# OPERATION DAYS AT THE LONDON HOSPITALS.

- MONDAY \_\_\_\_ 10.80 A.M.: Royal London Ophthalmic. --- 1.80 P.M.: Guy's (Oph-thalmic Department); and Royal Westminster Ophthalmic. --- 2 P.M.: Metropolitan Free; St. Mark's; Central London Ophthalmic; Royal Orthopædic; and Hospital for Women.-2.30 P.M.; Chelsea Hospital for Women.
- Chelses Hospital for Women. **TUESDAY** \_\_\_\_9 A.M.: St. Mary's (Ophthalmic Department).-10.80 A.M.: Royal London Ophthalmic.-1.30 P.M.: Guy's; St. Bartholo-mew's (Ophthalmic Department); St. Mary's; Royal Westmin-ster Ophthalmic.-2.80 P.M.: West London; Cancer Hospital, Brompton.-4 P.M.: St. Thomas's (Ophthalmic Department). WEDNESDAY \_\_10 A.M.: National Orthopsedic.-10.30 A.M.: Royal London Ophthalmic.-1 P.M.: Middlesex.-1.30 P.M.: St Bartholo-mew's; St. Thomas's; Royal Westminster ; Great Northern Central; Central London Ophthalmic.-2 P.M.: London ; University College; Westminster ; Great Northern Free Hospital for Women and Children; St. Peter's.-8 to 4 P.M.: King's College. HURSDAY \_\_108 A.M.: St. Bartholomew's (Ophthalmic.-1 P.M.: St. George's \_\_130 P.M.: St. Bartholomew's (Ophthalmic.-1 P.M.: St. George's \_\_130 P.M.: St. Bartholomew's (Ophthalmic.-1 P.M.: St. George's
- Women.
- Women. 9 A.M.: St. Mary's (Ophthalmic Department).--10.80 A.M.: Royal London Ophthalmic.--1.15 P.M.: St George's (Ophthal-mic Department).--1.80 P.M.: Guy's; Royal Westminster Oph-thalmic.--2 P.M.: King's College; St. Thomas's (Ophthalmic Department); Contral London Ophthalmic; Royal South Lon-don Ophthalmic; East London Hospital for Ohildren.--2.80 P.M. 1 West London FRIDAY \_\_\_. West London.
- West London. SATURDAY \_\_\_\_9A.M.: Royal Free.--10.30 A.M.: Royal London Ophthalmic.--l P.M.: King's College.--1.80 P.M.: St. Bartholomew's; St. Thomas's; Royal Westminster Ophthalmic.--2 P.M.: Oharing Cross; London; Middleser; Royal Free; Central London Oph-thalmic.--2.30 P.M.: Cancer Hospital, Brompton.

# HOURS OF ATTENDANCE AT THE LONDON HOSPITALS.

- HOSPITALS.
  OGARING CROSS.—Medical and Surgical, daily, 1; Obstetric, Tu. F., 1.30; Skin, M. Th., 1.30; Dental, M. W. F., 9.
  Gyr's.—Medical and Surgical, daily, 1.30; Obstetric, M. Tu. F., 1.30; Eye, M. Tu. Th. F., 1.30; Ear, Tu. F., 12.30; Skin, Tu., 12.30; Dental, Tu. Th. F., 12.
  KING'S COLLEGE.—Medical, daily, 2; Surgical, daily, 1.30; Obstetric, Tu. Th. F., 12.
  KING'S COLLEGE.—Medical, daily, 2; Surgical, daily, 1.30; Obstetric, Tu. Th. B. 2; o.p., M. W. F., 12.30; Eye, M. Tu. 1; Opthalmic Department, W., 1; Ear, Tn., 2; Skin, Th., 1; Opthalmic Department, W., 1; Ear, Th., 2; Skin, Th., 3; Opt. A., 1; Opthalmic Department, W., 1; Ear, Th., 2; Skin, Th., 3; Skin, Th., 3; Opt. M. S., 9; Ear, 2; Skin, Tu., 1:0 and 2; Obstetric, M. Th., 1.80; Op, W. S., 40; Eyr, et and Throst, Tu., 9.
  MIDDLESEX.—Medical and Surgical, daily, 1:30; Obstetric, Tu. Th. S., 2; o.p., W. S., 9; Ear, 5., 9.30; Skin, Th., 9; Dental, Tu., 9.
  MIDDLESEX.—Medical and Surgical, daily, 1:30; Obstetric, Tu. Th. S., 2; o.p., W. S., 8: 30; Ear and Throst, Tu., 9; Skin, Tu., 4; Dental, daily, 9.
  ST. BARTHOLOMEWS.—Medical and Surgical, daily, 1:80; Obstetric, Tu. Th. S., 2; o.p., W. S., 9; Eye, Tu. Th. S., 2; 30; Dental, Tu. F., 9.
  SG. Grongers.—Medical and Surgical, M. Tu. F. S., 1; Obstetric, Tu. S., 1; o.p., Th., 3; Eye, W. S., 9; Ear, Tu., 2; Skin, W., 2; Throat, Th., 2: Orthopedic, W., 2; Dental, Tu. S., 2; Skin, W., 2; Throat, Tu., 2: Orthopedic, W., 2; Dental, Tu. S., 9; Th., 1.
  ST. MARYS.—Medical and Surgical, daily, 145; Obstetric, Tu. F., 1.45; o.p., M. Th., 180; Eye, Tu. F. 8:, 9; Ear, M. Th., 8; Throat, Tu. F., 1.30; Estim, M. Th., 9.50; Electrician, Tu. F., 2; Obstal, W. S., 9.30; Consultations, M., 2.20; Operations, Tu., 1.80; Ophialmic Operations, F., 9.
  ST. THOMAS'S.—Medical and Surgical, daily, except Sat., 2; Obstetric, M. Th., 2.0, UNTERSITY COLLEGE.—Medical and Surgical, daily, 102; Obste

