

Council to have been guilty of infamous conduct in a professional respect, and his or her name shall be erased from the Register, and registrable qualification taken from him or her." "Seeing that the Midwives Registration Bill would, if it became law, create an independent order of midwifery practitioners, this meeting, while anxious that the training of monthly nurses should be improved, records its emphatic protest against such proposed legislation, and determines to form a committee to watch the progress of and oppose any legislation such as that hitherto proposed for the registration of midwives." It was further resolved that copies of the resolutions should be forwarded to the President of the General Medical Council and to the five direct representatives.

PUBLIC HEALTH AND POOR-LAW MEDICAL SERVICES.

ENGLISH URBAN MORTALITY IN 1896.

In the accompanying table will be found summarised the vital statistics of 1896 relating to the thirty-three large English towns dealt with by the Registrar-General in his weekly returns.

The 339,115 births registered during 1896 in these thirty-three large towns were equal to a rate of 30.7 per 1,000 of their aggregate population, estimated at nearly eleven millions of persons. This rate showed a decline of 0.7 per 1,000 from that recorded in 1895, and was 1.6 per 1,000 below the mean rate in the ten preceding years, 1886-95. In London the birth-rate last year was equal to 30.2 per 1,000, while it averaged 31.1 in the thirty-two provincial towns, among which it ranged from 20.5 in Huddersfield, 24.3 in Halifax, 24.7 in Brighton, and 25.1 in Croydon, 34.2 in Sunderland, to 34.4 in Wolverhampton, 34.9 in Liverpool and in Salford, and 35.8 in Gateshead.

The 208,534 deaths registered last year in the thirty-three towns were equal to a rate of 18.9 per 1,000; this rate showed a decline of 1.8 per 1,000 from the rate recorded in 1895, and with one exception was below the rate in any of the ten preceding years, during which it averaged 20.9 per 1,000. The death-rate in London during 1896 was equal to 18.6 per 1,000, while it averaged 19.1 in the thirty-two provincial towns, among which it ranged from 14.2 in Croydon, 15.7 in Derby, 16.1 in West Ham and in Brighton, and 16.5 in Huddersfield and in Bradford to 20.7 in Bolton, 20.8 in Birmingham and in Preston, 22.6 in Manchester and in Salford, and 22.7 in Liverpool.

During the year under notice 31,550 deaths were referred to the principal zymotic diseases in the thirty-three towns, equal to a rate of 2.86

per 1,000, which slightly exceeded the mean rate in the ten preceding years, 1886-95. The zymotic death-rates in these towns last year ranged from 1.10 in Halifax, 1.18 in Swansea, 1.58 in Bradford, and 1.60 in Huddersfield, to 3.14 in London, 3.32 in Hull, 3.42 in Manchester, 3.57 in Birmingham, and 4.10 in Salford. The 31,550 deaths referred to the principal zymotic diseases included 8,760 which resulted from diarrhoea, 7,839 from measles, 6,245 from whooping-cough, 4,202 from diphtheria, 2,406 from scarlet fever, 2,073 from "fever" (principally enteric), and 25 from small-pox. The death-rate from diarrhoea was equal to 0.79 per 1,000, and was slightly above the mean rate in the ten preceding years, 1886-95; in London the rate of mortality was equal to 0.72 per 1,000, while it averaged 0.85 in the thirty-two provincial towns, among which the highest rates were recorded in Wolverhampton, Birmingham, Leicester, Liverpool, Salford, and Preston. The rate of mortality from measles was equal to 0.71 per 1,000, and exceeded the mean rate in the ten preceding years; in London the death-rate from this disease was equal to 0.82 per 1,000, while it averaged 0.63 in the thirty-two provincial towns, and was highest in Plymouth, Norwich, Birkenhead, Manchester, Oldham, Hull, and Gateshead. The death-rate from whooping-cough was equal to 0.57 per 1,000, against 0.48 and 0.37 in the two preceding years; in London the death-rate from this disease was equal to 0.65 per 1,000, while it averaged 0.51 in the thirty-two provincial towns, among which the highest rates were recorded in West Ham, Cardiff, Birmingham, Bolton, Manchester, Salford, and Leeds. The rate of mortality from diphtheria was equal to 0.38 per 1,000, against 0.43, 0.48, and 0.35 in the three preceding years; in London the death-rate from this disease was as high as 0.66 per 1,000, while it averaged 0.23 in the thirty-two provincial towns, among which the highest proportional fatality from diphtheria was recorded in West Ham, Cardiff, Wolverhampton, Birmingham, and Burnley. The death-rate from scarlet fever was equal to 0.22 per 1,000, which, although it was below the mean rate in the ten years, 1886-95, exceeded the rate recorded in either of the two preceding years. In London the rate of mortality from scarlet fever was 0.21 per 1,000, while it averaged 0.22 in the thirty-two provincial towns, among which this disease was proportionately most fatal in Liverpool, Bolton, Manchester, Salford, and Oldham. The rate of mortality from differing forms of "fever" (including typhus, enteric fever, and simple and ill-defined forms of fever) which had been 0.19 and 0.20 per 1,000 in the two preceding years declined again to 0.19 during the year under notice, and was below the mean rate in the ten preceding years; in London the "fever" death-rate did not exceed 0.14 per 1,000, while it averaged 0.22 in the thirty-two provincial towns, and showed the highest proportional fatality in Wolverhampton, Nottingham, Bolton, Salford, and Sunderland. During the year under notice 25 fatal cases of small-pox were registered in the thirty-three towns; of these, 9 occurred in London, 5 in Bristol, 4 in West Ham, 2 in Swansea, 1 in Bradford, and 1 in Leeds.

