

HOURS OF ATTENDANCE AND OPERATION DAYS AT THE LONDON HOSPITALS.

CANCER, Brompton (Free). Attendances.—Daily, 2. **Operations.**—Tu. W. F., 2.

CENTRAL LONDON OPHTHALMIC. Attendances.—Daily, 1. **Operations.**—Daily.

CENTRAL LONDON THROAT, NOSE, AND EAR. Attendances.—M. W. Th. S., 2; Tu. F., 5. **Operations.**—O. P., 2; Tu. F., 3.

CHARING CROSS. Attendances.—Medical and Surgical, daily, 1; Women, W., 1; S. 9.30. Skin, M. Th., 1; Dental, M. Th., 8.45; Throat and Ear, F., 9.30; Electro-Therapeutics, Tu. Th., 9.30; Children, Tu. F., 1; Baccagen, W., 9.45; Orthopaedic, Th., 1. **Operations.**—W. Th. F., 3; S., 2.

CHURCH HOSPITAL FOR WOMEN. Attendances.—Daily, 1.30. **Operations.**—M. Tu. F., 2. CITY OPHTHEDIC. **Attendances.**—O. P., M. Tu. Th. F., 2. **Operations.**—M., 4.

EAST LONDON HOSPITAL FOR CHILDREN. Attendances.—M. Tu. Th. F., 2.

GREAT NORTHERN CENTRAL. Attendances.—Medical and Surgical, M. Tu. W. Th. F., 3.30; Obstetric, W., 2.30; Eye, M. Th., 2.30; Throat and Ear, Tu. F., 2.30; Skin, W., 2.30; Dental, W., 2.30. **Operations.**—M. W. Th. F., 2.

GUY'S. Attendances.—Medical, 1. P., M. Tu. Th. F. S., 1.30; o. p., M. W. Th. F., 12; Surgical, 1. P., daily, 1.30; o. p., M. W. Th. F., 12; Obstetric, 1. P., M. Tu. Th. F., 1.30; o. p., Th. S., 12; Eye, 1. P., M. Tu. Th. F., 1.30; o. p., M. Tu. F., 12; o. p., Ear, Tu. Th., 12; Skin, Tu. Th., 12; Dental, daily, 9.30. **Operations.**—Tu. F., 1.30; (Ophthalmic), M., 1.30; Th., 2.

HOSPITAL FOR WOMEN, Soho. Attendances.—O. P., M., 9; Tu. W., 12; Th., 9; F. S., 12. **Operations.**—M. Th., 2; Th. S., 9.30.

KING'S COLLEGE. Attendances.—Medical and Surgical, daily, 2; Obstetric, daily, 2; o. p., daily, 1.30; Eye, M. W. Th. F., 1.30; Ear, Th., 2.30; Throat, M., 1.30 F., 2; Dental, M. Th., 10; Skin, M., 10. **Operations.**—W. Th. F., 2.

LONDON. Attendances.—Medical, daily, 1. P., 2; o. p., 1.30; Surgical, daily, 1.30 and 2; Obstetric, M. Tu. Th. F., 2; o. p., W. S., 1.30; Eye, Tu. S., 9; Ear, W., 9; Skin, Th., 9; Dental, M. Tu. Th. F., 9. **Operations.**—Daily, 2.

LONDON TEMPERANCE. Attendances.—Medical, 1. P., M., 2.30; Tu. F., 9.30; Th., 2.0; O. P., M. Tu. W. F., 1; Surgical, 1. P., M., 2; Th., 3; O. P., M. Th., 1.30. **Operations.**—Th., 4.

LONDON THROAT, Great Portland Street. Attendances.—Daily, 2; Tu. F., 6. **Operations.**—Daily, 9.30.

METROPOLITAN. Attendances.—Medical and Surgical, daily, 2; S., 9; Obstetric, W., 2; Eye, M., 2; Throat and Ear, Th., 2; Dental, Tu. Th. S., 9. **Operations.**—Tu. W., 2.30; Th., 4.

MIDDLESEX. Attendances.—Medical and Surgical, daily, 1.30; Obstetric, Tu. Th., 1.30; o. p., M., 9; W., 1.30; Eye, Tu. F., 9; Ear and Throat, Tu. F., 9; Skin, Tu., 4; Th., 9.30; Dental, M. F., 9.30; W., 9. **Operations.**—Daily, 1.30.