# LETTERS, NOTES, AND ANSWERS TO CORRESPONDENTS.

- COMMUNICATIONS respecting editorial matters should be addressed to the Editor, 429, Strand, W.C., London; those concerning business matters, non-delivery of the Journau, etc., should be addressed to the Manager, at the Office, 429, Strand, W.C., London. In order to avoid delay, it is particularly requested that all letters on the editorial business of the Journau be addressed to the Editor at the office of the JOURNAL,
- Authors desiring reprints of their articles published in the BRITISH MEDICAL JOURNAL, are requested to communicate beforehand with the Manager, 429, Strand, W.O.
- Strand, W.O. Correspondences who wish notice to be taken of their communications, should authenticate them with their names-of course not necessarily for publication. Correspondents of the following week. MANUSCRIPTS FORWARDED TO THE OFFICE OF THIS JOURNAL CANNOT UNDER ANY
- MANOSCRIPTS FORWARDED TO THE OFFICE OF THIS OFFICIAL CHART CHART CONTROL OFFICE AND A CONTROL OFFICE OFFICE AND A CONTROL OFFICE OFFICE OFFICE AND A CONTROL OFFICE OFFICE AND A CONTROL OF A CONTROL OF

# OTERIES.

- MIGRAINE. DR. HENRI G. MCGREW (6, Rue Gay-Lussac, Paris, France) asks for suggestions for the treatment of a case of migraine in which, up to the present, almost every known drug in the materia medica recommended for this complaint has been tried without success. The patient, a lady, aged 48 years, has suffered for years from periodical attacks of a most painful character, and the only drug which has given relief has been morphine, used hypodermically in the form of Majendie's solution, but the great objection to its use has been the depressing and nauseating effects which follow. He has heard antipyrin spoken of as being effective, but has had no experience in its use. Any hints will be gratefully preceived received
- TREATMENT OF PSORIASIS OF NAILS. J. C. asks what is the best local treatment for psoriasis of the nails (psoriasis unguium?

#### VAPOUR BATHS IN HYDROPHOBIA.

. A. M. asks to be informed of any case in which the treatment by vapour baths or any other sweating system has been tried in hydrophobia with unsatisfactory results, speaking of the use of the baths not as a preventive but as a cure when the disease has shown itself.

 $*_{*}*$  The only genuine case in which the vapour treatment was tried in England was one of Dr. Southey's, in St. Bartholomew's Hospital Reports reported in the Medical Press and Circular; the result was so unsatisfactory that the treatment was abandoned, the patient begging not to be subjected to it again.

### ANSWERS.

- R. P. (Bournemouth) -- A Winter Trip to the Fortunate Islands, by Ernest Hart, is published by Messrs. Smith, Elder, and Co., 15, Waterloo Place, London, S.W.
- .-Full particulars of the English Cremation Society can be obtained from the Secretary, Mr. W. Eassie, 11, Argyll Street, Regent Street, W. **P**.-
- DR. R. F. B. HEAD .- The error was not ours, and was rectified in the JOURNAL of November 5th, p. 1004.

