

BRITISH MEDICAL ASSOCIATION,
SUBSCRIPTIONS FOR 1885.

SUBSCRIPTIONS to the Association for 1885 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, 161A, Strand, London. Post-Office Orders should be made payable at the West Central District Office, High Holborn.

The British Medical Journal.

SATURDAY, MARCH 14th, 1885.

LUNACY TRIALS.

A NEW series of trials, mostly for the discovery of law in lunacy proceedings, demands notice; the most important of them being that of Hicks v. Bedford and others, reported in the columns of the *Times* of March the 4th and 5th instant, wherein those interested in details may peruse them. It was stated that the case was important, as throwing light upon the practice of workhouses in the reception of pauper-lunatics; but the plaintiff, although described as a person of no means, and dealt with as a pauper by the poor-law officials, was declared by Mr. Justice Wills not to have been a pauper. This is a warning for those numerous officials who are in the frequent habit of dealing with persons as pauper-lunatics who are not paupers, for whom this depression in the legal barometer indicates bad weather before long.

Mrs. Hicks, who was living with an aunt in lodgings, and had never applied for poor-law relief, unquestionably became insane, with abundance of delusions about poisoned air, poisoned food, dynamite, and other matters. Mr. Sims, her aunt's medical attendant, thought her dangerous, and gave a certificate to that effect; but "he did not mean to take any responsibility; he left it to the parish authorities to take the legal steps." These authorities took steps which turn out to be very far from legal. The relieving officer got Mrs. Hicks into a cab by a stratagem, and took her to Marylebone Workhouse, where she was confined in the lunatic-ward for fourteen days. She brought an action for damages for this false imprisonment against the relieving officer and the lodging-house keepers who had set him in motion, against a man who had assisted in conveying her to the workhouse, and against the master of the workhouse, who was ignorant of the whole matter, but who was held to be responsible for the conduct of his subordinates; and the jury found for her on all the questions put by the judge, and gave her £200 damages against the parties first named, and £50 against the master of the workhouse. The summing up of Mr. Justice Wills, which resulted in this verdict, will bear to be gravely considered by all relieving officers, masters of workhouses, and others who are in the habit of dealing with lunatics in poor circumstances, in a manner which is often a good many points off the true course of the law. Mr. Justice Wills expressed his great surprise "that officials of the workhouse could have so neglected their duty of ascertaining the law relating to their functions, or allowed themselves to drift into the habit of its violation.

With the exception of the case, of the inmate of a workhouse going mad during his sojourn there, there was no statutory authority for confining a lunatic in a workhouse." Why, there are twelve thousand lunatics in ordinary workhouses, besides five thousand in the metropolitan district asylums, which are but huge workhouses constructed for lunatics. Moreover, it is the common practice of relieving officers, acting under the direction of boards of guardians, to convey lunatics to workhouses, and confine them there, pending the examination of a justice of the peace, and his order for the admission of the lunatic into the pauper-asylum. In view of the apparent necessity of detaining lunatics in workhouses, it is probable that statutory authority will be provided; but such authority will scarcely be of the loose and lawless kind under which Mrs. Hicks was confined in the great Marylebone institution.

The series of actions brought by Mr. Hasker against the medical men who signed certificates of his insanity, and those who received him under care and treatment at Bethlem Hospital, have great interest to the members of our profession, as they seem to prove that the most careful, cautious, and correct proceedings will not save medical men from costly and anxious defence of their conduct in the discharge of their professional duties. All these actions have indeed been given against Mr. Hasker, and his appeals for new trials have been dismissed with costs. But Mr. Hasker, whose social, or rather professional, position is that of a lawyer's clerk, and who fights his legal battles in person, stands at an advantage with regard to costs to the defendants, who were represented by the usual array of solicitors and counsellors, and who are in a position to feel that the glorious uncertainty of the law contains at least one certainty, namely, that of heavy expenditure for those who are able to pay. Perhaps the governors of Bethlem will pay the costs of the defence of their medical officers, which would, however, then become so much money taken from a charitable fund now at a low ebb from agricultural depression; and, therefore, it is possible that the advantages of gratuitous treatment in Bethlem may have to be refused to persons quite as meritorious as Mr. Hasker, on account of his legal proceedings.

As Mr. Hasker has informed the Court of Queen's Bench that he intends to take all the cases to the House of Lords, it may be both right and prudent to reserve comments upon the merits of his actions; but we may, perhaps, be permitted to say, without prejudice, that the experience afforded by this trial may possibly have a tendency to influence the opinions of the physicians of Bethlem, and other asylums, as to the full and complete meaning of the term dangerous.

The physicians, also, who signed the certificates and who have had verdicts and judgments in their favour, will have, in future, to consider, perhaps, whether danger of homicide and suicide is much more appalling than danger of litigation, especially if they meet with an adversary who will not stop short of the House of Lords, although he admits in the witness-box that he is not able to pay the costs of unsuccessful actions. Surely, there is something wrong in the state of this facility for vexatious litigation; and rather than that the grand jury should be abolished in criminal courts, it would seem more reasonable that some inquiry of similar authority should be introduced into civil proceedings.

In *Durham v. Durham*, otherwise *Milner*, for the dissolution of a marriage on the ground of the insanity of one of the contesting parties, we get into a new and aristocratic region, which, however, is not

particularly interesting to medical men personally. The medical evidence is necessarily meagre and unsatisfactory, for the medical witnesses have been required to give their evidence *in camera obscura*, a method which does not seem greatly conducive to the dignity of the profession, or to the satisfaction of the public. In adulterous cases, no doubt, there is abundance of abominable evidence which it would be well to keep under the veil, and which is not so kept; but why medical evidence respecting insanity should be given in a private closet it is impossible to surmise, unless it be true, as it has often been suggested, that this particular court, more than any other court, is jealous of medical opinion. It can scarcely have been needful to draw the veil even between the public and Dr. Matthews Duncan's evidence, simply because functional disturbances might have to be mentioned incidentally; but the reason why Dr. Blandford should have been required to bear his testimony also under the veil is still more obscure. Everyone who has followed the case with any care must have anticipated the result; yet the judgment of the President is scarcely deserving of the *Times*' panegyric that "it is a minute psychological study, based on the evidence." No doubt it is sensible, and fair and good law, but it evinces no great amount of psychological study, and it ignores some psychological questions which might have been of the greatest importance if common-sense inference had failed to supply, as might well have happened, a sufficient basis for a satisfactory conclusion. The form of Lady Durham's insanity, and her actual mental condition from a medical point of view, and the grounds of the strong opinions which have been expressed that it is absolutely incurable, all remain under the veil. If the medical men be right, no doubt lunacy founded on imbecility is incurable; but if Sir James Hannen be right, a simple case of post-conubial insanity cannot be pronounced incurable. The medical witnesses may have some cause of complaint that the President of the Divorce Court should have taken their evidence *in camera*, while he has so remorselessly torn it to pieces in public. He says there is nothing in the evidence to warrant the medical opinion that Lady Durham had been imbecile from childhood, and he declares his own opinion, founded upon the evidence, that, although she was a person of low intellectual powers, she was capable of receiving the ordinary education of young persons of her class. The medical men appear to have testified that, in their opinion, the insanity preceded marriage, existed at the time of marriage, and that the present mental state is but a development of it. The President came to the opposite conclusion, that the lady was of sound mind before marriage, and at the time of marriage, and for several months afterwards, until, during her visit to Cannes, the mental change from sanity to insanity took place—a change which it was impossible to doubt from the concurrent testimony of many witnesses—a change marked by perversion of the affections, and other symptoms of that state which the doctors recognised as insanity, a new condition, in fact, which had no influence upon the lady's mind at the time when she entered into the contract of marriage; and therefore he dismissed the petition for its dissolution.

PHYSIOLOGY AT OXFORD.