Infant mortality, measured by the proportion of deaths under one

Analysis of the Vital and Mortal Statistics of Thirty-three of the Largest English Towns during the Year 1896.

| Towns. | Estimated Population middle of 1896. | Births. | Deaths. | Annual Rate per 1,000 Living. | | | Deaths from Principal Zymotic Diseases. | Small-pox. | Measles. | Scarlet Fever. | Diphtheria. | Whooping Cough. | Fever. | Diarrhoea. | Deaths of Children under one year of age to 1,000 Births. | Rate per cent. of Uncertified Deaths. | |
|---------------------|--------------------------------------|---------|---------|-------------------------------|---------|-----------------------------|---|------------|----------|----------------|-------------|-----------------|--------|------------|---|---------------------------------------|-----|
| | | | | Births. | Deaths. | Principal Zymotic Diseases. | | | | | | | | | | | |
| 33 Towns | 10,846,971 | 339,115 | 208,534 | 30.7 | 18.9 | 2.86 | 31,550 | 25 | 7,839 | 2,406 | 4,202 | 6,245 | 2,073 | 8,760 | 167 | 1.5 | |
| 32 Provincial Towns | 6,425,016 | 203,319 | 125,023 | 31.1 | 19.1 | 2.67 | 17,450 | 16 | 4,142 | 1,464 | 1,519 | 3,308 | 1,464 | 5,537 | 172 | 2.1 | |
| London | 4,421,955 | 135,796 | 83,511 | 30.2 | 18.6 | 3.14 | 14,100 | 9 | 3,697 | 942 | 2,683 | 2,937 | 609 | 3,223 | 161 | 0.6 | |
| West Ham | 261,297 | 8,658 | 4,268 | 32.6 | 16.1 | 3.00 | 797 | 4 | 117 | 55 | 187 | 158 | 61 | 215 | 105 | 3.7 | |
| Croydon | 118,006 | 3,009 | 1,706 | 25.1 | 14.2 | 1.94 | 233 | — | 67 | 5 | 29 | 62 | 18 | 52 | 150 | — | |
| Brighton | 120,499 | 3,022 | 1,975 | 24.7 | 16.1 | 1.63 | 199 | — | 55 | 6 | 19 | 32 | 14 | 73 | 135 | 1.7 | |
| Portsmouth | 178,639 | 5,006 | 3,009 | 27.6 | 16.6 | 2.11 | 383 | — | 125 | 20 | 20 | 59 | 27 | 132 | 154 | 0.7 | |
| Plymouth | 90,276 | 2,643 | 1,796 | 28.8 | 19.6 | 2.30 | 210 | — | 95 | 3 | 13 | 17 | 6 | 76 | 178 | 0.5 | |
| Bristol | 230,623 | 6,465 | 3,961 | 27.6 | 16.9 | 1.90 | 444 | 5 | 143 | 59 | 37 | 61 | 18 | 121 | 142 | 1.2 | |
| Cardiff | 162,600 | 5,591 | 2,784 | 33.8 | 16.8 | 2.27 | 376 | 3 | 38 | 28 | 62 | 105 | 13 | 127 | 105 | 1.3 | |