NATIONAL OPHTHALMIC. Attendances.—M. Tu. Th. F., 2. **Operations.**—W., 10.

NEW HOSPITAL FOR WOMEN. Attendances.—Daily, 2; Ophthalmic, W. S., 9.30. **Opera-tions.**—Tu. F., 9.30.

NORTH-WEST LONDON. Attendances.—Medical, daily, exc. S., 2; S., 10; Surgical, daily, exc. W., 2; W., 10; Obstetric, W., 2; Eye, W., 9; Skin, F., 2; Dental, F., 9. **Operations.**—Th., 2.30.

ROYAL EAR, Frith Street. Attendances.—M. S., 3; Tu. F., 9; W., 2.30; Th., 7.30. **Opera-tions.**—Tu., 3.

ROYAL EYE, Southwark. Attendances.—Daily, 2. **Operations.**—Daily.

ROYAL FREE. Attendances.—Medical and Surgical, daily, 2; Diseases of Women, Tu. S., 9; Eye, M. Th., 9; Throat, Nose, and Ear, W., 9.30. **Operations.**—W. S., 2; (Ophthalmic), M. F., 10.30; (Diseases of Women), S., 9.

ROYAL LONDON OPHTHALMIC. Attendances.—Daily, 9. **Operations.**—Daily, 10.

ROYAL OPHTHEDIC. Attendances.—Daily, 2. **Operations.**—O. P., M., 2; i. P., Tu. Th., 2.30.

ROYAL WESTMINSTER OPHTHALMIC. Attendances.—Daily, 1. **Operations.**—Daily, 2.

St. BARTHOLOMEW'S. Attendances.—Medical and Surgical, daily, 1.30; Obstetric, M. W. F., 2; o. p., W. S., 9; Eye, M. Tu. W. Th. F. S., 2; o. p., M. Th., 9; W. S., 2.30; Ear, Tu. F., 2; Skin, Tu. F., 2; Larynx, M. Th., 2; Orthopaedic, Tu., 1.30; Dental, Tu. F., 9; Electric-al, M. Tu. Th. F., 1.30. **Operations.**—Daily, 1.30; (Ophthalmic), Tu. F., 2; Abdominal Section for Ovariectomy, W., 2.

St. GEORGE'S. Attendances.—Medical and Surgical, daily; i. p., 12; Obstetric, 1. P., Tu. F., 1.45; o. p., M. Tu., 2.30; Eye, W. S., 1.30; Ear, M., 2; Skin, W., 2.45; Throat, F., 2; Dental, M. Tu. F., S., 12. **Operations.**—Daily, 1; Ophthalmic, W., 1; Dental, Th., 9.

St. MARK'S. Attendances.—Fistula and Diseases of the Rectum, males, S., 2; females W., 9.30. **Operations.**—Tu., 2.30; Th., 2.

St. MARY'S. Attendances.—Medical and Surgical, daily, 1.45; o. p., 12.45; Obstetric, Tu. F., 1.45; o. p., M. Th., 1.9; Eye, Tu. F., 9; Ear, M. Th., 9; Throat, Tu. F., 9; Skin, M. Th., 9; Dental, W. S., 9; Electro-Therapeutics, W. S., 10; Children's Medical, M. Th., 9; **Operations.**—M., 2.50; Tu. W. F., 2; Th., 2.30; S., 10; (Ophthalmic), F., 10.

St. PETER'S. Attendances.—M., 2 and 5; Tu., 2; W., 5; Th., 2; F. (Women and Children) 2; S., 4. **Operations.**—W. F., 2.

St. THOMAS'S. Attendances.—1. P., Medical and Surgical, M. Tu. Th. F., 2; o. p., daily, 1.30; Obstetric, Tu. F., 2; o. p., W. S., 1.30; Eye, Tu. F., 2; o. p., daily, exc. S., 1.30; Ear, M., 1.30; Skin, F., 1.30; Throat, Tu. F., 1.30; Children, W. 10.30; Electro-Therapeutics, Tu. F., 2; Mental Diseases, Th., 10; Dental, Tu. F., 10; X-Rays, Tu. F., 2; Vaccination, W., 11.30. **Operations.**—Daily, 2; (Ophthalmic), Th., 2; (Gynecological), Th., 2; (Throat), M., 9.30; (Sars), Th., 9.30.