THE School of Medicine at Oxford has now, we may fairly hope, escaped from the last difficulty which a factious opposition has not scrupled to throw in the way of its establishment. During the past eighteen months, every artifice has been used by the party which so loudly claims to represent morality and humanity, to prejudice the

minds of the authorities and of the graduates of the University of Oxford. We forbear to characterise the methods adopted by some of our opponents in the language which they deserve; and, while we regret that such men as Canon Liddon and Professor Freeman should have been carried away by the sophistries and misrepresentations of unscrupulous agitators, it is not, perhaps, altogether a matter for regret that the question should have been so thoroughly discussed and so unmistakably answered.

The facts of the case are sufficiently simple. In November 1882, Dr. Burdon Sanderson, at that time Jodrell Professor of Physiology in University College, London, accepted the appointment of Waynflete Professor in the University of Oxford. This appointment was universally recognised as a distinct indication that the University of Oxford had determined to establish a complete medical school in Oxford. Dr. Burdon Sanderson's motive, in resigning his exceedingly important and honourable appointment at University College for the arduous task of organising a new school, was the highly creditable desire to make this new school, in one of its most important departments, worthy of the great University. On June 5th, 1883, the Convocation of the University was asked to grant a sum of £10,000, to defray the cost of the erection of a physiological laboratory. This vote was carried by a small majority—3 in a house of 173. Subsequently, on February 5th, 1884, the question was again raised upon a point of detail; and, in an unusually large Convocation of 335, the vote to sell out the stock necessary to pay the £10,000 was carried by a majority of 41.

It might have been hoped that this second division, showing, in spite of all the efforts of the opposite party, the very decided opinion of the majority of Convocation, would have been sufficient to set the question at rest. The so-called antivivisectionist party, however, were not satisfied, but loudly contended that the vote was not representative. Accordingly, when notice was given that Convocation would be called upon, on March 10th, to vote the annual sum of £500 for three years, to defray the cost of heating, lighting, water-supply, wages, the salary of a Demonstrator of Histology, and other incidental expenses, a circular headed "Vivisection in Oxford," and signed by four heads of houses, by Mr. Ruskin, Mr. Freeman, five other professors, and a number of Fellows, was widely distributed, calling upon Convocation to forbid "the establishment of a centre of vivisection in Oxford." The publication of this circular led to the issue of a very remarkable counterblast, signed by a majority of the most prominent men connected with the University of Oxford, although the scientific professors, as a rule, abstained. The Dean of Christchurch and fourteen other heads of houses, the Regius Professor of Divinity, Professor Max Müller, and a number of the most distinguished teachers and Fellows were among the signatories. It is not necessary for us to insist upon the importance of such a testimony from such men, but we may be allowed to quote the words of the *Times*, which said that, "without disrespect to the anti-physiological party, we are bound to say that their list of names cannot for a moment compare with that of their opponents."

The meeting of Convocation on Tuesday last was very largely attended, and a little impatient. After listening to Canon Liddon and the Bishop of Oxford on the one side, and the Dean of Christ Church, Sir William Anson, and Sir Henry Acland on the other, it would tolerate no more eloquence from either party. The question was then put to the vote, and carried by a majority of 168 in a house of 656.

"It is hard to over-estimate," said the circular issued by the anti-physiological party, "the influence on popular opinion which is exerted by the attitude of an University such as ours."

We warmly congratulate Sir Henry Acland and Dr. Burdon Sanderson on the issue of the struggle in which they have been so long engaged, and so bitterly attacked; we may reasonably hope that the question may at length be considered as settled, and that the medical school at Oxford may now be able to develop regularly and quietly; and that the effort which will be made to organise a system of real medical study, and to prepare a new departure in the teaching of anatomy and physiology at Oxford next October, will be successful. Dr. Sanderson has a grand opportunity before him; he has sacrificed much in order to take up the noble work of organising a real school of medicine at Oxford. Success in such a work would be a worthy achievement for a life-time. There will be an universal feeling of confidence that the man who has now put his hand to the plough will not turn back, but will finally surmount every difficulty, to his own high honour, and to the great gain of the profession of medicine.

UNIVERSITY DEGREES FOR LONDON MEDICAL STUDENTS.

ANOTHER proof of the interest felt in the movement on foot to make it possible for the majority of students at the metropolitan medical schools to obtain university degrees, and of the growing belief that some practical means of achieving this end will be found, was afforded by the meeting of the Metropolitan Counties Branch of the British Medical Association, on March 6th. At the meeting, which was summoned to consider the report of the Council of the Branch (published in abstract in the BRITISH MEDICAL JOURNAL, February 21st, page 397), a large proportion of those present were men actually engaged in the work of teaching; the general tone of the meeting was practical and business-like, and the resolution proposed by the Council, empowering it to send a deputation to confer with the Senate of the University of London, was carried by a very large majority, after Dr. Sansom had failed to induce the meeting to omit from the report all reference to the University.

The course which has been adopted has been frequently recommended in the pages of this JOURNAL, as the only proper and dignified course to follow in this early stage of the question. Dr. Robert Barnes was loudly applauded when he argued that, as one of the chief aims of the founders of the University of London was the improvement of medical education, the great medical school in London was fully justified in demanding that the University should now once more move forward, and adapt itself to the needs of the day. When the University was founded, the teaching in the schools was very bad; money and interest were the only roads to preferment; the College of Surgeons was a little close borough, where friends and relatives elected each other; the College of Physicians was still a club for graduates of Oxford and Cambridge; and the Apothecaries' Society had as yet no ambitions. At the present day, the complexion of affairs is very different; medical teaching has greatly improved, and the status and knowledge of the general bulk of the profession are much higher than they were. In the earlier days, the University took up, rightly enough, a protestant attitude; but this is now out of date, and is apt to appear to practical men pedantic, if not even pharisaical.

Along with the improvement in medical teaching, we have witnessed

also a great increase in the complexity of the science and art of medicine, and, especially during the last twenty years, an extraordinary extension of the biological sciences. Once upon a time, one professor lectured on anatomy and physiology, and another on natural history; now-a-days, we are told that no school can be complete that has not separate courses on anatomy, physiology, human embryology, practical physiology, histology, physiological chemistry, comparative anatomy with dissections, embryology, botany, and morphological botany with dissections; further, to be able to perform the experiments in practical physiology and physiological chemistry, the student must have attended systematic lectures and practical courses on chemistry, physics, electricity, heat, light, mechanics, and so on, until the curriculum of the unfortunate student begins to remind one of the famous song of the House that Jack Built, for the connection between the priest who was shaven and shorn and the malt that lay in the house, was not more remote than the connection between some of these sciences and the practice of the art of medicine, which, after all is said, is still the real object of a medical education. Doubtless, it is possible to show that every science depends more or less for its entire comprehension upon some other, or upon all other sciences. The medical student is not yet examined in astronomy; perhaps this solitary omission will be supplied some day. May not a physician be called upon to advise a patient as to the proper climate to choose, and is not "climatology" nearly related to meteorology, and the latter, in a more remote way, to phenomena of an astronomical kind? Is it not mere pedantry to pretend that a man must study the notochord of amphioxus before he can understand the construction of the human spine; or that he must have a practical acquaintance with the renal organ of the gasteropods before he can be trusted to treat a case of Bright's disease?

