

through the Court, makes arrangements for securing to the trustee payment of the bankrupt's share in the firm's assets (*Lindley on Partnership*, 6th edition, 686). In the case of a medical partnership it is anticipated that so long as the trustee gets the bankrupt's share of the assets, a surviving partner may do what he likes with the goodwill. The answer to the further question whether if the bankrupt has not paid the full purchase money to his predecessor he must have the latter's consent to the sale of a share would depend upon the terms of the arrangement between the bankrupt and his predecessor.

PUBLIC HEALTH AND POOR-LAW MEDICAL SERVICES

REMUNERATION OF DISTRICT MEDICAL OFFICERS AND PUBLIC VACCINATORS.

OUR attention has been directed to an advertisement which appeared in the *South Wales Daily Post* of June 27th, from which we gather that the guardians of the Pontardawe (Glamorganshire) Union invite applications from medical practitioners for appointments in five different districts of their union as well as for a medical officer to their workhouse who, when appointed, will be eligible for election to No. 1 District, also each district medical officer will be appointed public vaccinator for his own medical district. The salaries fixed by the guardians for these medical appointments vary from £12 10s. to £15, and they amount in the aggregate to £85 per annum; this includes the payment for the workhouse.

We find from the last published reports that the acreage of the union is 57,168, and the population 26,718; it is therefore no wonder to us to find that these six medical appointments are now vacant, but it is a great surprise to hear that such unremunerative salaries should be now offered, and it would appear as if the guardians themselves also regard the proposed salaries as being inadequate and not likely to attract suitable candidates who wish for permanent appointments.

This is clearly indicated by one of the conditions on which the appointments are to be held, and it appears as a part of the advertisement in question. It is as follows:

Each officer shall agree to give an undertaking in writing not to resign either appointment without vacating every other office held by him under the guardians.

We sincerely hope that the Local Government Board will not give its consent to any such unjust and unusual conditions, which, if sanctioned, would have the effect of enabling Boards of Guardians to use the powers they have acquired under the Vaccination Acts to enable them to procure medical attendance for the poor of their respective unions at such a low rate as must in the near future be found to be quite inadequate.

EXTRAS FOR PATIENTS ORDERED BY DISTRICT MEDICAL OFFICER.

T. B. G. asks for information regarding the power of a Union medical officer to order necessaries for patients. The relieving officer recently sent him an order to attend an old woman (not in receipt of regular relief), and finding she needed milk and could not get it, he ordered her one pint daily. He noticed she seemed almost afraid to take the order to the relieving officer. T. B. G. received a note from the latter saying that as the patient had two married daughters living near he could not allow the milk. It seems that if parish attendance was necessary it was also necessary to supply proper food which she could not get.

. District medical officers have no power to order extras for any of their pauper patients; they can only recommend such, and this should always be put into writing. The best form is to certify that such-and-such patients require such-and-such extras; if the relieving officer declines to supply the extras recommended, he has his reasons for doing so, and he risks the consequences of his refusal when he has to face either the Board of Guardians or the public. We should advise our correspondent after a few days to give a further similar certificate if he considers the extras recommended are still required; and in our opinion he would strengthen his own position by posting these certificates one after another to the relieving officer, and not handing them to the patient, who would naturally hesitate to present a second certificate if the first had been disregarded.

THE late Miss Helen Perry, of Wolverhampton, bequeathed £5,000 each to the Wolverhampton and Staffordshire Hospital, the Women's Hospital, Wolverhampton, and the Wolverhampton Nursing Institution. She also left a sum of £3,000 to the Wolverhampton Eye Infirmary, and directed that the residue of her estate, which is estimated to amount to £50,000, shall be divided in equal shares between the Wolverhampton and Staffordshire General Hospital, the Women's Hospital, and two other charities.

Obituary.

EMMANUEL MENDEL, M.D.,

PROFESSOR OF PSYCHIATRY, UNIVERSITY OF BERLIN.

ANOTHER of the coryphaei, so long the just pride of Berlin University, has passed away. Emmanuel Mendel, the great neurologist and alienist, died on June 23rd, at the age of 67, of heart failure brought on by progressive arterial calcification.

Mendel was a Silesian by birth; he studied at the Breslau and Berlin Universities, and took his degree in 1861. His dissertation showed the bent of his intellect, for it was on a subject taken from the domain of neurology. Nevertheless Mendel was far from beginning his professional career as a specialist. After visiting some foreign hospitals, he settled down as a general practitioner in a suburb of Berlin—Pankow—then a modest village of poor little houses, now known wherever neurology is taught or practised as the site of Mendel's asylum.

In Prussia's three great campaigns—1864, 1866, and 1870—Mendel did service. At Le Bourget a shot struck him, fracturing the tibia; a little earlier a bullet had been turned aside by the Red Eagle decoration which he carried in his waistcoat pocket.

In 1873 he began to lecture at the Berlin University, and from the first showed himself a master of this branch of his science as well as of its practical side. His course—On responsibility—became famous, and was attended by jurists and medical students alike.

Mendel's best-known books were on mania, on the progressive paralysis of the insane, the neurologist's expert opinion on diseases caused by accidents, a guide to the science and treatment of mental disease, but important publications of his are scattered throughout the medical periodicals of the last thirty years.

Mendel's geniality of character, his acuteness, and wide experience made his expert opinion sought and valued in the courts wherever crime was associated with mental disease. And when, fifteen years ago, the codification of German common law was taken in hand, and the lunacy laws were to be remodelled with the rest, it was Mendel who, in a series of admirable papers, indicated the necessary reforms, and who had the satisfaction of seeing his advice followed in almost every particular.

Mendel's patients—and their number was legion and of every class—venerated and loved their doctor. His large-heartedness and generosity were proverbial. He spared no effort to make Pankow, the home of his adoption, a thoroughly sanitary place, and when, years ago, water-works were to be built there, and all borings—except on a plot of land belonging to Mendel—gave no result, he immediately presented the plot to the corporation.

ALFRED SQUARE COOKE, M.R.C.S., L.S.A.,

CONSULTING SURGEON, STROUD GENERAL HOSPITAL.

DR. ALFRED SQUARE COOKE died a few weeks ago in Stroud, a place to which he had devoted over forty years of an active career. He was the youngest son of the late Mr. Boulter Cooke, Coroner of the city of Gloucester, and was born in 1842. He entered St. Bartholomew's Hospital in 1860, and completed his student career as M.R.C.S. Eng., L.S.A., in 1863. Some two years later he went to Stroud, and then began a close connexion with the Stroud General Hospital which proved of great importance to that institution. Some account of Dr. Cooke's work for the hospital was given in these columns last autumn, on the occasion of a presentation to him of a testimonial by the Governors and other supporters of the hospital. The institution when he joined it as its first regular House-Surgeon was a small building in George Street, Stroud, and to his energies and to those of other members of the staff of that time, all of whom have long passed away, the erection of the present building was due. Although in private practice, he served the institution in the double capacity of Secretary and House-Surgeon for some eleven years, then became in succession full Surgeon, Senior Surgeon, and finally, in September last year, Honorary Consulting Surgeon.

Dr. Cooke also held for some thirty-seven years the appointment of Medical Officer to Stroud Workhouse, and into its nursing arrangements introduced a complete