SAMARITAN FREE FOR WOMEN AND CHILDREN. Attendances.—Daily, 1.30. **Opera-tions.**—Gynecological, M., 2; W., 3.30.

THROAT, Golden Square. Attendances.—Daily, 1.30; Tu. F., 6.30. **Operations.**—Daily, exc. M., 10.

UNIVERSITY COLLEGE. Attendances.—Medical and Surgical, daily, 1.30; Obstetrics, M. F., 1.30; Eye, M. W., 1.30; Ear, M. Th., 9; Skin, Tu. F., 2; Throat, M. Th., 9; Dental, Tu. F., 9.30. **Operations.**—Tu. W. Th., 2.

WEST LONDON. Attendances.—Medical and Surgical, daily, 2; Dental, Tu. F., 9.30; Eye, M. Th., 2; Ear, Tu. F., 2; Orthopaedic, W., 2; Diseases of Women, W. S., 2; Electric, M. Th., 8.15; Skin, Tu. F., 2; Throat and Nose, Tu. F., 2; S., 10. **Operations.**—Daily, about 2.30; F., 10.

WESTMINSTER. Attendances.—Medical and Surgical, daily, 2; Obstetric, M. Tu. F., 2; Eye, Tu. F., 9.30; Ear, Tu., 2; Skin, W., 2; Dental, W. S., 9.15. **Operations.**—M. Tu. W., 2.

LETTERS, NOTES, AND ANSWERS TO CORRESPONDENTS.

COMMUNICATIONS FOR THE CURRENT WEEK'S JOURNAL SHOULD REACH THE OFFICE NOT LATER THAN MIDDAY ON WEDNESDAY. TELEGRAMS CAN BE RECEIVED ON THURSDAY MORNING.

COMMUNICATIONS respecting Editorial matters should be addressed to the Editor, 1, Agar Street, Strand, W.C. Those concerning business matters, advertisements, non-delivery of the JOURNAL, etc., should be addressed to the Manager, at the Office, 429, Strand, W.C., London.

ORIGINAL ARTICLES and LETTERS forwarded for publication are understood to be offered to the BRITISH MEDICAL JOURNAL alone, unless the contrary be stated.

AUTHORS desiring reprints of their articles published in the BRITISH MEDICAL JOURNAL are requested to communicate with the Manager, 429, Strand, W.C., on receipt of proof.

CORRESPONDENTS who wish notice to be taken of their communications should authenticate them with their names—of course not necessarily for publication.

CORRESPONDENTS not answered are requested to look at the Notices to Correspondents of the following week.

MANUSCRIPTS FORWARDED TO THE OFFICE OF THIS JOURNAL CANNOT UNDER ANY CIRCUMSTANCES BE RETURNED.

In order to avoid delay, it is particularly requested that ALL letters on the editorial business of the JOURNAL be addressed to the Editor at the Office of the JOURNAL, and not at his private house.

TELEGRAPHIC ADDRESS.—The telegraphic address of the EDITOR of the BRITISH MEDICAL JOURNAL is *Articulate, London*. The telegraphic address of the MANAGER of the BRITISH MEDICAL JOURNAL is *Articulate, London*.

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

QUERIES.

M.D. would feel grateful if any member residing in a city who has a personal experience of a private hansom cab could answer the following questions: (1) The best builder of private hansoms. (2) The approximate price of a well-turned-out hansom. (3) Are they suitable and satisfactory for a medical man whose driving is largely on stone pavements? (4) Are they serviceable?

THE SCILLY ISLES.

J. K. C. asks whether there is any place in the Scilly Isles where a patient, who is not well off, but could afford to pay about 15s. a week, could be sent for some weeks in the winter.

GASTRO-INTESTINAL CATARRH.

