopia," etc., also means a loss of the half of the field named. The term "homonymous hemianopsia," is sometimes used to express the fact that in both the fields the defect is to the same side of the middle line, and "crossed hemianopsia" to indicate a bilateral, temporal, or nasal, defect. "Complete hemianopsia" means that the entire half of the field is affected; the term "absolute;" that the blindness over the affected

area is total. Another term, which is of comparatively recent origin, is "word-blindness" (alexia, or dyslexia) a condition in which with perfect vision there is an inability to comprehend the meaning of word-symbols; obviously this is closely allied to aphasia, but not necessarily associated with it.

THE DISCUSSION ON TOXIC AMBLYOPIA AT THE OPHTHALMOLOGICAL SOCIETY.

THE papers and discussion, at the Ophthalmological Society, on the subject of tobacco amaurosis (for the effect of other toxic agents was hardly considered) showed a considerable unanimity of opinion on a subject of which our knowledge is comparatively recent. But a few years ago there were many, whose opinion was of weight, who entirely disbelieved in the power of tobacco alone to cause amblyopia; we doubt if there are any such now who have carefully examined the evidence. Some difference of opinion exists as to the effect of alcohol when used in combination with tobacco, but the evidence appears directly to contradict the opinion that the alcohol is the more potent agent of the two in the cases in which they are both used. The cases in which alcohol was taken to excess, and no tobacco was used, seem indeed to show that the amaurosis produced by this agent is not, as in the tobacco cases, limited to the central portion of the field, but is accompanied by concentric contraction; the cases, however, are too few to warrant positive statements on this point. It appears now to be well established that the amaurosis may come on while the patient is still smoking the same quantity and quality of tobacco that he has been doing for years; it would seem therefore that some determining cause is required. Mr. MacHardy's suggestion that this will generally be found in some nervous shock seems plausible; in some cases, no doubt, physical hardship, such as insufficient food or lowered vitality, simply as the result of age, may account for the onset of the affection. It is probable that the kind of tobacco has as much or more to do with the symptoms than its quantity, and it is curious how much ignorance exists as to the relative difference of strength in tobaccos. Among many of the working classes, bird's-eye has the reputation of being stronger than cavendish or shag, probably because it is hot. All the speakers agreed as to the favourable prognosis in these cases, provided the smoking is discontinued. It seems probable that this is the main agent in effecting the cure, for equally good results appear to have been obtained by strychnine as by large doses of iodide of potassium.

CAMBRIDGE MEDICAL GRADUATES' CLUB.

THE annual meeting and dinner of this club took place on Wednesday evening, June 29th, at the Hotel Victoria, when upwards of sixty members were present, under the presidency of Mr. T. Holmes, the hon. treasurer of the club. The annual report of the club, which now numbers over 200 members, revealed a most prosperous state of affairs. The guests of the evening were the President of the General Medical Council, the President of the Royal College of Surgeons, and the Directors-General of the Medical Departments of the Army and Navy. The Vice-Chancellor of the University of Cambridge and Dr. William Ogle, who had also accepted invitations, were unavoidably absent. The chief toasts were "Prosperity to the Club," proposed by the Chairman, and the "Health of the Guests," for whom Mr. J. Marshall, F.R.S., and Mr. W. S. Savory, F.R.S., responded.

THE ERASMUS WILSON BEQUEST.

As the precise conditions under which the Royal College of Surgeons has become entitled to the bulk of the late Sir Erasmus Wilson's fortune have been called in question, it may be as well to state that it appears, on examination of the Register at Somerset House, that the terms of the will leave the fullest discretionary powers to the College. The testator directed that the whole of his property should, subject to contingencies which have now arisen, become vested in certain trustees who, after discharging certain legacies and annuities, should pay the whole to the College of Surgeons. The purpose to which the College

was to devote the bequest was not in any way defined, and the power of the College over the bequest was not in any way limited. The Council of the College, as the governing body, has assumed that it has the whole sum absolutely at its disposal to do with it what may seem good to it, but it may at least be asked whether the "Council" and the "College" are convertible terms, and whether a sum of money bequeathed to the College can be equitably disbursed by the representatives of one section only of the commonalty of that College.

CHOLERA AND MILK.