As Dr. Bristowe truly said in his excellent speech, which ought to be read by everyone, the use of these early examinations is far more to ascertain whether the student has been taught and can yet learn, than to test his knowledge. Comparative anatomy, it is true, is on the border-land between those fields of study which are merely of use as affording a mental training, and those which have the additional advantage of presenting the student with a considerable store of useful facts. Professor Ray Lankester's letter, published last week, is, to a certain extent, beside the point; if all students are to spend a year or more in the study of these so-called preliminary sciences, most people will be ready to admit that it will be better for them to work under competent teachers in well appointed laboratories. The real question is, Can the general run of medical students afford the time to gain a real knowledge even of the elements of these sciences as now taught? The answer given by Mr. Macnamara in his opening speech, and by Dr. Bristowe, was in the negative. If every student received a good school-education, and were able to afford to spend an extra year in unremunerative study; and if, finally, the schedule of sciences with which he is supposed to be acquainted were thoroughly revised and curtailed in many directions, the answer might be different. As each department of science becomes more and more specialised, as the number of subdivisions becomes more numerous, and the mass of facts greater, so, it is contended, greater latitude should be allowed to the student in his choice of the subjects in which he shall be examined. Dr. Bristowe, for instance, would like to see the subjects at the matriculation examination grouped, and the candidate allowed to take up any group he might prefer. We confess to feeling great doubts as to the practical working of such a system; experience seems to show

that it is very doubtful whether it would really lighten the burdens laid upon the shoulders of the unhappy boys who have to pass that examination.

All the available evidence points to but one conclusion: that it is not so much the severity of the examination, but the miserably insufficient preliminary education of would-be medical students, that leads to the large percentage of failures; and it is very questionable how far the system of grouping would remedy this. At the matriculation examination of the University of London, the number of candidates during 1884 was 1,794, and the number of those who passed was 993; that is to say, nearly 45 per cent. failed. If we take the total number of candidates and passes since the foundation of the University in 1838, we see that the number who failed has been nearly 44 per cent. These seem large numbers until we turn to the reports of the College of Preceptors, presented to the General Medical Council about a year ago; these reports show that 264 candidates were examined in September, 1883, and 230 in March, 1884; of these 494 candidates, 357, or over 72 per cent., failed! To make matters even worse, the report on the examination in March adds, that "the number who failed in four or more subjects shows that a large proportion of the candidates were wholly unprepared for the test of any serious examination." Nearly 20 per cent. failed in four or more subjects, and, at the examination in September, 12 per cent. "were reported for defective spelling."

With such facts as these on one hand, and the demands of enthusiasts like Professor Ray Lankester on the other, Mr. Macnamara and the Council of the Metropolitan Counties Branch have a hard task before them, and it is difficult to foresee the issue of the struggle which is just commencing; whatever it may be, however, the public spirit which has dictated their conduct will be, we believe, universally recognised, and the Council and its President will have the gratitude and, to a large extent, the hearty support, of the profession at large.

DEATH BY ELECTRICITY.

MODERN science, in acquiring the power of separating and accumulating that mysterious fluid which, in the minds of our forefathers, was reverently thought to represent an attribute of divinity, has deprived it of some of its terrors to the superstitious mind. But, in doing so, it has introduced into our life a new source of danger, which might make the acquisition very undesirable indeed, unless proper precautions were taken to prevent the reproduction of accidents, such as those which have unfortunately been too often recorded during the past few years.

One of the inventors of the Leyden jar, Musschenbrock, from his first acquaintance with the electric shock, derived a most wholesome fear of its effects, as one can judge from his letter to Réaumur, where he says that he would not expose himself to the same shock again, not even for the kingdom of France; and yet the instrument which he had just invented, with his pupil Cuneus, was far from being very powerful. What the spirit of self-preservation then led him to say would have been more justified, if he had experimented with some of the accumulators now at our command. However, since that time, minds have become accustomed to the wonders of electricity; and it proved necessary that several persons should lose their life, in order that we should be awakened to the sense of our duty. This duty is the more necessary, as most of the victims of electricity

are to be found among those who, from their position in life, derive least benefit from it, and are most ignorant of its properties; whilst it is evident that those who use this powerful agent to some purpose know, at the same time, enough of its dangers to be guarded against them. Such a state of things calls for some measure on the part of authorities, whose duty it is to ensure the security of the masses, which have trusted the care of their welfare to the knowledge of their superiors.

A consideration of the cases which are recorded, and have come under our notice, will, it is hoped, bear this out more powerfully than any argument. The first case occurred at Manchester. A young adult, at the end of a theatrical performance, out of curiosity, touched two conductors, evidently within easy reach. He fell senseless to the ground, and died within forty minutes. We have then to register the death of the sailor on board the Imperial Russian yacht *Livadia*. Then comes the most important case at Hatfield House. William Dimmock, a young gardener, in the performance of his duties, took hold of electrical conductors which were entirely unguarded, and met with an instantaneous death. More recently, a case happened in Paris, where a man attempted to get into a garden illuminated by electricity, by climbing over the railings. In doing so, he took hold of some electrical conductor, and was killed on the spot. The accident at the Health Exhibition is described to-day in our columns. And, within the last few days, a new fatal case has come to swell this list, already too long. We refer to the tragedy which occurred at the works of M. Chertemps, in Paris, where a man, Paul Thiebault, is said to have deliberately taken hold of the electric conductors, and obtained thus an instantaneous death. It will be seen that all these cases have occurred within the last five years, and it is probable that there have been other cases which have not come within our knowledge. Considering the comparatively small number of powerful electric engines now in use, such a number of fatal accidents is certainly worthy of attention.

The Health Exhibition case, as it may be conveniently termed, resembled some recorded cases of death from lightning in the most distinct of the external evidences of injury; for on the outer aspect of the left index-finger was a small elongated blister, about half an inch in length, which had the appearance of a burn, but there was no congestion of the skin around it, nor any smell of charred epidermis. Drs. Sheild and Delépine describe, with great care and minuteness, the appearance of the structures around and included in this blister. It must ever be borne in mind that, whilst almost every student has examined sections of sarcomata and carcinomata, the pathology and histology of blisters, burns, and scalds, have been neglected by many leading pathologists. Hence, what is common to all blisters might, in such a case, be taken as pathognomonic of electrical vesication. In this instance, however, the authors of the paper imply that they found distinctions, which want of space prevented them from describing; and they promise further and elaborate discussion of the subject. There is no doubt that Drs. Sheild and Delépine have succeeded in discovering very definite changes in the skin involved in the blister. The cells and their nuclei in all the layers of the epidermis were found to have undergone great modifications from their normal type. Even the tough stratum corneum, the most superficial part of the cuticle, exhibited signs of change. Its dry horny cells were seen, in the middle of the blister, to be condensed and fused together, forming a homogeneous waxy mass. The next layer, or stratum lucidum, was

conspicuous at the margin of the blister, and still more distinct within the limits of the blister, excepting in the actually central portion, where it could not be distinctly recognised from the stratum corneum. The next layer of the epidermis, which consists of flattened scales with granules, of a nature intermediate between protoplasm and keratin, around their nuclei, and is termed the stratum granulosum, was found to be much altered and fused with the rete Malpighii, or stratum mucosum, towards the centre of the blister. In the rete itself, the changes were marked, and are described with minuteness. There were distinct morbid appearances in and around the nuclei, and a remarkable fibrillation of protoplasm. In the cutis vera, or corium, the papillæ were abnormally flattened, and a complete fusion of the delicate fibres, abundant in the true skin, had taken place in the middle of the blister, producing a homogeneous appearance. The epithelioid cells of the capillaries had contracted, so that there were a number of openings or fissures between the individual cells, which, it must be remembered, form the only true wall of these minute vessels. Some of the cells in the coiled part of the sweat-glands exhibited considerable deviation from their natural appearance. The changes in the nerves were not considered, according to Drs. Sheild and Delépine, to be either very distinct or highly characteristic. They dwell, on the other hand, upon the abnormal clearness and distinctness of the tactile (or Meissner's) corpuscles. These bodies are, we believe, tolerably familiar to all who have studied physiological manuals; they are found in the papillæ of the corium covering the palmar aspect of the fingers and the plantar aspect of the toes, each being always connected with at least one nerve-fibre, which winds round and ultimately fuses with it. The morbid distinctness of the corpuscles may be due to some severe but unknown injury to their substance, produced by the electric current, an injury which, at the very moment of its infliction, may transmit a profound or even deadly impression to the great centres along the nerves in connection with the corpuscles.