AGORAPHOBIA asks for advice in the treatment of the following case: A gentleman, aged 34, who had previously enjoyed good health, was attacked with "ptomaine poisoning" six years ago; since then he has been suffering from extreme neurasthenia, accompanied by catarrh of the stomach and large bowel. He suffers from palpitation, vertigo, and profuse perspirations in both axillæ coming on shortly after meals; he also complains of general restlessness, agoraphobia, cold shiverings with clammy sweats; the pulse is very rapid and "shoty" in character; the bowels are regular though the fæces are rather dry and knotty. He eats and sleeps fairly well. Bismuth and soda before meals with salol after have done him most good. Any further suggestions as to treatment will be very gratefully received.

TREATMENT OF URINARY HYPERACIDITY IN CHILDHOOD.

ACIDURIA will be glad of suggestions for the treatment of a girl aged 18 months, who has great frequency of micturition, especially during the day, sometimes at half-hourly intervals. There is no evidence of stone or other physical cause; but the urine is highly acid, and occasionally deposits uric acid crystals. The diet consists of milk with bread, porridge, rice, etc. Mixtures containing potassium citrate and liquor potassæ have been tried. The child appears quite well in other respects, except for excessive fretfulness; she had an attack of cystitis when 9 months old, which completely cleared up in three weeks.

EXTRAUTERINE PREGNANCY WITH LIVING CHILD.

DOLICHOCEPHALUS would be much obliged if any British or American correspondent can find the references to the following cases, reported in *Obstetrics*, February, 1890, without any statement as to where they were first published (*Obstetrics* is published in America); the article naming the case was by Dr. Ayers: Fowler, 1880 (at ninth month); Bond, 1895 (two months and a half); Eagleson, 1896 (ninth month); Frost, 1896 (ninth month); Dalton, 1897. They are not to be found in the late and deservedly lamented *Index Medicus*.

TREATMENT OF OBSTRUCTED HERNIA.

MEDICUS IN RURE writes: As one not specially practising surgery, and therefore not specially conversant with up-to-date notions, I should like to know what is the generally-accepted treatment for an obstructed hernia—ice or fomentations locally? My own experience teaches me that ice is quite the wrong treatment; unlike a fomentation, it does not relieve muscular spasm, or ease the patient's discomfort, or start any peristalsis, which often evacuates the flatus preventing the reduction. Personally I can vouch for the discomfort and inability as a pain reliever of ice locally. That it lessens congestion of the tumour seems to me to be merely a theoretical supposition. It seems very absurd to put the patient in a hot bath—a generally accepted method of treatment—and put ice on the tumour. Authorities like Walsham (1900) and Gould's *International Textbook* recommend both ice and warmth, the latter book bearing out my own experience as regards fomentations being the better in the aged, in whom one has the chief proportion of obstructed herniæ, especially of the scrotal variety.

THE FORM OF GALL STONES.

DR. JOHN W. DUNCAN, M.A., M.B. (Hockley, Birmingham), writes: In the article on Progressive Pernicious Anæmia in the BRITISH MEDICAL JOURNAL of November 10th there is mentioned a fact concerning gall stones that seems to me to be very interesting. It is said there that at a *post-mortem* examination there were found forty blackberry-like gall stones in one gall bladder. Now, all the books I can recollect give as a cause for the faceted appearance of gall stones when more than one come to be found in the same gall bladder that the pressure of one stone upon another causes them to be faceted. But here we have forty mulberry or blackberry-like stones at once. Hamilton, in his book on *Pathology*, states, I think, that when there is one stone in the gall bladder it is of a mulberry shape (blackberry-like), and when there are more than one the stones are faceted. The faceted stones are utterly unlike the mulberry, blackberry-like calculi. The one is angled, smooth surfaced, faceted, pyramidal, while the other is spherical, with a surface more or less coral-like, mulberry-like, or blackberry-like, and the colour of the two kinds varies. The faceted stone is light fawn, more or less, while the blackberry-like stone is dark brown or purple, like a fairly ripe blackberry. So that there can be no doubt about the two kinds, and forty blackberry-like gall stones can never correspond to forty faceted gall stones. Surely, then, something more than mere pressure from numbers must be the cause of the faceting. When a student, on opening the gall bladder (*post mortem*), I found three gall stones, one in the body of the bladder, and the other two, slightly adherent to one another, lying where the bladder joined the cystic duct. The one in the body was angled, pale fawn in colour, faceted and lay free from anything likely to cause faceting by pressure, while the other two were smaller, spherical, dark coloured and blackberry-like. Would these two mulberry ones, if in contact with the light fawn coloured, faceted one, have become also faceted? I am much inclined

to doubt it. Perhaps some correspondent may be able to enlighten me in this matter. I should be glad to be put in the way of procuring statistics on the matter.