AN instructive example of the facility with which milk may become the medium for the propagation of a zymotic disease is afforded by a limited epidemic of cholera which occurred on board a sailing ship, the *Ardenclotha*, lying in the port of Calcutta. Dr. W. J. Simpson, the health officer of Calcutta, investigated the outbreak with great care, and in a most admirable report, published in the *Indian Medical Gazette*, offers strong evidence that the outbreak was not to be traced to any peculiar climatic condition, to the state of the ship, to the water, or to any circumstances connected with the visits of the men on shore. Pursuing the inquiry, it was ascertained that ten of the men had used milk supplied by a native who visited the ship daily; of these ten men nine were affected; four died of cholera, and five had severe diarrhoea. With regard to one other man who was the last to suffer from cholera, it was doubtful whether he drank any of this milk or not; as he sickened after the others, he may have contracted the disease from an earlier case. Only one man who drank the milk escaped, and he only took a very small quantity. The native who supplied the milk kept one cow, which was in good health, but he frankly admitted that the milk he supplied to the sailors contained about 25 per cent. of added water; and it also came out that several of his neighbours had suffered from cholera. A case had been imported on March 2nd; the dejecta from this patient drained into the tank on which the milkman's house stood. The first case among the milkman's neighbours occurred on March 7th; the first case of diarrhoea among the crew of the *Ardenclotha* on the same day, and the first case recognised as cholera two days later. This, taken along with the admission that water was added to the milk, and that, with one exception, the remainder of the crew, fourteen in number, who had not drunk the milk, did not suffer from cholera or diarrhoea, leaves very little doubt as to the origin of the epidemic. The milk was clearly the connecting link between the epidemic in the hamlet and on board the ship, and it was without much doubt rendered infective by the addition of the tank water fouled by the dejecta of the imported case. The investigation also shows that cholera, while prevailing in a distant locality, may be established simultaneously at two widely different places, and yet be due to a common cause which is preventable.

THE NIGHTINGALE HOME.

AN interesting gathering took place at the Nightingale Home in St. Thomas's Hospital on June 29th, on the occasion of the presentation, by the former and present pupil nurses of the Nightingale Fund School, of a testimonial to Mrs. Wardroper, who is retiring from the post of matron. There was a large assemblage of Nightingale nurses, many of them matrons or superintendents of nurses. The Rt. Hon. Sir Harry Verney, the Chairman of the Council of the Nightingale Fund, made a short address, in which he spoke of the services which Mrs. Wardroper, as Superintendent of the school since its foundation in 1860, had rendered to the profession of nursing, and of the debt of gratitude which was due to her from the public as well as from those trained in the school under her care. The gift consisted of a very handsome tea and coffee service, with a salver bearing the following inscription:—"Presented to Mrs. Wardroper on her resignation of the matronship of St. Thomas's Hospital by 286 former and present probationer nurses of the Nightingale Fund Training School, over which she has presided from its beginning for twenty-seven years, as a

mark of their grateful appreciation of the inestimable services rendered by her to the profession of nursing, and of their affectionate regard and esteem." It was accompanied by a scroll bearing the names of the donors, and also by two large-sized photographic portraits of Mrs. Wardroper, to be placed in the Nightingale Home. Mr. H. Bonham Clarke, the Secretary of the Nightingale Fund, on behalf of Mrs. Wardroper, expressed in a few words how much she was touched and gratified by this evidence of the kindly and affectionate feelings towards her of the former pupils of the school. The Treasurer of the Hospital, Mr. Alderman Stone, subsequently read a resolution of the Court of Governors of the hospital, expressing their high appreciation of the valuable services which she had rendered to the hospital during her thirty-three years' tenure of the office of matron, and he presented her with a framed copy of the minute of the Court.

A HEALTHY ATMOSPHERE.

WE are glad to forget, amid the bright and almost overpowering rays of a July sun, the yellow smoke-laden fogs of a dull November day, but their reappearance under favourable climatic conditions is none the less sure, and it therefore favours us to encourage the adoption of every means likely to diminish the virulence of an inevitable evil. The Smoke Abatement Exhibition of 1881, and the subsequent exertions of the Smoke Abatement Institute, have done much to stimulate the manufacture and to promote the use of smokeless grates and kitcheners in our homes, and to emphasise the utility of the burning of smokeless fuel. With a view to rekindle the flagging public interest in this important subject, an exhibition of smoke abating appliances has this week been opened at the Albert Palace, Battersea, by the Marquis of Lorne, who was accompanied by Mr. Ernest Hart, Sir Douglas Galton, Mr. Octavius Morgan, M.P., etc. His lordship, in the course of his remarks, spoke of the economy which attended the use of stoves which produced complete combustion, and the great waste of fuel which prevailed in this country as compared with some others he had visited. Mr. Ernest Hart called attention to the fact that great progress had been made since he and others had first taken this subject in hand, and that there was no manufacturing process which could not be carried on without the production of smoke. Fire-grates could now be had which would give from 20 to 30 per cent. more heat and 40 per cent. less smoke. He desired to see an Act passed to compel all factories and workshops, and even hotels, to be carried on smokelessly. To effect the desired change they must bring home to the people the fact that the black pall and canopy of smoke, which shut out the sunlight and robbed every plant and human being in this great city of its due share of health and vitality, was in reality composed of some tons of solid coal, and arose from ignorance, extravagance, and malpractice on the part of the community.

SCOTLAND.

DENTAL SCHOOL, EDINBURGH.

THE quarterly report of the Edinburgh Dental Hospital submitted last week shows that during the quarter from April 1st until June 30th the total number of patients treated at the institution was 1,899. Of these, 715 were females and 614 males. Seventy-five cases were treated under anæsthetics, and 495 stoppings were inserted.

COMBE LECTURES ON PHYSIOLOGY.