The medico-legal aspect of the question has already often been referred to in our columns, and we are glad to-day to put our readers in possession of some facts which may prove of use, should any obscure case necessitate judicial inquiry. A more complete contribution being promised, we shall only for the present point out to our readers the importance of these facts as antecedents. The suggestions which have already often been made by us, and some of our contemporaries, touching the advisability of replacing the actual mode of applying capital punishment by death through electricity, are supported by the evident efficacy with which death has followed the action of the fluid in all the cases in question, except the first, where the power used was comparatively small. The case of suicide which has just happened in Paris certainly strongly supports the view; and the horrible spectacle which quite lately was witnessed at Exeter, with the remembrance of similar scenes, such as those which occurred at Wandsworth and at Galway, are sufficient reasons why some departure should be made from the received methods. But before anything else, we advocate some efficacious measure, which would prevent the use of powerful electrical engines, unless all the parts which might prove dangerous to the unwary were properly and adequately guarded. Lastly, turning to another medico-legal aspect of the case, it is, unfortunately, only too possible that electricity, when made still more portable and manageable than it is at present, could be used for criminal purposes, so that men may, at no

distant period, go about with as much fear of being electrified to death by malefactors, as crews of men-of-war already dread torpedo-boats. For the checking, by detection, of such criminal perversion of the resources of science and civilisation, Drs. Sheild and Delépine have done their best in describing the physical effects of electricity on the microscopical elements of the tissues in a case where death from electricity was indisputable.

MEASLES AT SUNDERLAND.

SUNDERLAND is being visited by a severe epidemic of measles, the inhabitants of the colliery neighbourhoods of Bishopwearmouth and Monkwearmouth being among the greatest sufferers. Schools are blamed for a large share in spreading the infection; and, in presence of the epidemic, the health-officer is regretting the absence of the compulsory notification of infectious disease, though it is difficult to see what particular sanitary advantage this would give him.

THE BRITISH GYNÆCOLOGICAL SOCIETY.

THE first meeting of this Society was held at 11, Chandos Street, on Wednesday, the 11th instant, at 8.30 P.M., when there was a large attendance, there being more than eighty present, including ten visitors, some of whom joined the Society at the close of the meeting. The President (Dr. Alfred Meadows), after the ordinary business, delivered an inaugural address (which will shortly be published), in the course of which he announced that 266 names had been enrolled as Foundation Fellows of the Society. At the end of the meeting, the number was increased to 272. The first number of the *British Journal of Gynecology*, published by Smith, Elder, and Co., will be issued by the Society on April 10th.

HOW TO SUPPRESS EPIDEMICS OF MEASLES.

IF the action of the Widnes Local Board be correctly reported in the daily papers, we seem to be drifting back into the pre-hygienic days of quarantine; for it is gravely announced that a severe epidemic of measles being now existent at Widnes, the Local Board of that place last Tuesday instructed its clerk "to write to such manufacturers in Widnes as employed the seven hundred workmen who live in Run-corn and work in Widnes, taking weekly contract tickets across Run-corn Bridge, to compel their men to live in Widnes or cease employing them, so as to prevent the further spread of the disease." How charmingly simple and socialistic, but, alas! how utterly unworkable and useless is this measure of "prevention."

"DENGUE FEVER" IN NEW CALEDONIA.

ACCOUNTS reach us of a serious outbreak, a month or so ago, of "dengue," "dandy," or "polka" fever, in Noumea, the chief town of the French convict settlement of New Caledonia. It is stated that, at one time, there were upwards of nine hundred cases of "dengue" existing in the neighbourhood. The disease was no respecter of persons, for thirty-six officials were simultaneously among the sufferers. Even the British Consul did not escape, and, on his recovery, he had partially lost both sight and memory. Strange to say, not a single death occurred. During the epidemic, the captain of a vessel loading off the port, had the whole of his crew, consisting of ten hands, invalidated; and, in consequence of the extent to which the disease prevailed, men to replace them could only be found with some difficulty.

THE ILLNESS OF GENERAL GRANT.

WHILST all who read the newspapers in any country must have learnt, with regret, that the gallant general who saved his country from disunion, and guided its destinies for so many years, is suffering from a painful and deadly malady, it is very advisable that capital

should not be made by a certain party out of the alleged cause of his illness. It has been distinctly reported in several journals that General Grant is suffering from cancer of the tongue caused by smoking. A little knowledge of pathology is sufficient to demonstrate that smoking cannot cause cancer, although the irritation of a pipe sometimes sets up ulceration of the lip, which, when of very long standing, may become cancerous, provided that the patient has a hereditary tendency to cancer. There is no evidence whatever that cigar-smoking causes cancer of the tongue. Mr. Butlin, the author of some of the most recent observations and statistics on cancer of the tongue, has shown that the proportion of men to women suffering from that disease is nearly six to one, but that it occurs in men who neither drink nor smoke, whilst it is as rare among women of the most masculine habits as amongst other females. Even the irritation of a broken or decaying tooth can only be an occasional exciting cause, since this condition is as common amongst women as amongst men, whilst cancer of the tongue is, fortunately, rare, out of all proportion to cases of decayed teeth. There can be no doubt that a man with a tooth irritating his tongue ought to have it removed. It is equally certain that no smoker who has a sore on his tongue ought to persist in the use of tobacco until that sore is cured. But the risk of cancer through smoking is so infinitesimal, as to be perfectly useless as an argument for the antitobaccoists.

THE GOVERNMENT OF LONDON.

SIR WILLIAM HARCOURT, with something of his old skill as a special pleader, is losing no opportunity of discrediting in the House of Commons the present municipal government of the metropolis. We have already been told on authority that, despite the pleadings of Mr. Firth's Reform League, the Cabinet have abandoned all hope of passing their London Government Bill this session. Probably, therefore, it will not even be introduced, but be handed over to the new Parliament, along with a number of other matters, such as the land laws and private bill legislation, that have already been conveniently hung up in the same way. But the Home Secretary is careful to let it be known that he is still of the same mind about the deplorable mismanagement of metropolitan affairs; and herein he is wise. For, especially in an overgrown invertebrate organisation like London, no reform has the least chance of acceptance that is not persistently dinned into people's ears as the only remedy for a state of things admittedly wasteful and scandalous, but because everybody's business is nobody's. Sir William Harcourt even went so far, in a discussion last week on the Thames Crossings Bill, as to express his view that the Metropolitan Board of Works did not command the confidence of London, though he ostentatiously washed his hands of any responsibility in the matter. Now, this is surely carrying the principle of anti-centralisation too far. Does Sir William mean that he will sit still and offer no help in getting things done right, because his municipality is not yet in working order? The moral of his recent lectures on the subject apparently is that, until Parliament can find time to pass his Bill, Londoners must struggle on as best they can, and that he is only prepared to end, not to mend, the existing local government of the metropolis. This is hardly encouraging; and we venture to think that, even at the expense of a little consistency, the Home Secretary might lend a helping hand to London in its present administrative difficulties, instead of offering to it counsels of perfection that, from no fault of its own, it is unable to embrace.

THE PRINCE OF WALES AND THE HOUSING OF THE POOR.

AN absurd rumour has somehow obtained credence, that the visit of the Prince of Wales to Ireland is connected with his duties as a Royal Commissioner to inquire into the Housing of the Poor. The story probably does not need contradiction, being, on the face of it, fanciful and ridiculous. But, in denying it, we may take the opportunity of bearing testimony to the really remarkable perseverance and devotion

with which the Prince has applied himself to the by no means easy or entertaining work of the Commission. Every Tuesday and Friday the Commission sits, and regularly, on each day of its sitting, His Royal Highness attends at Richmond Terrace to assist in its deliberations. Now, to those who know how "slow," in society parlance, the proceedings of a Royal Commission are, this sacrifice of time on the part of the Prince argues a very sincere and genuine sympathy with the question. No subject, indeed, could well be more important than the social life and surroundings of the working classes of a community, though it is only lately that the public conscience has been pricked by a remembrance of its sins of omission in this respect. The intimate and personal interest in this grave national question which the Heir Apparent has publicly manifested, is of the happiest augury to the welfare of Her Majesty's poorer subjects. In things great as well as small, society takes its cue from the doings of royalty; and the example set by the Prince of Wales cannot fail to bring home to the great landowners that property has its obligations as well as its privileges, and that the better housing of the poor is not only a national, but a personal duty.