OLD APOTHECARIES' JARS.

A CORRESPONDENT, who recently picked up three old apothecaries' jars in blue and white delft, asks for an explanation of the lettering on them.

* * * We are indebted to Mr. D'Arcy Power, to whom we referred the question, for the following notes :

The jar labelled "E. Diaprun." was evidently to contain the electuarium diaprunum or lenitive electuary which long held a foremost place in everybody's "shop." It remains to us as the confection of senna, and as Salmon says, was "a delicate thing to cool and loosen the belly, quench thirst, allay the heat of fevers and refresh the body in consumptions, hectics, and marasmus. It works without pain." There was also a purging electuary of prunes containing scammony.

The jar labelled "C. Salvia" may well have been for the salvia arestris or wood sage, which was used as a diuretic and sudorific, to heal wounds, and help the strangury. It digested humours, dried up ulcers, and consumed swellings, being taken for forty days together in decoction of guaiacum.

The jar with the spout labelled "S.E. Cic.c.Rhab." was to contain the syrupus e cichorie cum rhabarbo, or syrup of chicory with rhabarb, which was also in the College *Pharmacopœia*. Salmon says of it, "It is a pretty thing to purge flegm and choller with, cools and cleans the liver and bowels, suppresses melancholy, provokes urine, and strengthens the stomach."

ANSWERS.

Y. has omitted to enclose his card.

P. V.—Receipts as public vaccinator are assessable under Schedule D, and are therefore subject to a three years' average.

THE correspondent who sends us a page torn from a circular announcing businesses for sale has not stated the source from which the page was taken, nor has he verified his communication with his name.

WE would request correspondents who desire to ask questions in this column not to make use of such signatures as "A Member," "A Member B.M.A.," "Enquirer," and so on. By attention to this request much confusion would be avoided.

TREATMENT OF FLATULENT DYSPEPSIA.

DR. G. PARKER (Clifton) writes: Ten grains of benzo-naphthol in powder thrice daily, with, for a time, an alkali before meals often gives extraordinary results. If the patient has lost his molar teeth these should be replaced. Little fluid should be taken with meals, but copious draughts of hot water may be given when the stomach is quite empty, as in the morning.

NOTES, LETTERS, Etc.

RUNS AT SCHOOLS.

ANTICRIPPLE writes: Running is nowadays a regular thing at many of our large schools, and it seems to me it is a thing that might very easily be abused. A man or boy in thorough training can run long distances, but either the one or the other would be doing an injury to himself if he attempted anything like a long distance, say even a mile, without being in good condition—not merely in good health, but in good trained condition for such an effort. A boy urged by others to do a specified distance within a given time might seriously injure himself, especially if tired when he was urged, and I should like to warn masters at our big schools to be very careful that no boy be permitted—far less urged—to undertake such a thing till in thorough training. Considering the mania that now exists for athletics, it is most important that great care be exercised in the manner in which they are conducted, and for my own part I think that pushed running is more likely to produce disastrous effects than, say, football. As this concerns the rising generation, I hope that this letter may have the effect of sounding a note of warning where I suspect it is needed, and induce others who have more experience than I have to add their opinions and advice. The fact that no boy may have died in a forced run does not prove that many may not have been seriously injured, and very probably more or less broken down for life.

THE BACTERIOLOGICAL DIAGNOSIS OF HUMAN PLAGUE.

PROFESSOR DELÉPINE sends us the following corrections to his paper on the above subject, published in the BRITISH MEDICAL JOURNAL of October 27th: Page 1230, column 1, line 22 from bottom of page, instead of 20 read 24. Column 2, line 5, instead of "the distribution of the bacillus," read "the distribution and properties of the bacillus." Line 11 from bottom, instead of "a" read "the." Line 3 from bottom, instead of "There were only two colonies of staphylococci amongst a very large number of colonies of the plague bacillus. In one of the agar cultures they were," etc., read "..... amongst a very large number of colonies of the plague bacillus in one of the agar cultures. They were," etc. Page 1240, column 1, line 17 from bottom, instead of "introduced" read "induced."