THE third session of Combe Lectures on Physiology, delivered by Dr. Andrew Wilson, F.R.S.E., was concluded last Friday, when the prizes were presented. The lectures, which comprised three courses of fifteen lectures each, were delivered to the teaching profession in Edinburgh and Glasgow, and consisted of instruction in the chief departments of personal and public health, physiology, and anatomy. The

first year the subject was general anatomy and physiology; the second year, the physiology of the nervous system; and the third year, health as applied to the home and the school. The course has been very successful, the average attendance being close upon 400. Forty-five students entered for the examination, and of these forty-one obtained over 50 per cent. of marks. Mr. Clark, Secretary to the Combe Trustees, presided at the meeting held, and, on behalf of the trustees, expressed his gratification at the success of the course and the able manner in which it had been conducted by Dr. Andrew Wilson, to whom they owed many thanks.

CHALMERS HOSPITAL, EDINBURGH.

The vacancy in the staff of Chalmers Hospital, Edinburgh, caused by the retirement of Dr. Halliday Douglas, has just been filled up by the appointment of Dr. G. W. Balfour. The appointment is in the gift of a board of directors, who are mostly advocates. It caused quite a flutter among the younger aspirants for hospital appointments in Edinburgh, but the action of the directors in offering it to a man of Dr. Balfour's position and his acceptance of it have ended the whole affair in a satisfactory manner.

ROYAL HOSPITAL FOR SICK CHILDREN, EDINBURGH.

The number of patients treated in the Royal Hospital for Sick Children during the month of June was 110. Of these, 48 new cases were admitted during the month, and 62 remained from the month of May. The average daily number of sick was 56; there were 34 patients discharged from the Hospital cured, and 9 were relieved. At the Dispensary 581 patients were treated, and 16 were vaccinated. Of 312 new cases treated during the month, 249 were from the city, 54 from Leith, and 9 from the country. Thus the total number of cases treated at the Hospital during the month was 657.

POST-GRADUATE COURSE IN MEDICINE AT EDINBURGH.

A COMPLETE syllabus has now been arranged of the autumn post-graduate course in medicine at Edinburgh. The course, it will be remembered, was inaugurated last year, and received the grateful and enthusiastic support of a considerable number of graduates. This year the list of classes is more extended and detailed. The advantage of the present arrangement is that particular subjects have been allotted to those teachers of the University and Extramural School of Medicine whose names are more or less closely associated with the progress of the particular branch of study. The full prospectus may be obtained on application to either of the secretaries, Professor Chiene or Dr. Claud Muirhead, Charlotte Square, Edinburgh. The course begins in the last week of September, and lasts three weeks. A general entrance fee of two guineas admits to all the lectures and demonstrations.

THE SCARLATINA BACILLUS.

IN view of the widespread interest awakened by the announcement that a definite bacillus, provisionally termed the bacillus scarlatinæ, has been obtained from the blood and desquamation of scarlatinal patients, as recorded by Dr. Edington, of Edinburgh, in the columns of the JOURNAL, the Medico-Chirurgical Society of Edinburgh has appointed a committee to investigate the method and repeat the experiments conducted by Dr. Edington with a view, if possible, to the speedy corroboration of the important discovery. The Committee consists of Professors Grainger Stewart (President), Greenfield, and Drs. Carmichael, Hare, Philip, and Woodhead. The Society has arranged a discussion on scarlatina for Wednesday, July 20th, when it is hoped the Committee may have some preliminary reports to offer.

THE GLASGOW MEDICAL CHARITIES COMMITTEE.

At a meeting of this committee with the Medical Committee of the Charity Organisation Society, it was decided to hold a conference with the members of the boards of management to the various charities and of

the parochial boards, for the purpose of discussing any points connected with the abuse of medical charity which may require elucidation, and for appointing a final representative committee to take steps in the way of instituting some practicable system of restricting gratuitous aid to those really needy and deserving.

ABERDEEN CITY HOSPITAL.

THE Public Health Committee of Aberdeen Town Council, at a meeting on Monday, discussed the report of Mr. Fasser (Superintendent of Edinburgh Royal Infirmary), which contained several recommendations regarding the staff, the residents, and the construction and administration of the hospital generally. Several suggestions in the first part of the report, dealing with the present building, were adopted. Consideration of other points was delayed, and the question of extension and enlargement, either temporary or permanent, of the hospital was also deferred until Dr. Theodore Thomson should report on the matter.

THE HEAT OF THE WEATHER.

PROFESSOR GRANT, of the Observatory, Glasgow, speaks of the great heat during the week before last as phenomenal, and as prevailing "throughout the whole week with an intensity which, for the month of June, has not been paralleled during the last quarter of a century, and probably has been unsurpassed during a much longer period." The highest temperature was reached on the 25th, when the maximum temperature in the shade was 82°.7, and the maximum in the sun was 133°.2. The lowest reading was on the 20th, when it was 65°.9 in the shade, and 118°.5 in the sun. During three days of the week, 23rd, 24th, and 25th, it was above 130° in the sun.

IRELAND.

A DUBLIN contemporary understands that the Queen has been pleased to notify her intention of conferring as Jubilee honours the title of baronet on Dr. John Thomas Banks, Physician in Ordinary to Her Majesty the Queen in Ireland, and President-Elect of the British Medical Association, and Dr. Henry Haswell Head, ex-President of the King and Queen's College of Physicians, Ireland.