### CLIMATOLOGICAL QUERIES.

DR. JAMES ALEX. LINDSAY (37, Victoria Place, Belfast) writes : In your issue of October 12th, there are two queries upon questions of medical climatology. Unfortunately, in each case the query is put in a form which will make any practical climatologist hesitate before volunteering any precise reply. "Phthisis" states that he is suffering from "well-marked phthisis" following hæmoptysis, and asks for advice upon the choice of some place in the colonies or elsewhere in which he may have a fair chance of health and work. He does not say, however, whether his illness is attended with much wasting or pyrexia, or bronchial irritation, what is the degree of debility present, or whether there are any complications, yet all these points are vitally important in weighing the merits of the various climatic sanatoria. Any haphazard advice to a consump-tive upon the choice of climate is the purest quackery. Every case needs to be fully weighed on its own merits, and the symptoms and history require the most anxious consideration.

W. W. asks for advice as to the best residence for a patient suffering from w. w. asks for advice as to the best result to if a patient which and prove a sthma and rheumatism. The climatic treatment of askima is mainly empirical, and every case is a law to itself. General rules do not apply. There is some reason for thinking that the asthmatic may be advised with advantage to seek a reason for thinking that the astimatic may be advised with advantage to seek a climate contrasting strongly with that in which the disease was contracted. Many patients do best of all in the centre of a large manufacturing town. Bloemfontein, in the Orange Free State, has some reputation for the cure of asthma, but the subject does not at present admit of precise scientific state-ment. It is hardly necessary to say that the rheumatism present in "W. W.'s" case would benefit by a residence in a warm dry climate, such as Egypt, Queens-land, California, or the Orange Free State.

#### VACCINATION GRANTS.

VACCINATION GRANTS. DR. A. S. UNDERHILL (Great Bridge, Tipton) writes: Your correspon-dent, "Vaccinator," asks for discussion as to the grievances of public vaccinators who are qualifying for grants. As a public vaccinator of fifteen years, I have never had to complain about the "dictatorial, auto-cratic, and schoolmaster fashion in which the vaccination inspectors do their work." My vaccination has been inspected by three different inspectors; I found them all to be courteous, painstaking, and cul-tured gentlemen. They have listened with patience to my difficulties, and sym-pathised with me in my vaccination troubles. They have always rigorously ex-acted the carrying out of my contract to the letter. For this I could not blame them, as I am paid for this work, was very glad to have it, and should be sorry to lose it. I offer them no special hospitality when in my district. I always try and welcome them. Their work is not of the most pleasant, and to me it has been an advantage to have a "brother chil" to have a talk with. Is there not in our profession rather much of the noli me tangere spirit as far as regard. our own work? A little more give and take in matters professional would, I think, conduce more to personal happiness. I was somewhat surprised at the resolution passed by the members of the East Anglian Branch. I have had professional dealings with the gentleman re forred to, and he went to a considerable amount of trouble in elucidating for me a very tiresome trouble, and my experience was certainly the reverse of theirs. De WAYSON (Sheffield) writes : Replying to "Vaccinator." I would sav I have DR.

of theirs.

of theirs. Dr. WATSON (Sheffield) writes: Replying to "Vaccinator," I would say I have been a public vaccinator for sixteen years, and have been visited by four differ-ent inspectors, but, without exception, have always found them most courteous and friendly in the extreme. For the necessity of their visits, I can only say form who one observation of forme unbila vacaitors, and ensuelilla of the trace and friendly in the extreme. For the necessity of their visits, I can buy say from my own observation of some public vacinators, and especially of the vac-cinations of the general practitioners, inspection and instruction are much needed. I am strongly of opinion that were the operation more carefully per-formed, we should hear fewer complaints against vaccination, see fewer dis-figuring "scars," and have a much greater protection against small-pox

BORIC ACID. PRACTITIONER (Brighton). - Mr. C. E. Cassal, to whom we have referred this question, writes : The detection of boric acid, if present in milk, may be accomplished by writes: ine detection of noric acid, in present in mink, may be accompliated by evaporating to dryness not less than ten cubic centinètres in a clean platinum dish, incinerating at as low a temperature as possible, extracting the ash, and properly applying the well known turneric paper and flame reaction. If present in sufficient quantity, borates can be detected in the milk itself by the colora-tion of an alcohol flame. If any importance whatever attaches to the results, the work should not be undertaken by those who have not hed some experience the work should not be undertaken by those who have not had some experience in analytical work.

