

THE PLAGUE IN THE EAST.

THE SPECIAL COMMISSION.

THE Commissioners are now holding their investigations in Bangalore, and during their sojourn the following evidence has, we learn from the *Times*, been taken on December 12th: Colonel Robertson, the resident at Mysore, stated that in consequence of the hostile attitude of the inhabitants it was impossible to deal effectively with the plague epidemic. Captain Roe, chief plague officer, maintained that segregation was unsuccessful, owing to the difficulty of securing the people; were segregation abolished the natives would not leave their homes. Major Deane declared that Yersin's serum was useless; Haffkine's serum, in the opinion of Major Deane, conferred a temporary immunity, but not to the extent supposed. Colonel McGann stated that plague had prevailed amongst native soldiers but not amongst Europeans, and that Haffkine's serum had been found valuable.

On December 13th Colonel Dobson, Residency Surgeon, and Dr. Willis, were among those examined. It was explained what measures had been taken to combat plague, and details were given of the cases of inoculation. They stated that transference of certificates of inoculation, which was reported to be prevalent to such an extent as to render statistics unreliable, was untrue. There was no racial immunity from plague; more Hindus died than any other class, but it was owing to the poorer conditions in which they lived. The Hindus were more amenable as regards inoculation than the Mohammedans. There was a large mortality from plague amongst monkeys, squirrels, and rats.

INDIA.

In the City of Bombay the slight increase in the mortality from plague which we reported last week has continued, and by a telegram, dated December 12th, we gather that there is still an advanced tendency in the mortality returns from plague. The reports from the Bombay Presidency generally remain favourable, and a steady decrease in the epidemic is everywhere apparent outside the city.

In the Mysore State there is but little change, many towns and districts being severely affected. The populations of Bangalore and Seringapatam still exhibit signs of resistance to the segregation rules imposed upon them by the authorities, and were it not for the strong measures taken to ensure order, a repetition of the late riots would break out at any moment.

In the Madras Presidency plague continues in a more or less sporadic form, the inland parts of the Presidency are widely affected, although up to the present time the towns on the Carnatic shore have suffered but little. The cases occurring in the seaport towns have been merely imported cases, no local outbreaks having as yet taken place. The State of Hyderabad is infected in a similar manner to Madras. The latest addition to the plague-stricken districts is the Central Provinces, and in the Wardha district the disease is epidemic. The prevalent belief is the plague reached the Central Provinces from Bombay, and not from Hyderabad, which borders them on the south. The argument in favour of Bombay being the source of infection is held to be the fact that the disease broke out amongst the mill workers who had fled from Bombay thither.

MADAGASCAR.

The most recent news from Tamatave is conveyed in a telegram, dated December 9th, which states that "plague is unchecked." There was a tendency to look upon the first report of the magnitude of the outbreak as being grossly exaggerated, and that the disease was confined to a few imported cases. Now it would seem that the French authorities are convinced that the disease has obtained a firm hold upon the natives, and that it is likely to spread. A European died of the disease in Tamatave during the past week, and as the unhealthy season is rapidly approaching in Madagascar, the outlook is not considered hopeful.

ASSOCIATION INTELLIGENCE.

COUNCIL.

NOTICE OF MEETING.

A MEETING of the Council will be held in the Council Room of the Association, at No. 429, Strand (corner of Agar Street), London, on Wednesday the 18th day of January next, at 2 o'clock in the afternoon.

FRANCIS FOWKE, *General Secretary*.

December, 1898.

NOTICE OF QUARTERLY MEETINGS OF COUNCIL FOR 1899.

MEETINGS of the Council will be held on January 18th, April 12th, July 12th, and October 18th, 1899. Candidates for election by the Council of the Association must send in their forms of application to the General Secretary not later

than twenty-one days before each meeting—namely, December 28th, 1898; March 23rd, June 22nd, and September 28th, 1899.

FRANCIS FOWKE, *General Secretary*.

ELECTION OF MEMBERS.

Any qualified medical practitioner, not disqualified by any by-law of the Association, who shall be recommended as eligible by any three members, may be elected a member by the Council or by any recognised Branch Council.

Candidates seeking election by a Branch Council should apply to the Secretary of the Branch. No members can be elected by a Branch Council unless their names have been inserted in the circular summoning the meeting at which they seek election.

FRANCIS FOWKE, *General Secretary*.

LIBRARY OF THE BRITISH MEDICAL ASSOCIATION.

MEMBERS are reminded that the Library and Writing Rooms of the Association are now fitted up for the accommodation of the Members in commodious apartments, at the offices of the Association, 429, Strand. The rooms are open from 10 A.M. to 5 P.M. Members can have their letters addressed to them at the Office.

BRANCH MEETINGS TO BE HELD.

GLOUCESTERSHIRE BRANCH.—The next meeting of the Branch will be held at the General Hospital, Cheltenham, on Tuesday, December 20th, at 7 P.M., the President (Dr. Soutar) in the chair. There will be supper afterwards at the Queen's Hotel. Agenda: 1. Some Recent Advances in the Treatment of Tuberculosis; Dr. Pruen, Cheltenham. 2. Peripheral Neuritis following the Treatment of Chorea by Arsenic; Dr. Foljambe Forster, Cheltenham.—S. T. PRUEN, Cheltenham, Honorary Secretary.

BORDER COUNTIES BRANCH: COUNTIES OF ROXBURGH, BERWICK, SELKIRK, AND PEEBLES DISTRICT.

A MEETING was held at Hawick, on November 25th; Dr. BLAIR (Jedburgh) in the chair.

The Expenses of the Branch District.—The SECRETARY read a letter from the General Secretary of the Association, regarding the payment of expenses of the Branch District, and he was instructed to inform him that, as members of the Border Counties Branch, they (the members of the Branch District) intended that these expenses should be paid out of the Branch subscriptions.

Hypnotism.—Dr. HADDON introduced a discussion on hypnotism. He traced its history from the earliest times on to Mesmer, whose thesis for the doctor's degree was upon "the influence of the stars and planets," and then to Braid, who first used it as a therapeutic agent. He gave his own experience, which led him to the conclusion that it was a powerful agent lying to the hand of the profession, and which was sadly neglected. He quoted from Myers *On the Psychology of Hypnotism* to prove the close alliance of this condition to that of hysteria.—The paper was discussed by Dr. HAMILTON and Dr. YOUNG; and Dr. HADDON, in reply, said he had been asked how to induce it. He held that it did not lie with the operator but with the patient, and depended on the power of concentrating his attention. Braid pointed out that it was the fixing of the eyes which was essential, as by putting something which glitters close to the eyes. He held it could be made use of for criminal purposes, but hypnotism could cure anything purely functional. Dr. BLAIR proposed a vote of thanks to Dr. HADDON for his address, which was unanimously accorded.

Colotomy for Intestinal Obstruction.—Dr. BANNERMAN related two cases of intestinal obstruction in which he had performed colotomy (left lumbar). The first was a man, aged 76, who suffered from complete obstruction for forty days. After the operation he got quite well and was able to go about for a number of years. The second case he showed was a man aged 57, with cancer of the rectum high up, which only a very severe operation could remove, and which he did not feel justified in recommending nineteen months ago; he did colotomy with great increase of comfort to the patient. In operating he advised the members to cut all the muscular fibres in the line of incision, and thus secure a straight wound from skin to bowel, otherwise a valve-like opening would result.