THE HEAT-WAVE IN BELFAST.

BELFAST has lately passed through a fortnight of the hottest weather within living memory. The thermometer ranged daily from 75° to 77° F. in the shade to 100° to 110° in the sun. The wind was north-east during most of the time, and the skies perfectly cloudless. The weather was more like Australia than Ireland. No cases of sun-stroke occurred in Belfast, but one or two have been reported from country districts. It speaks well for the sanitary state of Belfast that this unusual heat has not hitherto been productive of any material increase of zymotic disease.

THE ULSTER EYE, EAR, AND THROAT HOSPITAL, BELFAST.

THE annual report of this institution contains a detailed account of 49 cases of cataract operated on by Dr. McKeown. Of these, 28 were cases of cataract ripe and unripe; 5 were cases of cataract complicated by serious affections of the eye or its appendages; 2 were cases of congenital cataract; 10 were cases of traumatic cataract; and 1 was a case of idiopathic cataract in a young person. In all the above cases Dr. McKeown employed his new injection method, which has already come into such high professional favour, and his results have been excellent. In the remaining three cases injection was not employed.

LIMERICK LUNATIC ASYLUM.

THE Limerick Corporation, at a private meeting held this week, passed a resolution recommending the Town Council to reserve the question of payment of the annual presentment to be fixed at the present

assizes. This action of the corporation is due to the fact that His Excellency refused to appoint several members of their body as governors of the asylum. The resolution and the action to be taken is childish in the extreme, inasmuch as the presentment cannot be refused.

POOR-LAW APPOINTMENTS.

DR. HEGARTY, of Kilrea, has been appointed to the Draperstown Dispensary District, and Dr. Nesbitt has been appointed to the Donaghadee District in succession to Dr. Stuart.

TUAM WATER SUPPLY.

THE guardians have authorised a civil engineer to report as to the best means of providing a temporary water supply for the inhabitants, inasmuch as the river water is polluted with sewage. He recommends the guardians to obtain the supply from the Tubberanny Springs as being the best source. As typhoid fever is at present prevalent in Tuam, no time should be lost in obtaining an abundant and pure supply of water.

CORK MATERNITY HOSPITAL.

DURING the past year the work of the Maternity has considerably increased, and 479 cases were attended, being the largest number in any year since its foundation. The special function of the institution is to attend the patients at their own homes, as it is found by experience that many women prefer to remain in their own homes, no matter how miserable the surroundings or inadequate the preparations for their approaching illness. Considering the large amount of work done by the Cork Maternity, the expenditure has been wonderfully small, and it is a subject of deep regret that it is not so well supported as it should be. The result is that it is in a chronic state of debt, and at the end of the year a large sum was due to the treasurer. This is not as it should be, and we think were the institution better known, its funds would be considerably augmented, and the present debt wiped off.

HEALTH OF BELFAST.

DR. S. BROWNE's monthly report to the Town Council at its last meeting shows that the health of the town continues good, in spite of the prolonged drought and high temperature. The only disease present in epidemic form has been German measles, which has prevailed widely, but in a mild form. The cases have closely resembled ordinary measles, the chief points of distinction being the absence of definite prodromata, and the mildness of the attacks. The eruption in many cases could not be distinguished from the ordinary rash of morbilli. It is worthy of note that this epidemic was coincident with a spell of exceptionally hot weather.

MERCER'S HOSPITAL.

WE understand that a notice of motion was given at a meeting of the governors of the hospital on June 8th by a member of the medical staff, to remove one of his colleagues from his position as one of the surgeons to the hospital. The latter gentleman recently brought the case before the Vice-Chancellor, and sought an order that the governor should be restrained from removing him from his position until the hearing of his action against the Board of Governors, or in any way interfering with the exercise by the plaintiff of his rights and privileges as a surgeon and governor of the hospital. A postponement was asked for by the defendant and Board of Governors, and granted on an undertaking being given by the defendants not to take the action which was sought to be restrained pending the hearing of the cause.

BELFAST ROYAL HOSPITAL.

AT a meeting of the Board of Management of this institution upon July 2nd, Miss Bostock, of Leeds, was selected to fill the post of lady superintendent, of the Throne Hospital. There were nineteen candidates. At a meeting of the life-governors and General Committee of

the same institution, held upon July 4th, Dr. Arthur Powell was unanimously elected house-surgeon in the room of Dr. Dunlop, resigned. Dr. Dunlop was subsequently elected by a unanimous vote to the post of house-physician, vacant by the resignation of Dr. Calwell, whose long services in the Royal Hospital were cordially recognised by several speakers.

ADDRESS TO THE QUEEN.

THE following communication has been received by Dr. Withers Moore, President of the British Medical Association, from the Home Secretary.

Whitehall, June 29th, 1887.

Sir,—I am commanded by the Queen to thank you for the loyal and dutiful address from the British Medical Association, which you presented to Her Majesty at Windsor Castle on the 27th instant.—I am, Sir, your obedient Servant,

HENRY MATTHEWS,

The President of the British Medical Association.