LETTERS, COMMUNICATIONS, ETC., have been received from

A Audi Alteram Partem; Mr. F. T. Aston, London; A. G. O. I.; Dr. E. H. Allen, Hastings; Aciduria; Mr. E. Ambrose, London; Anti-Cripple. Dr. E. H. Bannister, Barchadoes; H. G. Barling, M.B., Birmingham; British Medical Temperance Association, Secretary of, London; Mr. H. T. Butlin, London; Dr. R. W. Batten, Gloucester; J. W. Betterham, M.B., St. Leonards-on-Sea; Mr. E. S. Bishop, Manchester; Dr. T. Beattie,

Newcastle-on-Tyne; Dr. J. W. Ballantyne, Edinburgh; Mr. G. H. Broadbent, Manchester; Dr. J. P. zum Busch, London; Mr. L. A. Bidwell, London; F. M. Blumer, M.B., Stafford; Dr. J. B. Brerley, Manchester. C. W. L. Cullen, M.B., St. Boswells; J. J. Clarke, M.B., London; Mr. C. P. Child, Southsea; Dr. W. T. Cocking, Sheffield; Cots-wold Mutton; Dr. J. G. Clegg, Manchester; Mr. G. Cecil, London; C. W. G.; Mr. J. K. Coutts, Manchester. Dr. O. A. Davies, Isle of Man; Dr. L. Dobson, London; Mr. W. A. Day, Bath; Mr. G. Dalton, London; Mr. E. Debenham, Gloucester; Dr. J. W. Duncan, Birmingham. Enquiries. F. Dr. W. H. S. Fosbery, Reading; F.R.C.S.; Mr. A. C. Fenn, Dover; N. Mol. Falkiner, M.B., Dublin; Dr. G. B. Flux, London; F. F. T.; Mr. J. F. Fry, Shepton Mallet. G. J. Gray, M.B., Stanhope; T. E. Gordon, M.B., Dublin; J. E. Gemmill, M.B., Liverpool; Dr. A. E. Giles, London. H. Mr. F. W. Hunter, Barrow; Mr. E. G. Hebb, London; Mr. C. Heath, London; Dr. J. F. Henry, London; Dr. J. F. Horne, Barnsley; Dr. T. W. Hime, Bradford; Dr. C. G. Havell, Folkestone; W. Hais, M.B., Orfist. J. Miss M. D. Jones, M.D., New York; Dr. Robert Jones, Olneybury; J. K. C.; R. Johnson, M.B., London; Mr. G. O. Jacobsen, Oxford. K. J. M. M. Kerr, M.B., Glasgow; Dr. A. Kinsey-Morgan, Bournemouth; L. Dr. E. E. Lord, Colwyn Bay; C. W. Low, M.B., Stowmarket; Dr. A. E. Larking, Folkestone; J. R. Lambert, M.B., Leeds; Mr. E. J. Leeper, Market Bosworth; Lex. Mr. W. M. Morrison, Catechgate; M.D.; Mr. J. T. Myers, London; Member of 25 Years' Standing; Dr. I. G. Modlin, Sunderland; Mr. W. J. Middelton, Bournemouth; Mr. S. W. MacLwaine, Redhill; Dr. J. W. N. Mackay, Egin; Mr. H. H. B. Macleod, Shrewsbury; J. S. Maynard, M.B., London; Medicus in Rure; M.O.H.; Mr. B. G. Matthews, London; Mr. E. E. Matheson, Dublin; Mr. E. Montgomery, Dublin; Mr. Y. Moore, London. N. New Chum; Mr. H. P. Norris, London; Nil Desperandum. O. Obstetrical Society, Secretary of, London; Oxonian; Mr. D. Owen, Manchester. P. Mr. J. F. Pink, London; Dr. J. E. Platt, Manchester; Mr. G. Parker, Clifton; Dr. T. D. Poole, Wolverhampton. R. Messrs. Robinson and Sons, Chesterfield; Mr. E. J. Reid, London; Messrs. Reynolds and Branson, Leeds; Mr. D. C. Rees, London; E.A.M.C.; Mr. H. Rugg, Burton-on-Trent; Dr. G. T. Revington, Dundrum; Mr. T. F. Raven, Broadstairs; Dr. F. W. F. Ross, London; F. S. Rose, M.B., Edinburgh; J. O. E. Richardson, M.B., Saxmundham. S. Dr. H. Snow, London; Mr. P. S. Spokes, London; Dr. A. W. Scott, Sheffield; Superfluous; Mr. M. A. Smale, London; Mr. C. Stonham, Machadodorp; Strengo Co., Manager of, Manchester; Mrs. S. B. Steele, London; S. Stephenson, M.B., London; Dr. S. J. Stuck, London; Dr. G. A. Stephens, Swansea; Messrs. Smith, Elder and Co., London; Scot; Dr. S. Sunderland, London; Dr. J. Scott, Manchester. T. Dr. J. W. Talent, Ashton-under-Lyne; Dr. W. H. Thompson, Belfast; Mr. W. E. Thompson, Glasgow; Mr. B. Thomson, Northampton. W. H. Walker, M.B., Glasgow; Mr. O. Williams, London; G. V. Worthington, M.B., London; Messrs. F. W. Warren and Co., London; Dr. B. C. A. Windle, Birmingham; Would-be L.M.: H. J. Walker, M.B., Durazno, Central Uruguay; Dr. T. J. Walker, Peterborough; Dr. T. Wilson, Birmingham; Dr. H. Woods, London. Y. Y.; etc.