#### ADVERTISING PRACTITIONER.

Mr. ARTHUR ROBERTS (Keighley).—We understand that the member of the pro-fession referred to treats epilepsy by the remedies in ordinary use, and probably has no special knowledge of any of the maladies which, according to his adver-tisements, he professes to be able to cure. As the person referred to has adver-tised under various adiases, our correspondent's patient would probably be well adviced in giving bing a wide both advised in giving him a wide berth.

#### GIRLS' SCHOOL.

- MR. ROBERT E. CLITHERO (Peckham) recommends Pelican House School, Grove Park, Denmark Hill, S.E., instituted chiefly for the daughters of medical men, under the supervision of Mrs. Bennett.
- MEDICAL can strongly recommend a thoroughly good, high class school, where there are educational advantages of the highest order, combined with home comforts, and wise and just supervision. There are several daughters of medical men in the school, and the terms are such as desired. Prospectus, Miss Tullis, 11, Park Place, Cardiff, South Wales.

#### NOTES, LETTERS, ETC.

#### A NEW POSITION FOR OPHTHALMIC OPERATIONS.

 $_{\kappa}$ <sup>\*</sup> Mr. da Gama (Bombay) has written again on the subject of the positio 2 rec. mended by Surgeon G. M. Giles (Indian Medical Service) in the JOURNAL for December 11th, 1886, and on which letters have appeared in the issues of May 7th and October 1st of this year. We are asked (1) to express an opinion on the value of this position. 2. To state whether, in our opinion, the illustra. tion correctly depicts the position described for cataract extraction on the left eve.

1. We have no hesitation in saying that the position as described by Mr. Giles appears to us to be an excellent one when a couch of sufficient height cannot be obtained, and we think it quite possible that a surgeon who has, like Mr. Giles, performed a large number of successful cataract operations in this manner, might come to prefer it to the recumbent posture.

2. It is evident that the illustration referred to does not correspond with the text, for while the latter describes the patient's occiput as resting firmly against the surgeon's thigh, the head is depicted in a much higher position, so that the patient's shoulders would be supported by the thigh, unless, indeed, the surgeon's right knee is supposed to be raised by means of a footstool, of which no mention is made.

#### AN APPEAL

MR. WRICHT desires to acknowledge with thanks the following further contributions to Mrs. H.'s fund.

						£	s.	d.
Joseph Bell, Esq., Edinl			••		••	0	10	0
W. H. A. Jacobson, Esq	., M.Ch.	Oxon (s	econd do	onation)	••	0	10	0
Wm. Collier, Esq., M.D.	, Oxford	·	••	••		0	10	6
W. M. B.	·	••	••		••	2	<b>2</b>	0
Wm. Leigh, Esq., Stock	port	••	••			2	2	0
		••		••	••	1	0	0
Dr. Cummins, Cork	••	••	••	••	••	1	0	0
Thos. Jones, Esq., Manc	hester		••			1	1	0
Mrs. Heald, Didsbury	••	••	••	••		1	0	0
J. T			••			2	0	Ó

## CHLOROFORM ADMINISTRATION.

CHLOROFORM ADMINISTRATION. DR. CAREY COMES (Cast) Cary) writes: Sudden artificial unconsciousness cannot be free from some risk, and the degree of fatality varies according to many circumstances besides the anæsthetic used. Nitrous oxide has been singu-larly fortunate, but I do not think that patients would take the gas so willingly from dentists and others if they knew that they were going to be suffocated for a time. a time.

Ether does not cause so many deaths as chloroform-apparently-but who knows in how many cases they are used respectively? I write now to ask whether the Collective Investigation Committee would find it within their whether the Collective Investigation Committee would find it within their province to ask the members of the Association, and others, what anesthetic they use, and in how many cases in a given period? I feel sure that all the chloroformists at the hospitals would give the details, because they are most interested in the matter. They have to use ether, bichloride, etc., as they are directed, and they have sometimes no help or sympathy if the patient's condi-tion is bad. I, and other practitioners are much interested in the matter, be-cause we have not only to operate, but at times to give the anæsthetic for others, or in obstetric operations for ourselves. The A. C. E. mixture has not been so much used as it should be, I think, and have been gratified to find that Dr. Eastes speaks hichly, of it in his name

The A. C. E. Mixture has not been so much used as it should be, i tinnk, and I have been gratified to find that Dr. Eastes speaks highly of it in his paper. This paper, with a very good article by Dr. W. Braine, will be found in the JOURNAL, of November 29th, 1884. The writers differ in opinion as to the value of Junker's inhaler, which has appeared to me a most valuable instrument, and I must observe that it is not the fault of the inhaler if the anæsthetic is blown into the prelimit's free into the patient's face.