THE COMING VISIT OF THE BRITISH MEDICAL ASSOCIATION TO DUBLIN.

[FROM A DUBLIN CORRESPONDENT.]

LIVING in Dublin, it may appear somewhat strange to say it seems excusable to envy those who live beyond that city and its surroundings, because of the pleasure which a first visit to the capital of the island about which and its inhabitants so many and such diverse opinions are held, is sure to afford. But such is the truth, for in our mind (and we speak after visiting and residing at, for a greater or less time, many of the most interesting and sunniest spots of the world's wide surface), we know of no place which for beauty of landscape, variety of surface, hill and dale, water and woodland, coupled with the most luxuriant vegetation of the temperate climes and wildness and solemn grandeur, can on the whole compare with Dublin and its surroundings.

To say that the tourist may expect a rich treat is no exaggeration. He that is in search of the picturesque will not be disappointed, whether his mode of progression be that so commonly known here as "shank's mare" (his own good legs), or the iron horse, the yacht, or any of the various species of vehicles, including the bicycle or tricycle. Of the latter, it may be said to be one of the best to enable the experienced to see quickly and well the beauties of most of the Irish scenery. Indeed, one distinguished scientist of very high attainments remarked that he thought he knew the county Wicklow well some years ago, but until he explored its beauties on a tricycle, he found he was very imperfectly acquainted with them. It is not easy for the tourist to travel in this fashion, however; while the rail and "the Irish jaunting car" are excellent substitutes for cycling.

The geologist will find not a little to interest him, for within a short run from Dublin he may find lead and copper, and the strata where gold has been found, also sulphur and iron, while the varieties of stone for building and ornamental purposes found in the counties of Dublin and Wicklow are abundant and valuable.

The botanist will find much in his own line, from the little drosera on the mountains to the native arbutus. The numerous varieties of ivy and holly, and the forest-trees, of which the beeches at Lucan demesne and the oaks of that of Powerscourt are examples, cannot fail to attract him. He will find great varieties of species of plants on the sandy shores of the two counties named above and the adjoining islands; of these, the samphire, the sea-lavender, the sea-pink, fine varieties of geranium, and in many places the digitalis, the conium, and officinal labiate, fœniculum, etc.

To those interested in the now much-vexed questions of agriculture, horses, dairy and other cattle, a large field of observation will be open if they feel inclined to pay a more than three-or-four-day visit to Dublin.

The antiquarian and the student will find much in Dublin to call for his investigation in the ancient volumes and collections of Celtic and other antiquities in Trinity College, the Royal Irish Academy, the Royal Dublin Society, etc., as well as in the two cathedrals of Christ Church and St. Patrick, the parish churches of St. Michan, St. Audone, and St. Dolough, the round tower of Clondalkin, and the portion remaining at Shankill, and that of the Seven Churches of Glendalough. While in more extended trips, which may be easily accomplished in a run of one or two days each, may be seen the fine remains of a cathedral, a palace, a prison, an abbey and round tower,

with a second abbey close by, at Cashel; and those remarkable antiquities of Mellifont, Monasterboice, Clonmacnoise, Holycross, and others too numerous to mention. To more than mention Killarney, McGillicuddy's Reeks, the highest ground in the island, the Giant's Causeway, Derry, Limerick, the Shannon, the Boyne, the valley of Spenser's Blackwater, and Cove of Cork, would be to those who know of Ireland and Ireland's history superfluous as a reminder, should time allow a visit.

The medical man, in his own special department, besides our allusion above to the important hygienic question of the food-supply, will find a good deal to interest him in the Dublin hospitals and dispensaries, convalescent homes, and homes for the artisan and working classes generally. He will be interested to learn that a great deal has been done with good effect to lessen the prevalence of typhus and other forms of zymotic diseases: old houses taken down, new ones built, in some cases by the munificence of individuals, in others by the exertions of associations, as well as by the Dublin Corporation.

We will conclude our remarks by expressing a wish that our medical visitors may follow the example of our American cousin in coming "early" and coming "often;" and not only "voting" for increasing prosperity and peace to Ireland, but by their example, which, we trust, may also be followed by those in exalted places, contributing to its welfare and peace, and so helping to render Ireland once again the resort of the refined and the learned.

HONOURS TO THE ASSOCIATION FROM THE UNIVERSITY OF DUBLIN.

At the recent commencements held in Trinity College, at which the honorary degree of LL.D. was conferred upon His Excellency the Lord Lieutenant of Ireland, and upon H.R.H. Prince Albert Victor, the honorary degree of M.D. was also conferred on the members of the Association whose names we gave on the 25th ult. It was understood that these honours were given in connection with the approaching annual meeting of the Association, which will be held within the walls of the College during the first week of next month. The first to receive the honorary degree was Dr. Gairdner, of Glasgow, who is to deliver the Address in Medicine.