UNIVERSITY REPRESENTATION IN PARLIAMENT.

THE House of Commons spent a not altogether unprofitable evening on March 6th in discussing a resolution proposed by Mr. Bryce (himself the Professor of Civil Law at Oxford), which would deprive our Universities of any share in the parliamentary representation of the country. The arguments used by the Member for the Tower Hamlets, and those who supported him, were of the familiar description: that the university members do not represent the views of those who constitute the real university—namely, the resident graduates, but merely the politics of a heterogeneous mass of former collegians, scattered up and down the country. The fact that so many distinguished *alumni* of universities should publicly express their anxiety to deprive their *alma mater* of articulate voice in the counsels of the nation, is one that must be reckoned with and accepted as a sign of the times. Our own interest in the matter is, of course, mainly the securing to the faculty of medicine of the share of direct representation to which it is manifestly entitled, and of which it has too long been deprived. The Association of Members of the Royal College of Surgeons have endeavoured to prevail upon the Prime Minister to give two representatives in Parliament to the registered medical practitioners of Great Britain and Ireland, for the reasons set forth on p. 879 of our last volume. Probably the Association hardly expected to have its wishes realised quite in the way suggested; but it, at least, did not anticipate that so cruel a blow would be aimed at the small remnant of the representation of science and culture which will be left to us under the provisions of the Redistribution Bill. We are far from saying that the present method of parliamentary representation of universities is ideally perfect; but the case is evidently one for reformation, not annihilation. As Sir Stafford Northcote pointed out, we are enormously increasing the power of the numerical majority, the representation of mere numbers, and there ought to be some kind of counterbalance. Through the universities a representation is given to education and learning, which otherwise would not be provided for, and we feel therefore bound, in the interests of the medical graduates, to protest against the deprivation of their parliamentary rights, with which Sir Charles Dilke threatens them in the next Reform Bill.

ST. JOHN AMBULANCE ASSOCIATION.

A CONFERENCE of the examining staff of the Association was held last week at St. John's Gate—Dr. Sieveking, Physician-Extraordinary to the Queen, in the chair—for the further consideration of a recent report on the method of conducting examinations. Letters having been read from many of the provincial examiners, the chairman, in the course of some opening remarks, referred to the liberal support given by the medical profession to the movement, and its continued

extension both at home and in India and the colonies; and a lengthy discussion followed, among the speakers being Drs. J. C. Street, J. P. Wilton, and Crespini; Mr. F. B. Baker (Grenadier Guards); Mr. S. Benton; Fleet-Surgeon H. C. Woods, R.N.; Drs. Roberts Law, Collingridge, and H. Percy Potter; and Deputy Inspector-General M. Coates, R.N. Mr. John Furley, Deputy-Chairman, and Honorary Director of Stores, having given an account of the development of the Transport Department for the removal of invalids, some of whom have been brought a great distance, the proceedings closed with the usual vote of thanks to the chairman.

THE FIRST DISCOVERY OF THE COMMA-BACILLUS.

At the meeting of the Royal Microscopical Society, held at King's College, on Wednesday evening, Mr. Francis Fowke read an interesting paper on "The First Discovery of the Comma-Bacillus;" in which, while disavowing any idea of impugning the originality and independence of Dr. Koch's researches, he claimed for Dr. Brittan and Dr. Swayne the honour of having observed and described, thirty-six years ago, the identical organism with which the name of the great German investigator is now connected. He said that, having taken an interest, as a microscopist, in the recent researches into the meaning and significance of the bacillus of cholera, he had referred to the medical literature of the time of the last visitation of the disease in this country, and had found, in the pages of the *Provincial Medical and Surgical Journal* of 1849, most interesting evidence of the discovery of the comma-bacillus by the two English medical men above named. Mr. Fowke read numerous quotations in support of his claim from the medical press of the time, and exhibited drawings, reproduced by photography from prints in the *Provincial Medical and Surgical Journal*, showing the cells and bacilli found by Dr. Brittan and Dr. Swayne in the vomit and dejecta of cholera-patients, which presented an unquestionable similarity to the now well known appearances of the comma-bacilli of Koch. A short discussion followed the reading of the paper, which will, we understand, be published in the *Journal* of the Society.

GALLANT CONDUCT OF A LADY SUPERINTENDENT.

The nursing department of the Philadelphia Hospital is, at the present time, under the charge of Miss Alice Fisher, who left this country not long ago, accompanied by Miss Edith Horner, in order to take up the appointment. We understand that, during the disastrous fire which recently occurred in the lunatic wing of that hospital, where nearly fifty inmates lost their lives, Miss Fisher behaved with singular coolness and courage. It is stated that, while the confusion was at its worst, Miss Fisher "did wonderful work in preparing the women patients of the insane department for the inevitable abandonment of their quarters." She laid her plans with perfect coolness, her assistants were told off to definite posts, and the patients were gathered in groups. It is further added: "No undue haste was observable, and there was comparatively little confusion. The wretched women were told to take what they could with them, and blankets were even served out to all." At one time, the lives of over 700 lunatics were in imminent danger. Miss Alice Fisher is well known to many members of the profession in this country, from having held the appointments of Lady Superintendent at Addenbrooke's Hospital, Cambridge, the Radcliffe Infirmary, Oxford, and the General Hospital, Birmingham. At each of these institutions, Miss Fisher was able to effect most beneficial changes in the nursing arrangements, and at the same time to secure the hearty co-operation of the medical staff.

DEATH OF PROFESSOR ELLSBERG.

By the untimely death of Professor Ellsberg, of New York, laryngology in America has sustained a severe loss. Professor Ellsberg, who was born in Germany in 1837, was, we believe, the first to introduce

the laryngoscope into medical practice in America. His numerous contributions to literature have been distinguished by clearness, thoroughness, and a rare knowledge of the literature of his subject. He was the first President of the American Laryngological Association, and the chief editor of the *Archives of Laryngology*. He had been in failing health for many years, and succumbed to an attack of pneumonia on February 19th. His death will be a source of sincere regret, not only to the profession in America, but to his numerous European friends, for both classes had learned to respect his upright character, his vast knowledge, and enthusiastic devotion to the study which he had chosen.

ANNIVERSARY DINNER OF THE MEDICAL SOCIETY.

The one hundred and twelfth anniversary of the Medical Society of London was celebrated on Saturday last, when the Fellows, and a number of invited guests, dined together in the Venetian Room of the Holborn Restaurant. After dinner, the usual loyal and patriotic toasts were given. "The Army, Navy, and Reserve Forces" was received with cheers, redoubled when Mr. Durham went on to refer to the generous conduct of the English colonies, conduct which had shown that there was a reserve force beyond the British seas. The sympathies of the Fellows of the Medical Society were, he said, extended especially to their brethren in the medical services of the army and navy; and he added that two of the officers whose conduct had been especially commended, Surgeon-Major Conolly and Surgeon Keogh, had been dressers in his own wards at Guy's Hospital. Dr. Crawford, Director-General Medical Staff, who responded to the toast, was very warmly received. He described the present campaign as one of the most arduous, owing to the nature of the climate and the severity of the physical exertion and endurance, which the British soldier had ever been called upon to make. The officers of the Medical Staff, as the Army Medical Department is now called, had had, he said, very heavy work to do, and unusual difficulties to contend with, owing to the remoteness of the scene of action, the various detached expeditions, and the unaccustomed nature of many of the operations. All difficulties had, however, been successfully overcome. The Medical Service, when accusations, since abundantly proved to be unfounded, were brought against it, had been encouraged by the ready sympathy and generous indignation of the profession at large, and it was therefore gratifying to him to be able publicly to announce in such an assembly that, during the present expedition, the officers of the Medical Staff had been praised on all hands for the self-devoting and unsparing energy with which they discharged their trying duties. The toast of the Medical Society of London was given by Mr. Durham, the retiring president, and responded to by Dr. W. M. Ord, the president-elect. The toast of the Royal Colleges of Physicians and Surgeons was proposed by Sir Joseph Fayrer, who said that he was a warm advocate of the scheme for affording London students greater facilities for obtaining degrees. It was responded to by Mr. Cooper Forster, the President of the latter College. He referred to the arrangement between the two colleges, which had resulted in the establishment of a conjoint examination, and added that, since he had sat upon the Council of the Royal College of Surgeons, he had changed his opinion with regard to the management of that body, and now believed that no alterations could result in an increase in its usefulness, or an improvement of its methods. The health of Mr. Durham was drunk with great enthusiasm, and, after returning thanks, the retiring president discharged his last duty by proposing the health of the officers and honorary secretaries of the Society. This was acknowledged by Dr. Allchin, Honorary Librarian; Mr. A. Pearce Gould, the retiring Honorary Secretary; Dr. Kingston Fowler, and the Registrar, Mr. Poole.