Let me again ask whether collective investigation cannot be called in to learn the real mortality arising from the use of the different agents, and let me con-tirm Dr. Silk's opinion that more attention should be paid to training all students in the use of anæsthetics. I know well how many men cannot narco-tise the patient in such a way as to relieve the mind of the operator.

### WINDOW-CLEANING ACCIDENTS.

WINDOW-CLEANING ACCIDENTS. DR. GERALD COLEMAN (Medical Officer of Health, Hemsworth Sanitary Authe-rity) writes: Attention has been recently drawn to the above subject, pointing out the dangers and other evils of the process. My object in now writing to you is to draw your attention to an invention in windows and their fastenings, by which these are avoided. It has been invented by a cabinet maker of this place, and is so constructed that pullers, weights, and cords are all dispensed with, and it can be fitted to any ordinary kind, size, and shape of window. Open-ing from the inside, all accidents from outside cleaning are impossible. Espe-cially for hospitals and the sick room it is an admirable window, ventilation being regulated by means of a screw, which is so adjusted that air is easily admitted without draught and in an upward direction, whilst all shaking and jarring, so distressing to invalids, is avoided. Having seen it in actual use, I am convinced it is the window of the future ;

Jarring, so distressing to invalues, is avoided. Having seen it in actual use, I am convinced it is the window of the future; and from the simplicity and economy of its construction, I feel sure it will com-mend itself to those interested in the erection of hospitals and other public buildings, as well as to those who are familiar with the defects of their own badly fitting, draughty, and dangerous windows.