BOOKS, Etc., RECEIVED.

- Die Entstehung und Ursache der Taubstummheit. Von Dr. F. Danziger. Frankfurt-on-Maine: Johannes Alt. 1900.
- Etude Pratique sur le Mal de Pott. Par Dr. V. Ménard. Paris: Masson et Cie. 1900. Fra 12.
- The Tale of a Field Hospital. By Frederick T. G. S. London: Cassell and Co. 1900. 6s.
- Food and the Principles of Dietetics. By H. Hutchison. M.D. M.R.C.P. London: Edward Arnold. 1900. 10s.
- The Norfolk and Norwich Hospital, 1770 to 1900. By Sir Peter Eade, M.D. London: Jarrold and Sons. 1900. 7s. 6d.
- A Manual of Surgical Treatment. By W. Cheyne, M.B., F.R.C.S., F.R.S., and F. F. Burghard, M.D., M.S., F.R.C.S. Lehrbuch der Histologie und der mikroskopischen Anatomie. Von Dr. L. Szymonowicz. Lief. V. London: Williams and Norgate. 1900. 3s.
- Die myasthenische Paralyse (Bulbarparalyse ohne anatomischen Befund). Von Dr. H. Oppenheim. London: Williams and Norgate. 1900. 6s.
- Die vasomotorisch-trophischen Neurosen. Von Dr. E. Cassirer. London: Williams and Norgate. 1901. 14s.
- Die Lepra in Ost-Indien während des 17 und 18 Jahrhunderts. Von Dr. J. M. H. van Dorsen. In dem holländischen Uebersetzt von Dr. F. C. W. J. IJlow. Berlin: A. Hirschwald. 1901. M. 2.
- Grundriss der Farbehemie. Von Dr. A. Pappenheim. Berlin: A. Hirschwald. 1901. M. 11.
- The Transactions of the Edinburgh Obstetrical Society. Vol. xxv. Edinburgh: Oliver and Boyd. 1900.
- Aetiology and Prophylaxie der Lungen-tuberkulose. Von Dr. J. Eubemann. Jena: Gustav Fischer. 1900. M. 2.50.
- Les Maladies qu'on Soigne à Berck. Par F. Calot. Paris: G. Masson. 1900. Fra 2.
- Design in Nature's Story. By W. Kidd, M.D. F.R.S. London: James Nisbet and Co. 1900. 3s. 6d.
- Part IV. London: Longmans, Green and Co. 1900. 14s.
- Traité de Pathologie Générale. Par O. Bouchard. Tome V. Paris: Masson et Cie. Fra 28.
- On Sanitary and other Matters. By G. S. Keith, M.D., LL.D., F.R.C.P.E. London: A. and O. Black. 1900. 2s. 6d.
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