In presenting him to the Chancellor of the University, the Earl of Rosse, the public orator, Dr. WEBB, said: *Præhonorabilis Cancellarie totaque Universitatis, factum est jam tritum sermone proverbium, tres esse Gratias subfusas, Theologiam, Jurisprudentiam, Medicinam. Medicinæ merita vobis nunc agnoscenda. Adduco igitur Medicinæ apud Glascuenses Professorem Guilelmum Tennant Gairdner. Febris fanum, ut memoriæ tradidit Cicero, in Palatino quondam stetit—inter colles Glascuenses nunc simile stat fanum. Hospes noster, quem nunc salutamus, ejus est Antistes et quod mirum, lacte non vino numen illud detestatum se placuisse gloriatur.*

Of Sir James Paget, who was next presented, Dr. Webb spoke as follows: *Tibi Cancellarie præsentio medicorum eloquentissimum, Chirurgiæ inter hodiernos Magistrum ac Principem, Iacobum Paget. Doctorem Civilis Legis apud Oxonienses, Doctorem utriusque Juris apud Edinenses, Doctorem Scientiæ apud Germanos, hunc Medicinæ Doctorem apud Dublinenses salvere jubemus.*

Sir Spencer Wells was then presented in the following terms: *Adduco ad vos Thomam Spencer Wells, virum illustrem, cujus gloriæ participes nos esse gloriamur. Verulamii natus, hanc Academiam, ut Almam Matrem suam, elegit; in scholâ nostrâ Anatomicâ studiosus erat. Hunc reducem omni laude cumulatum videntes lætamur. Illum, propter egregia sua merita erga humanum genus inter equites auratos adscivit Regina grata. Illum talia propter merita, Reginae exemplum hæud passibus æquis sequentes, purpurâ nostrâ decoramus.*

Dr. Webb then spoke of Sir John Simon, K.C.B., who next received the degree: *Ut deduxit Socrates philosophiam de celo, sic in vulgum deduxit Medicinam vir ille quem tibi nunc præsentio, Johannes Simon—vir strenuus, qui secum reputans mentem sanam a sano corpore non esse dissociandam, hoc sibi quasi tesseram habuit—Sanitatum Sanitas.*

Of Dr. Edward Waters, of Chester, it was said: *Quum viri adhuc præsentati factis suis artem suam illustraverunt, hic quem nunc præsentio Eduardus Waters continuationi ordinis sui, et reipublicæ necessitatibus futuris consuluit. Ut educatio ac disciplina in Scholis Medicinæ essent aptæ, ut nemo non idoneus ad artem medicinæ tractandam accederet, legibus ille optimis providit. Hic numismate Societatis Medicalis aureo donatus est; hic purpurâ nostrâ adest ornandus.*

A PUBLIC crematory is being built at Philadelphia at a cost of £8,000, and a large association has been formed of persons favourable to cremation.

LIST OF SECRETARIES OF THE NINTH INTERNATIONAL MEDICAL CONGRESS AT WASHINGTON, U.S.A.

General Medicine	Dr. J. W. Chambers ..	Baltimore, Maryland
General Surgery	" J. R. Weist	Richmond, Indiana
	" A. H. Wilson	Boston, Mass.
	" D. P. Allen	Cleveland, Ohio
	" Karl Made	Vienna, Austria
Military and General Medicine	" E. A. Wood	Pittsburgh, Pa.
Obstetrics	" J. Mc. F. Gaston ..	Atlanta, Georgia
	" W. W. Jaggard	Chicago, Illinois
	" Jno. Williams, 28, Harley Street ..	London, England
	" F. Felseureich ..	Vienna, Austria
	" A. Charpentier ..	Paris, France
	" Jos. Kucher, 33, E 33d Street ..	New York N. Y.
	" E. W. Cushing	Boston, Mass.
Gynæcology	" Frank Woodbury ..	Philadelphia, Pa.
Therapeutics and Materia Medica	" L. Lewin	Berlin, Germany
	" Henry Morris	Philadelphia, Pa.
Anatomy	" R. W. Bishop	Chicago, Illinois
Physiology	" H. M. Briggs	New York, N. Y.
Pathology	" J. N. Himes	Cleveland, Ohio
	" I. N. Love	St. Louis, Mo.
Diseases of Children ..	" J. J. Chisholm, President ..	Baltimore, Maryland
Ophthalmology	" S. O. Richey	Washington, D. C.
Otology	" F. E. Daniel	Austin, Texas
Dermatology and Syphilography	Surgeon Walter Wyman, M. H. S. ..	" Battery," New York City.
Public and International Hygiene	" G. C. Byrne, U. S. A. ..	War Department
Medical Climatology and Demography	Dr. Charles Denison ..	Denver, Colorado
	" Isambard Owen	London, England
	" E. Bertherand	Algiers, Algeria
	" A. Wernich	Coeslin, Germany
Psychological Medicine and Diseases of Nervous System	" E. D. Ferguson	Troy, N. Y.
Dental and Oral Surgery ..	" E. A. Bogue	New York, N. Y.
	" F. H. Rehnwinkee ..	Chillicothe, Ohio
Laryngology	" Wm. Porter	St. Louis, Mo.

A COMPULSORY TARIFF FOR MEDICAL FEES.