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

The Secretary of the Medical Attendance Organisation Committee, London ; Mr. W. W. Morris, Clun, Salop; Mr. J. G. Underwood, Worcester; J. Walters, M.B., Reigate; Mr. J. Willcocks, Overton; Dr. J. C. Voigt, Bury; Mrs. Swaby Smith, London ; Dr. Whipham, London ; Dr. G. E. Williamson, Newcastle-on-Tyne; Mr. W. Rushton Ashworth, Wolverhampton; Mr. J. I. Curran, Killeagh, Co. Cork; Dr. R. Milne Murray, Edinburgh; Mr. J. Bellamy, London; Mr. W. J. Tivy, London; Dr. R. Wade Savage, London; Mr. J. Booth Clarkson, St. Helena; Dr. J. Lavies, London ; Dr. T. Barr, Glasgow; Mr. Heap, Birkenhead; Mr. P. Keran, Bolton; Mr. J. Sykes, Doncaster; Mr. J. Marshall, London; Mr. S. Craddock, Bath; Mr. J. Clegg, Bournemouth; Mr. J. Jones, Llanfechell; Mr. W. H. Browne, Aldbrough; Mr. A. Devonald, Penarth; Dr. J. Braxton Hicks, London; Dr. W. Pearce, London; Surgeon-Major W. J. Smith, Bristol; Mr. L. A. W. Beck, Edinburgh; Mr. A. Cox, Long Buckby; Mr. C. H. Phillips, Hanley; Dr. Willoughby, London; Dr. C. Knott, Southsea; Dr. D. Hardie, Brisbane ; R. Howden, M.B., Haddington ; Dr. J. Rogers, London; Dr. Sykes, Mexborough; Dr. Campbell, London; Mr. A. C. Munro, Jarrow; Dr. J. D. Dickson, Marlow; Professor Victor Horsley, London; Dr. D. A. Fraser, Totnes; Mr. P. Keevan, Bolton; Mr. Lawson Tait, Birmingham; Dr. Jaeger's Sanitary Woollen Company, London; Our Berlin Correspondent; Dr. Craddock, Bath; Mr. F. W. Passmore, London; Dr. J. H. Parkinson, Sacramento, California; Dr. Graily Hewitt, London; Mr. E. Malins, Birmingham; Mr. J. Butcher, London; Mr. G. Mellin, London; Professor Windle, Birmingham; Mr. W. F. Fryer, Stonham; Dr. B. W. Cawthorne, Welshpool; Dr. F. Roberts, London; Mr. A. E. Barrett, London; Mr. W. Jago, Brighton; Messrs. Charles Griffin, London; Dr. J. Paton, Greenock; Mr. S. V. Eades, Ipswich; Mr. G. Hermanni, Hamburg; The Secretary of the Sanitary Institute of Great Britain, London ; Mr. G. A. Wright, Manchester ; Mr. T. Thatcher, Bristol ; Dr. Bigger, Streatham ; Dr. G. Parker May, Maldon; Mr. Ballance, London; Mr. T. Vincent Jackson, Wolverhampton; Dr. J. W. Taylor, Birmingham ; Mr. G. P. Field, London ; Dr. George Thin, London; Dr. Arthur W. Edis, London; Dr. E. Long Fox, Clifton; Mr. Knowsley Thornton, London; Dr. W. H. Barlow, Manchester; Dr. E. Markham Skerritt, Clifton; Dr. T. Lauder Brunton, London; Dr. Ogilvie Will, Aberdeen ; Mr. Skene Keith, Edinburgh ; Dr. G. V. Poore, London ; Mr. F. A. Southam, Manchester; Dr. David Newman, Glasgow; Dr. R. W. Philip, Edinburgh; Dr. Vincent Harris, London; Dr. Oliver, Newcastle-on-Tyne; Dr. Buzzard, London: Mr. Cowell, London; Sir W. Dalby, London; Mr. Harrison Cripps, London; Dr. A. V. Macan, Dublin; Professor Grainger Stewart, Edinburgh ; Professor M. Charteris, Glasgow ; Dr. Cresswell Rich, Liverpool; Mr. W. D. Spanton, Hanley; Dr. Fitzgibbon, Dublin; Mr. G. E. Twynam, Sydney, N. S. W.; Dr. R. Saundby, Birmingham; Mr. Clark Bell, New York; Mr. R. Bevan, Lydd; Mr. R. Prothero, Amlwch; Dr. Taafe, Brighton; Dr. A. H. Leach, Woolpit; Mr. W. C. Muir, Leigh; Dr. C. Charles, London; Mr. A. Jackson, Sheffield; Dr. E. Vallin, Paris; Mr. R. Wills, London; Mr. E. Waltham, London; Dr. W. Galletly, Elgin; Dr. M. H. Feeney, Montreux, Switzerland; Mr. R. Foster, Dover; Messrs. J. Coxeter and Sons, London; Messrs. J. Smith and Co., London; Dr. J. Farrar, Gainsborough; Dr. W. Bevan Lewis, Wakefield; The Secretaries of the Society for the Abolition of Vaccination, London; Dr. Tatham, Salford; Dr. T. Keith, Edinburgh ; Dr. W. J. Simpson, Calcutta ; Messrs. T. Christy and Co., London; Mrs. C. K. Cooper, London; Mr. H. M. Barker, Sandown; Mr. M. C. Moxham, London; Mr. J. Davies, Berriew; Mr. L. Humphry, Cambridge; Dr. Tivy, Clifton ; Dr. J. C. Waddell, Lington ; Mr. P. A. Young, Edinburgh ; Dr. Sheen, Cardiff; Mr. Jabez Hogg, London; Mr. W. H. Maling, Sunderland; Dr. Norman Kerr, London; Dr. M. G. Evans, Cardiff; Mr. J. H. Moore, Anstey ; Dr. Chippingdale, London ; Dr. Apostoli, Paris ; Dr. J. A. Thompson, Sydney, N. S. W.; Dr. A. Sandberg, London; Mr. Shirley Murphy, London; Dr. Clarence Ellerman, London ; Dr. J. P. Bramwell, Perth ; The Registrar of the Royal College of Physicians, London; Dr. Sanctuary, London; Mr. Francis Galton, London; Mr. F. A. Floyer, London; Dr. J. Donelan, London; Messrs. Lorimer and Co., London; Mr. J. C. Culling, Cratloe; Mr. W. Aston, Birmingham; Mr. R. Harrison, Liverpool; The Secretary of the Harveian Society, London; Mr. A. W. Shirley, London; Dr. F. T. Heuston, Dailin;

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# BOOKS, MTC., RECEIVED.

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- don : J. and A. Churchill. 1887. On Glycosuria and the Renal Signs of Perverted Nutrition. By W. Squire, M.D., F.R.C.P. London: J. and A. Churchill. 1887.
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