OVERPRESSURE AND HIGHER EDUCATION.

The subject of overpressure dies hardly. Mr. Stanley Leighton once more brought up Dr. Crichton Browne's report into the arena of par-

liamentary questionings last Friday, and was told by Mr. Mundella that no steps were proposed to be taken by the Education Department itself with reference to that report, "inasmuch as, long before anything was heard of it, provisions were introduced into the Code which, by general testimony, have done all that the central government can do to prevent overpressure." The real difficulty at the bottom of this matter—a difficulty which departments and teachers seem never able to solve—is that of the "personal equation." What is undoubtedly overpressure in one child, under one set of circumstances, is by no means so in the case of another child in a different set of circumstances; yet the same Procrustean rule is applied to both. Overpressure, being interpreted, would very often signify underfeeding. The ratepayers of the metropolis, smarting under the increasing education-rate, are beginning to doubt whether the curriculum of the School Board is not a little too advanced for the great body of children entrusted to their care; though no enlightened citizen would grudge the expense necessary for facilitating the higher education of everyone, however poor, who has the industry and the mental capacity to pursue it. And how far behind other nations we are in the opportunities of this higher education, is strikingly shown in some very interesting figures which Sir Lyon Playfair last week quoted in the House of Commons in protesting against the banishment of the representatives of universities from the House of Commons. Sir Lyon pointed out that foreign countries, during the last ten years, had made enormous strides in promoting university education. The competition of nations now, both in war and peace, was not a competition either of brute force or of local advantages, but was a competition of intellect; and foreign nations recognised this in a remarkable way. Jules Simon had stated that "the best educated nation will be the greatest nation, if not to-day, certainly to-morrow." Before the great revolution, France had twenty-two universities, which spread intellectual life throughout all the provinces. Napoleon destroyed these universities, and centralised them into one single university in Paris. Just before the war with Germany, university education in France had fallen so low that the subventions amounted to less than £10,000. Immediately after the war, the French Institute for a whole fortnight discussed the question why it was that France had shown an intellectual paralysis in the war. Why had not any great men come forward in the hour of danger? The answer was, that higher education had been crushed out. France had recognised the position, and had recently spent £3,280,000 in rebuilding her colleges throughout the provinces. The subvention for university education alone was now £500,000 *per annum*. When Germany took Strasburg, the first thing she did was to rebuild the university of that small town, at an expense of £711,000; and she now gave it £46,000 a year for university education. Germany had twenty-four universities, and spent annually £400,000 for university education, besides £200,000 more to provide the institutions with the modern appliances of science. The Netherlands, with a population about the same as Scotland, and with a revenue of only nine millions, had four universities, and gave £136,000 a year for university education. Either (said the honourable member) foreign nations were extravagantly absurd, or we were excessively weak in the attention given to higher education. No one who knows the facts needs to be told which of these two alternative propositions is the correct one.

ROYAL COLLEGE OF SURGEONS.

PROFESSOR WILLIAM A. BRAILEY will commence his course of three lectures on some points in the Anatomy and Physiology of the Eye, in the Theatre of the College, on Monday next, the 16th instant, at 4 o'clock. The following is his syllabus. Lecture I. Variations in the size and shape of the eyeball; relation of these points to age, to size and position of the lens, and to thickness and shape of the ciliary body. Thickness and strength of the sclerotic in different parts; their relation to age and to yieldings of the tunics of the eye, general or local. Development of the so-called myopic crescent and posterior

staphyloma in myopia.—Lecture II. On the lamina cribrosa; its power of resistance to pressure; variations in its curve or position. The capsule of Tenon. Relation of extreme peripheral part of anterior chamber of the aqueous humour (iris angle) to the sclero-corneal junction, as indicated externally. Position of the macula lutea in relation to the optic disc and insertion of the obliquus inferior; its relation to the optical axis of the eye. Size and shape of the ciliary body and muscle; their variation with age.—Lecture III. Source and course of the intraocular fluids; relation of their increase or diminution to position of lens, ciliary folds, and iris-base. Optic neuritis and papillitis secondary to inflammations of distant parts; their cause and mode of propagation.

THE NORTH-WESTERN PROVINCES AND OUDH BRANCH.

THE report of the third annual meeting of the North-West Provinces and Oudh Branch of the British Medical Association gave an encouraging account of the progress of the Branch. When first formally recognised on October 18th, 1882, it consisted of 32 members; in December, 1883, the numbers had risen to 57, and in December, 1884, to 115. The financial position was satisfactory, as a balance remained after defraying the cost of the monthly journal of the Branch and all other expenses. Surgeon-Major Boileau, to whose energy as Vice-President and Honorary Treasurer the success of the Branch has been largely due, has become the President of the Branch.

INNERVATION OF THE LARYNX.

PROFESSOR SIGMUND EXNER, in his work, *Die Innervation des Kehlkopfes* (Vienna, 1884), announces the discovery of a third laryngeal nerve—*nervus laryngeus medius*. This nerve is derived from the pharyngeal and laryngeal plexus formed by the pharyngeal branch of the vagus with other nerves, and enters the crico-thyroid muscle, which is also supplied by the external branch of the superior laryngeal nerve. The interarytenoid muscle is supplied by both upper and both lower laryngeal nerves, and, generally, each muscle is innervated by several nerves. The above conclusions are deduced from three lines of research: 1, irritation of nerves in living animals; 2, degenerations of nerves after section in living animals; 3, examination of the larynx in children (*post mortem*).

THE FAMILIAR USE OF DRUGS.

SELF-TREATMENT by means of drugs is not a new practice. No one will deny that it may in some cases be a reasonable and advantageous one; but, at the same time, any such recourse to medicine must be of very limited application, and must be guided by due caution. The external use of turpentine or mustard, and the few time-honoured remedies of nursery-physics, may usually be committed to the discretion of ordinarily sensible people; but the case is different when narcotics, or, indeed, most official preparations, whether "patented" or not, are in question. On February 20th, an inquest was held in Islington respecting the sudden death of a young man after having taken, in this irregular way, a dose of opium-powder to cause sleep. He had been of intemperate habits, had been accustomed to take bromides on account of the resulting sleeplessness, and had latterly taken to opium-smoking, in the vain endeavour to suppress his ever present source of discomfort. On the present occasion, he recklessly drank off a quantity of water containing powdered opium, and died a few hours later. This case is an extreme, but not an isolated one. Less marked examples of the same sort are common. Thus, one frequently meets with persons who treat themselves with combinations of opium, or with the drug itself, and others not less injurious, for some cough, neuralgia, or the mere liking for narcotic quietude. Self-treatment has even found its unwilling martyrs among the members of our own profession—a fact which, more than any other, ought to teach us that the use of powerful drugs to cure any disorder, and chiefly one so obscure as insomnia, requires at least the previous diagnosis of disease,

and of its bearings, in each case, by a fully qualified and impartial judge, such as no one is in his own affairs.