At a meeting of the Jamaica Branch of the British Medical Association held on March 30th, the following resolution was proposed and carried unanimously:—

"That in view of the resolutions passed by the Jamaica Branch of the British Medical Association at the special meeting held December 11th, 1884, to discuss the proposed Government tariff of fees for district medical officers, and in view of the fact that the Government have now made the acceptance of such a tariff compulsory on all medical men who shall in future join the Government service, it is resolved that the members of the medical profession shall be warned through the medical journals of the existence of such a tariff, derogatory to the dignity of their profession, and an infringement of their rights and privileges."

The resolutions of December 11th, 1884, spoken of in the above, are:—

1. That any attempt by the Government to compel district medical officers to adopt a tariff of fees would be an infringement of the rights and privileges of the medical profession as a whole, and of the terms of the Government's contract with the district medical officers.
2. That the President-Elect nominate a Committee to watch over the proposed Government tariff of fees, and empower this Committee to take such steps as will protect the honour and interests of the profession in the matter.

The members of this Committee were ignorant that the question of the tariff would be brought up for discussion in the Legislative Council until, in October, 1885, they found it publicly announced that the matter had become law after having been very briefly discussed at meetings of the Legislative Council.

** The Branch in Jamaica does well to resist so unheard of and derogatory a proceeding. It is one thing to have a suggested guide for standard of fees, but quite another to have an imposed and compulsory series of charges.

It is again reported, in spite of denials, that a rather severe outbreak of cholera has occurred at Roccella Jonica, near Reggio in Calabria. Seventeen cases are said to have been recorded in one day, nine of which proved fatal.

COLONIAL AND INTERNATIONAL CONGRESS ON INEBRIETY.

The first Colonial and International Congress on Inebriety and the special treatment and legislation needed for the diseased inebriate took place on Wednesday at the Westminster Town Hall, under the auspices of the Society for the Study of Inebriety. The President of the Society, Dr. Norman Kerr, was in the chair. An opening address was delivered by the President, who also read a paper on Colonial Legislation for Habitual Drunkards. Other papers, of which we shall hereafter give a summary, were read by Dr. T. D. Crothers, Hartford, U.S.A.; Chevalier Max Proskowetz de Proskow-Marstorff, Austria; Dr. N. S. Davis, Chicago; Mr. Clark Bell, New York; Dr. L. D. Mason, New York; Professor Berins, Bonn; the Rev. J. W. Horsley, late Chaplain to the Clerkenwell Prison; Dr. Petitham, Liège; Mr. Axel Dickson; Dr. Alfred Carpenter, Croydon; Surgeon-Major Pringle; Dr. Moeller, Belgium; and Mr. Joseph Parrish, President of the American Association for the Study and Cure of Inebriety.

On Tuesday a reception was given at the rooms of the Medical Society of London, Chandos Street, W., to Dr. T. D. Crothers, Hartford, U.S.A., by the President and members of the English Society for the Study and Cure of Inebriety, when a hearty welcome was offered by the President and Dr. Farquharson, M.P., to Dr. Crothers.

On Wednesday evening 250 ladies and gentlemen sat down to dinner in the large Westminster Town Hall, the President of the Congress, Dr. Norman Kerr, in the chair. Among those who had accepted the invitation were Lord and Lady Denman, Lord and Lady Mount-Temple, Baron Ferdinand de Rothschild, Sir Wilfrid Lawson, M.P.; Sir Trevor Lawrence, M.P.; Dr. Cameron, M.P.; Messrs. P. MacLagan, M.P.; T. W. Russell, M.P.; W. B. Rowlands, Q.C., M.P.; William Johnston, M.P.; Dr. Clark, M.P.; Sir Edwin Saunders; Drs. Parrish, Crothers, Wright, and Thwing (U.S.A.); Dr. Moeller (Brussels); Drs. B. W. Richardson, Alfred Carpenter, Danford Thomas; Mrs. Norman Kerr, and a number of other ladies, clergymen, and representative temperance reformers. Dinner was served by Mr. A. B. Marshall, of the West End School of Cookery. The Anglo-Hungarian Band played during the evening. The toasts, among which were "The Study and Cure of Inebriety," "Legislation for the Inebriate," and "The Dalrymple Homes," were spoken to by the Chairman, Lords Denman and Mount-Temple, Sir Wilfrid Lawson, Dr. Cameron, M.P.; Mr. W. B. Rowlands, Q.C., M.P.; Mr. P. MacLagan, M.P.; Sir Edwin Saunders; Revs. J. Gelson Gregson and Dr. H. Lansdell; Drs. B. W. Richardson, F.R.S.; C. J. Hare; J. S. Bristowe, F.R.S.; George Harley, F.R.S.; Dr. Alfred Carpenter, Consul-General Waller, Dr. Danford Thomas, Drs. Parrish, Crothers, Wright, and Moeller.

The toasts were honoured in five varieties of non-intoxicating wine, imported by Frank Wright, Mundy and Co. There were also on the table Brunnen table-water and Brin's oxygenated lemon-water, charged with oxygen.

