men's representatives will themselves take care that these subscriptions are charitably expended. It is where the work-ing men's subscriptions form but a small portion of the whole that the tendency shows itself to make the most of it, and on the strength of a small penny subscription to grab for the benefit of themselves—well-to-do artisans—the much larger contributions of the charitable given for the benefit of the poor and needy.—I am, etc.,

January 13th.

M.D.

OBITUARY.

The death is reported of Mr. James Robert Fielding, M.R.C.S., of Alfreton. He went to Alfreton about forty years ago as assistant to the late Dr. Turner, and afterwards went into partnership with the late Dr. Spencer, to whose practice he subsequently succeeded. Mr. Fielding qualified as M.R.C.S.Eng. in 1866, and held the appointment of Surgeon to the Midland Railway Company. He took a keen interest in Freemasonry.

WE regret to have to announce the death of George Wilson TRENERY, M.R.C.S., L.S.A., which occurred on January 12th, 1896. Mr. Trenery was the son of a medical man at Penryn, to whose practice he succeeded, and which he continued for nearly forty years. Mr. Trenery when he died was senior magistrate of the borough.

DR. DANIEL AMBROSE, M.P. for South Louth, died at his residence, Warren House, Upper Tooting, on December 17th, 1895. He had been suffering for several months from heart disease. Dr. Ambrose, who was an M.D. of Queen's University, Ireland, was 52 years of age.

Dr. Henry Harris, of Redruth, one of the oldest medical practitioners in Cornwall, died on December 21st, 1895. For some time Dr. Harris had been unable to leave his room through illness. The deceased qualified as M.R.C.S.Eng. and L.S.A. in 1833, and became F.R.C.S.Eng. in 1870. He took the degree of M.D.St.And. in 1871. Dr. Harris was about 86 years of age.

Dr. José Luiz d'Almeida Couto, of Bahia, who recently died at the age of 62, was prominent both as a physician and as a politician. He studied medicine in the Bahia Faculty, as a politician. He studied medicine in the Bahia Faculty, where he took his doctor's degree in 1857. In 1883 he was appointed Professor of Clinical Medicine, and he proved himself an excellent teacher. He was the author of *Liçoes de Clinica e Therapeutica*, and of papers on the pathogeny of chyluria, the use of sulphate of quinine during pregnancy, etc. He was one of the Presidents of the Third Brazilian Congress of Medicine and Surgery, which was held at Bahia in 1890. He was a member of the provincial and general legislatures, and, when Dom Pedro was still on the throne, he was appointed Governor of the Province of S. Paulo, and afterwards on two occasions of that of Bahia. his death he was the President of the Municipal Council of the City of Bahia.

Dr. José Soriano de Souza, of Recife, the capital of Pernambuco, who died not long ago at the age of 62, was a distinguished member of the medical profession, and a writer of versatile accomplishments. He took his degree at the University of Rio de Janeiro in 1860. In 1862 he published his first work, a medico-legal essay on wounds, etc., and on infanticide. In 1865 he founded and edited a journal entitled Esperança, and in 1872 he started another called A Uniao. He was also the author of numerous works on philosophical, religious, and political subjects. He finally turned his attention to jurisprudence, and wrote on Roman and constitutional law. He was appointed Professor of Constitutional Law in the University of Recife. From 1886 to 1889 he was a member of the Chamber of Deputies, and afterwards he was elected a member of the Pernambucan Senate, of which he was President at the time of his death.

DEATHS IN THE PROFESSION ABROAD.—Among the members of the medical profession in foreign countries who have recently died are Dr. P. M. Dechaux, of Montluçon, Knight of the Legion of Honour, and author of numerous contribu-tions to scientific literature, aged 80; and Dr. Leopold Poesch, Chief Physician to the District Lunatic Asylum of Ybbs, Lower Austria.

NAVAL AND MILITARY MEDICAL SERVICES.

THE MEDICAL ARRANGEMENTS OF THE JAPANESE ARMY.

THROUGH the courtesy of the Director-General of the Army Medical Department we have been favoured with a copy of the admirable report, by Surgeon-Colonel W. Taylor, M.D., Medical Staff, On the Medico-Military Arrangements of the Japanese Army in the Field, 1894-95, printed at the War Office, 1895 (fcap. folio, pp. 66). The author was attached to the headquarters of the Japanese army in the field, and deputed to report, under no fewer than nineteen separate heads, on the medical arrangements. These were: organisation of military hospitals in the field, medical organisation of corps, sanitary and hygienic arrangements, first aid to wounded, transport, nature of wounds from modern weapons, treatment of wounds, particular diseases, Red Cross organisation. On all of these points the report is more or less full, except on

all of these points the report is more of less full, except on the wounds produced by modern weapons, which there was no opportunity of observing, as the Chinese mostly used old weapons, and even bows and arrows.

Through the courtesy of Marshal Count Oyama, Surgeon-Colonel Taylor was supplied with a copy of the Japanese medical regulations, which were kindly translated by Mr. Ariga, adviser on international law with the Marshal's head-courted the first that the forther weapons, which into the international states in the content of the cont quarters. For the first time, therefore, we obtain an insight into that branch of the Japanese military organisation, and wonderful it is; so surprising, indeed, that it has been well cha-

racterised as an "absolute revelation."

The regulations seem compounded from German, French, and British sources, with new and original touches to meet specific national peculiarities. Of course some of the regulations were found to be impracticable, as no doubt some of our own will be when put to a practical test; but at the same time, in a broad sense, they worked in an "easy, smooth, and efficient way;" the moral of all being—and we trust our War Office will note it—that not only must regulations be worked out with the utmost forethought and detail, but "every opportunity of testing organisation and equipment" must be taken, and "officers and men must have constant opportunities of practising in time of peace what they are expected to do in time of war."

The Japanese army medical service possesses a large measure of autonomy, and seems little hampered or thwarted by unnecessary outside authority. Its medical officers apparently have compound titles like our own. The basis of the field medical and surgical equipment is the pannier, which is well filled with modern medicines and antiseptics; the latter were freely used, and there were no cases of septicæmia. Field transport for the wounded was almost entirely stretchers and other contrivances borne by hand. The basis of the field ration was rice, together with issues of chicken, beef, pork, and fish, and dried vegetables and fruit, with biscuits; the commissariat was of course much simpler than that of a European force.

Surgeon-Colonel Taylor pays a well-deserved tribute to the devotion, or rather actual heroism, of both officers and men of the medical service on the field of battle. At Wai-hei-Wai, for instance, a regiment advancing over a flat sandy beach was terribly cut up by the fire of the Chinese ships, yet all the wounded were gallantly rescued in twenty minutes "in the face of an incessant hail of bullets which ploughed up the sand in every direction." Not much difference here between combatants and non-combatants! The field efficiency of the bearer companies and regimental bearers seems to have left little to be desired.

The one blot on the system is, "there are no regulations with a view to insuring satisfactory sanitary conditions"; even the most ordinary precautions connected with cor-