SCOTLAND.

UNIVERSITY OF ABERDEEN: HONORARY DEGREES.

At its meeting on Saturday last, the Senatus of the University of Aberdeen resolved to confer the degree of LL.D. on the following medical gentlemen: Dr. Robert Lawson, Inspector-General of Hospitals; Dr. Francis Ogston, Emeritus Professor of Medical Jurisprudence in the University of Aberdeen; and Dr. Wm. Walker, Surgeon-General of the North-West Provinces, Oudh, India.

PROFESSOR OGSTON AND THE SOUDAN.

At a meeting of the Senatus Academicus of Aberdeen University, held last week, a letter from Professor Ogston was read, in which he explained the circumstances under which he had left his class before the close of the winter session, and gone to the seat of war in the Soudan. The Senatus agreed to the appointment of Dr. J. Mackenzie Davidson for the purposing of lecturing and conducting the ordinary duties of the class of surgery for the remainder of the present session. The Senatus also requested the medical faculty to recommend a suitable substitute to conduct the examination in surgery for degrees in medicine.

ABERDEEN ROYAL INFIRMARY.

At a quarterly meeting of the managers of Aberdeen Royal Infirmary, held last week, it was stated that Her Majesty the Queen had contributed in all £800 to the institution; and, at the meeting, Her Majesty's Commissioner at Balmoral, Dr. Profeit, was appointed one of the managers, in virtue of the Queen's annual subscription of £25. At the same meeting, the resolution which had been passed at a previous meeting, with regard to a special charge for domestic servants and private servants, was rescinded. A report submitted by the treasurer showed that the expenditure had exceeded the income by £232, which, with the sum written off for deterioration of property, was increased to £415. It was also stated that the expenditure for the year for the Convalescent Hospital exceeded the income by £369. It is proposed to extend the infirmary to the extent of accommodation for 200 beds. The probable cost is estimated at about £15,000.

EDINBURGH SICK CHILDREN'S HOSPITAL AND INFECTIOUS DISEASES.

FOLLOWING closely on the action taken by the managers of the Edinburgh Royal Infirmary, the managers of the Royal Hospital for Sick Children, Edinburgh, have also decided that, on and after July 1st, 1885, they will cease to receive cases of infectious disease for treatment in the wards of the Sick Children's Hospital. The ground taken up by the report of the Committee appointed to inquire into the question is similar to that which recommended itself to the committee of contributors to the Infirmary, only in the case of the Sick Children's Hospital it was shown that the expense connected with the fever-wards was much greater than that of the general wards. It was also brought out that the annual revenue had always been insufficient to meet the annual expenditure; thus, for 1880, the deficiency was £1,247; for 1881, £1,447; 1882, £369; 1883, £801; and 1884, £317; and it had been necessary, in making good these deficiencies, to appropriate legacies, which would otherwise have been capitalised, and employed, as occasion required, in carrying out the improvements of a permanent character which had constantly been found necessary in the hospital. The expense of caring for infectious cases had hitherto relieved ratepayers to a very considerable extent; and it was shown that many ratepayers have contributed nothing to the funds of the institution. At a meeting held recently, it was resolved to intimate to the local authority the decision at which the managers had arrived that, on and after July 1st, no patients labouring under any infectious disease will be received into the hospital.

IRELAND.

KERRY LUNATIC ASYLUM.

At a recent meeting of the governors, Dr. Woods, referring to the proposal to transfer to the workhouses of the various unions to which they belonged harmless patients, said he should not be justified in recommending any for removal, as they would demand their discharges when they got to the workhouses, and could not be refused.

PHARMACEUTICAL SOCIETY OF IRELAND.

WITH a view of forming a School of Pharmacy in connection with this Society, its President, Mr. J. E. Brunner, has issued a circular stating that, as the Council of the Society has no funds available for such a purpose, it has been suggested to carry it into effect by the formation of a limited liability company. It is proposed that the company should have a capital of £1,000, in two hundred £5 shares, and a committee has been appointed to bring the matter under the notice of the pharmacists and apothecaries of Ireland, with a view to enlisting their sympathy with, and support of, the project. There is no doubt that such a school, in which evening instruction would be given at moderate charges in practical chemistry and materia medica, would supply a want much felt; and it is thought that its prestige, as being intimately connected with the Society, would induce a considerable number of students to resort to it.

CORK FEVER HOSPITAL.

A DEPUTATION waited on the Cork Corporation last week from this institution, in support of an application for a grant of £750 for the half-year, being £50 less than the sum allowed six months previously. It appeared that the matter had been before the Finance Committee that morning, and they recommended the payment of £700 for this half-year, and suggested that in future the sum be reduced at the half-yearly rate of £50. It was pointed out, by a member of the Town Council, that patients attacked with fever had been admitted to the Cork Fever Hospital who should have been sent into the Union Fever Hospital. The cost of maintenance in the workhouse being considerably lower, it was thought unfair to the ratepayers to oblige them to pay the extra cost. On the other hand, it was shown that the Fever Hospital had done good service, and it was mentioned that, within the past few months, a bad case of confluent small-pox had been admitted, which, if not taken in, might have been very disastrous. The last small-pox epidemic had cost about £5,000, and this showed the importance of maintaining the institution. It was proposed to grant a sum of £700, which was ultimately done, two amendments suggesting £350 and £600 respectively having been lost. The hospital gained the grant of £700 by a majority of one vote.

WHITTLE-HUTCHINSON FUND.

ON March 5th, at an ordinary meeting of the Liverpool Medical Institution, the President (Dr. Gee) presented Drs. Whittle and Hutchinson with a cheque for a little over £169, the outcome of the fund started in November last to express the sympathy of the profession with these gentlemen in their vexatious action at law in the case of *Goode v. Whittle* and others. Dr. Ewing Whittle, Dr. Glynn Whittle, and Dr. Hutchinson returned thanks, expressing themselves as deeply grateful for the sympathy evinced by the profession, and for the token of that sympathy which they had just received.

Below are the names of subscribers whose subscriptions have not yet been publicly acknowledged.

"A Friend," £10.

Dr. Grimsdale and Dr. Waters (Chester), £3 3s. each.

Dr. Bell-Taylor (Nottingham), Dr. Rogers (Rainhill), and Dr. Waters (Liverpool), £2 2s. each.

Drs. Harvey, Fay, Grimes, Howie, Clarke, J. Bligh, Armstrong, W. Williams, Cullingworth (Manchester), T. R. Pennington, W. H. Hughes (Ashton-under-Lyne), Fawcett (Oldham), Dale, T. W. Pearce (Manchester), D. U. MacLennan (Widnes), Warburton, J. L. Molyneux (Upholland), Latham, J. Matthews (Waterloo), Carruthers (Runcorn), Atkinson (Crew), and Messrs. Manifold, Glazebrook, McCheane (Stone), £1 1s. each.

Drs. Lupton, T. Starkey (Warrington), Eyles Greaves, E. T. Davies, John E. Allen (Todmorden), Messrs. T. D. Leigh, C. G. Lee, T. H. Bickerton, 10s. 6d. each.

Dr. Berry (Wigan), 10s.

Dr. Crutchley (Alsager), and Mr. T. W. Dartnell, 5s. each.

MEDICAL NOTES FROM THE NILE EXPEDITIONARY FORCE.

[FROM OUR OWN CORRESPONDENT.]

Suakin.