On Thursday a large party of temperance reformers went, on the invitation of the Rev. Canon Duckworth, D.D., to the Dalrymple Home for Inebriates, Rickmansworth, where they were entertained at luncheon. The proceedings both here and at the other meetings of the Congress were of an enthusiastic nature.

ROYAL COLLEGE OF SURGEONS.

The annual election of Fellows into the Council of the College was held in the Library of the College on Thursday, July 7th. The roll of Fellows, to whom the privilege of electing the Council is confined, numbers over 1,200; of these only 199 took part in the election. The President entered the Library at 2 o'clock, but some little time elapsed before the election could proceed, owing to there not being fifteen Fellows present, the number required to form a quorum. After the requisite number was obtained, the President called on the Secretary to read the by-laws relating to the election of members of Council and the list of candidates. The voting then began, and went on till 5 o'clock, when the time expired during which voting could take place. The vacancies to be filled were occasioned by the retirement by rotation of Sir Spencer Wells, Mr. John Wood, and Mr. Jonathan Hutchinson. As we announced in a previous issue, Mr. John Wood

did not offer himself for re-election, but Sir Spencer Wells and Mr. Hutchinson again sought the suffrages of the electors, together with Mr. John Couper, of Grosvenor Street, Mr. Alfred Willett, of Wimpole Street, and Mr. Brudenell Carter, of Queen Anne Street, none of whom have previously served on the Council or Court of Examiners. The result of the poll was declared about half-past 5, and was as follows:—

1. Mr. Jonathan Hutchinson	received 120 votes, including 0 plumpers.
2. Mr. Alfred Willett	" " 106 " 27 "
3. Sir T. Spencer Wells, Bart.	" " 77 " 2 "
4. Mr. R. Brudenell Carter	" " 67 " 14 "
5. Mr. John Couper	" " 59 " 6 "

The successful candidates were, consequently, Mr. Hutchinson, Mr. Willett, and Sir Spencer Wells. Mr. Hutchinson has once previously served on the Council, while Sir Spencer Wells enters it for a third period. Mr. Willett is well known as an able and accomplished surgeon, whose success in achieving a position to which his professional skill and ability justly entitle him will be welcomed by a large circle of friends. It cannot but be a matter of regret that the list of candidates did not contain the name of a single provincial surgeon.

RELATIVE RANK.

CABLEGRAM FROM INDIA.

THE Chairman of the Parliamentary Bills Committee has received the following cablegram by the Indo-European Telegraph Company from a highly respected representative of the medical officers stationed at Allahabad:—"Assure the Secretary of State that the Medical Staff of India, while proud of their profession, consider that honorary rank would not dissociate them from it, and that it is the only possible final solution."

THE EFFECTS OF PETROLEUM VAPOUR ON THE HEALTH.—Wielczyk has given an account of the effect produced on the health by petroleum vapour. His observations were made on workmen engaged in the petroleum mines in the Carpathian mountains. Crude petroleum is a thick, oily, greenish-brown liquid, composed of gaseous liquid, and solid hydrocarbons. The miners are exposed to an atmosphere which is vitiated with marsh gas (0.30 to 10 in 1,000), ethylene (8 in 1,000), hydrocarbons, carbonic oxide, and often with sulphuretted hydrogen. Cases of asphyxia are by no means rare. Prolonged exposure to such an atmosphere gives rise to noises in the ears, luminous circles before the eyes, accelerated pulse, loss of consciousness, hallucination, and syncope. Hallucinations especially are very frequent. For example, a patient hears voices ordering him to remain at the bottom of the pit; another picks up stones which he mistakes for gold, etc. The action of these vapours sometimes resembles that of the opiates. A workman will sleep for sixteen hours at the bottom of the pit, being angry when awakened. On the other hand, disease is very rare among the workmen. Wielczyk has seen *acne artificialis* produced by the irritating action of the petroleum on the skin, and also a few cases of conjunctivitis, but affections of the respiratory organs are almost unknown. Phthisis was found in comparatively few cases, and in most of these there was marked hereditary proclivity. Wielczyk attributes the rarity of phthisis to the disinfecting action of the petroleum gases. Petroleum, when taken inwardly, causes nausea and a feeling of faintness. Wielczyk has used petroleum with success in articular rheumatism. It was also found to promote the healing of wounds. Inhalation of the vapour of petroleum newly brought to the surface causes at first a peculiar sensation of lightness in the chest, freedom of the respiratory movements, and quickening of the pulse, but this is quickly followed by ringing in the ears and general weakness.

THE MIDDLESEX HOSPITAL.—We are glad to notice that a concert, under the immediate patronage of Her Majesty the Queen and many members of the Royal Family, will be given in the Royal Albert Hall on Wednesday afternoon next, July 13th, in aid of the funds of this hospital. "The Golden Legend" will be performed, conducted by Sir Arthur Sullivan, assisted by Madame Albani, Madame Patey, Mr. Edward Lloyd, Signor Foli, and the members of the Royal Albert Hall Choral Society. Dr. Stainer will preside at the organ, and there will be a full orchestra. An influential ladies' committee has been formed, and they have already secured for it considerable support.