THE Royal Victoria Hospital, Suez, which has, during the past year, been under the Admiralty, and used as a Royal Marine hospital for the battalion of that corps stationed at Suakin and Suez, is now to be handed over to the War Office for a military hospital. This building was erected in 1867 by the Indian Government when the overland route was in existence, and prior to the opening of the Suez Canal. Many an Indian invalid, in those days, sought its friendly portal, and recruited his strength for the journey to Alexandria for home. The hospital, which contains accommodation for three hundred patients, is built of wood, on iron supports. Owing to neighbouring marshes and defective surface-drainage, intermittent fever is prevalent, especially in the summer season. The cases received from Suakin during the past summer were chiefly "typhoid" and "remittent" fevers, and, notwithstanding the acute character of these diseases, the death-rate was very small; in some cases, the poor fellows looked like skeletons, with the skin drawn taut over the bones. The climate is now very healthy, and there is no typhoid or remittent at present in hospital. During this summer, as in last, the establishment will be filled with the latter cases, as the occupation of this unsanitary town (Suakin) is a necessity. The hospital, up to this period, has been administered by naval surgeons attached to the Marine Battalion, who now accompany this corps to Suakin for the front. Staff-Surgeon Fleetwood Buckle, R.N., and Surgeons N. C. Ross and Charles W. Hamilton are the medical strength.

The authorities will commit no graver mistake than advancing at once to Berber and Khartoum, as the season is already growing hotter. It will be well if, putting aside the just and eager demand for vengeance for Gordon's sad end, the expedition will not start until the autumn; as, if it do, the climate, with paucity of water and shade, will, in the shape of sunstroke, cause many a poor fellow to lose the number of his mess. Of course, Osman Digna, outside Suakin, must be met and defeated as soon as possible—then the railway commenced.

Suakin is a low-lying town, built on coral-reefs, on the edge of the Red Sea; and, owing to the unsanitary habits of the natives, is thoroughly impregnated with sewage; there is thus, from the heat of the sun and in the rainy season, always a miasma, which causes typhoid and remittent.

The helmets worn by the corps are not suitable for this proposed expedition, as the temples are left exposed; there is a hat, at present worn by the Royal Engineers at Suakin, which, though not so smart-looking as the white helmet, is the one the authorities ought to supply to all hands. It is a thick pith hat with a wide brim, and comes over the nape of the neck and sides of the face, somewhat resembling a Sou'-wester. Spine-pads ought also to be served out generally, and their use made compulsory. In no position are the sun's rays more felt, or is one more exposed to them, than on the back of a camel. I regret to see that "insolatio" is prevalent at present amongst Lord Wolseley's troops.

Officers' and men's classes are daily held for instruction in first-aid-to-wounded, also ambulance-drill, under the superintendence of the surgeons.

COLLECTIVE INVESTIGATION.

LIST OF RETURNS RECEIVED DURING FEBRUARY 1885.

THE Committee desires to acknowledge the following returns received during the month of February.

East Yorkshire Branch: III, E. O. Daly, M.B.
 Lancashire and Cheshire Branch: Chester District: II, S. Walker Foster, M.B.
 Liverpool District: I, William Macvie, M.B.; II, J. E. Garner, M.D.; III, J. E. Garner, M.D.; A. Creswell Rich, M.B. (4); George Shearer, M.D., and a set of M.S. cases from Dr. Shearer; X, A. Creswell Rich, M.B. Manchester District: VII, XIII, Duncan J. Mackenzie, M.D.
 Metropolitan Counties Branch: I, IV (2), IVa, V (2), George Eastes, M.B.; X, G. Parker May, M.D.; F. A. Hill, M.D. (7).
 Midland Counties Branch: Lincoln District: X, Henry George.
 South-Eastern Branch: East Kent District: I, Charles Parsons, M.D. West Kent District: I, Ernest Cusse; II, James Crawford; III, Charles Boyce, M.B.; X, Joseph Brown; George Wilks, M.B. East Surrey District: II (8), III, Holland H. Wright.
 South of Ireland Branch: I, J. W. Martin.
 South Wales Branch: III, T. Neil Whitfield (2).
 Yorkshire Branch: VII, T. Tinley.
Erratum.—In the last list, a return from W. A. Thomson, F.R.C.S., was inserted by mistake in the West Surrey District instead of the South Midland.

MAHOMED MEMORIAL FUND.

THE following additional subscriptions have been received.

	£	s.	d.		£	s.	d.
J. S. Bartrum, Esq., F.R.C.S.	2	0	0	G. M. J. Giles, Esq., F.R.C.S.,			
Dr. Bower	1	1	0	Indian Medical Service	2	0	0
Dr. Oswald Currie	1	1	0	Cooper Keates, Esq.	1	1	0
Dr. Walter Dickson, R.N.	1	1	0	Robert Manser, Esq., I.M.D.	3	3	0
D. Eicum, Esq., Ind. Med. Ser.	5	5	0	Messrs. Nutter per Dr. Argies	2	2	0
J. H. Ewart, Esq.	5	5	0	Dr. Siordet	1	1	0

ARTHUR E. DURHAM, Treasurer.

JAMES F. GOODHART, }
 W. H. A. JACOBSON, } Secretaries.

ASSOCIATION INTELLIGENCE.

NOTICE OF QUARTERLY MEETINGS FOR 1885: ELECTION OF MEMBERS.

Regulations for the Election of Members passed at the Meeting of the Committee of Council, October 12th, 1881.

1. There shall be a standing notice in the JOURNAL every week, of the meetings of the Committee of Council throughout the year; and stating that gentlemen wishing to be elected members of the Association must send in their names *twenty-one days* before the meeting of the Committee of Council at which they wish to be elected.
2. That a list of applicants be in the hands of the Committee of Council *fourteen days* before such meeting of the Committee of Council, and that the Branch-Secretaries be supplied with *several* copies of the list.
3. That no member be elected by a Branch, unless his name has been inserted in the circular summoning the meeting at which he seeks election.

Meetings of the Council will be held on April 8th, July 8th, and October 14th, 1885. Gentlemen desirous of becoming members of the Association must send in their forms of application for election to the General Secretary, not later than *twenty-one days* before each meeting, namely, March 18th, June 17th, and September 24th, 1885, in accordance with the regulation for the election of members, passed at the meeting of the Committee of Council of October 12th, 1881.

FRANCIS FOWKE, *General Secretary.*

COUNCIL.

NOTICE OF MEETING.

A MEETING of the Council will be held in the Council Room, Exeter Hall, Strand, London, on Wednesday, the 8th day of April next, at 2 o'clock in the afternoon.

FRANCIS FOWKE, *General Secretary.*

161A, Strand, March 14th, 1885.

COLLECTIVE INVESTIGATION OF DISEASE.

CARDS for recording individual cases of the following diseases have been prepared by the Committee; they may be had on application to the Honorary Secretaries of the Local Committees in each Branch, or on application to the Secretary of the Collective Investigation Committee.

- | | |
|----------------------------|--|
| I. Acute Pneumonia. | VIII. Paroxysmal hæmoglobinæmia. |
| II. Chorea. | X. Habits of Aged Persons. |
| III. Acute Rheumatism. | XI. Albuminuria in the Apparently Healthy. |
| IV. Diphtheria, clinical. | XII. Sleep-walking. |
| IVa. Diphtheria, saritary. | XIII. Cancer of the Breast. |
| V. Acute Gout. | |
| VII. Puerperal Pyrexia. | |

An inquiry is now issued concerning the general condition, habits, and circumstances, past and present, and the family history of persons who have attained or passed the age of 80 years.

The replies to this inquiry will be most valuable when given by a medical man; but the questions have been so arranged that, with the exception of some on the last page, they may be answered by another person. *Partial information will be gladly received.*

There is also now issued an inquiry as to the occurrence of albuminuria in apparently healthy persons.

The Acute Gout card, which had been found too elaborate, has been made a great deal simpler, and is now re-issued.

Copies of these forms and memoranda are in the hands of all the local secretaries, and will be forwarded to anyone who is willing to fill up one or more of the forms, on application by post-card or otherwise to the Secretary of the Collective Investigation Committee, 161A, Strand, London, W.C., to whom all applications and correspondence should be addressed.

July, 1884.