| Salford | 98,645 | 3,061 | 1,689 | 30.5 | 16.8 | 1.18 | 118 | 2 | 6 | 4 | 10 | 56 | 15 | 25 | 161 | 1.1 | |
| Swansea | 86,530 | 3,023 | 1,755 | 34.4 | 20.0 | 3.11 | 274 | — | 9 | 21 | 53 | 31 | 36 | 124 | 184 | 1.3 | |
| Wolverhampton | 501,241 | 16,603 | 10,600 | 32.6 | 20.8 | 3.57 | 1,823 | — | 307 | 148 | 270 | 378 | 107 | 613 | 197 | 5.0 | |
| Birmingham | 108,630 | 3,400 | 1,919 | 30.8 | 17.4 | 2.33 | 257 | — | 117 | 4 | 24 | 9 | 21 | 82 | 164 | 1.6 | |
| Norwich | 198,659 | 6,212 | 3,376 | 30.8 | 16.7 | 2.97 | 599 | — | 121 | 50 | 64 | 51 | 40 | 273 | 187 | 2.7 | |
| Leicester | 229,775 | 6,758 | 4,087 | 28.9 | 17.5 | 2.47 | 575 | — | 205 | 26 | 13 | 90 | 79 | 102 | 168 | 1.4 | |
| Nottingham | 101,770 | 2,901 | 1,619 | 28.0 | 15.7 | 1.91 | 197 | — | 34 | 11 | 10 | 54 | 21 | 67 | 151 | 0.4 | |
| Derby | 109,343 | 2,133 | 1,133 | 31.7 | 19.2 | 2.97 | 330 | — | 115 | 32 | 22 | 59 | 26 | 76 | 177 | 1.0 | |
| Birkenhead | 632,512 | 22,416 | 14,617 | 34.9 | 22.7 | 3.01 | 1,938 | — | 306 | 227 | 157 | 294 | 206 | 748 | 173 | 3.4 | |
| Liverpool | 120,380 | 3,831 | 2,536 | 31.3 | 20.7 | 2.80 | 344 | — | 6 | 40 | 14 | 102 | 48 | 134 | 168 | 0.3 | |
| Bolton | 529,561 | 17,787 | 12,184 | 33.0 | 22.6 | 3.42 | 1,834 | — | 570 | 197 | 81 | 360 | 122 | 504 | 176 | 1.3 | |
| Manchester | 210,707 | 7,480 | 4,848 | 34.9 | 22.6 | 4.10 | 879 | — | 202 | 104 | 49 | 189 | 71 | 264 | 199 | 2.1 | |
| Salford | 143,442 | 3,971 | 2,955 | 27.2 | 20.3 | 2.91 | 425 | — | 197 | 56 | 35 | 53 | 23 | 91 | 184 | 0.3 | |
| Oldham | 102,805 | 3,245 | 1,830 | 31.0 | 17.5 | 2.19 | 229 | — | 63 | 4 | 8 | 28 | 13 | 73 | 170 | 1.4 | |
| Burnley | 129,459 | 3,649 | 2,351 | 27.7 | 17.9 | 1.82 | 238 | — | 41 | 9 | 10 | 47 | 34 | 97 | 171 | 2.7 | |
| Blackburn | 113,864 | 3,776 | 2,403 | 32.6 | 20.8 | 1.86 | 217 | — | 4 | 3 | 12 | 43 | 26 | 129 | 203 | 4.3 | |
| Preston | 100,463 | 2,096 | 1,682 | 20.5 | 16.5 | 1.60 | 163 | — | 28 | 19 | 21 | 55 | 13 | 27 | 166 | 2.5 | |
| Huddersfield | 94,775 | 2,337 | 1,669 | 24.3 | 17.3 | 1.10 | 105 | — | 16 | — | — | 21 | 33 | 20 | 15 | 149 | 1.7 |
| Halifax | 228,809 | 5,939 | 3,840 | 25.5 | 16.5 | 1.58 | 369 | 1 | 107 | 24 | 17 | 104 | 28 | 88 | 143 | 0.8 | |
| Bradford | 402,449 | 12,574 | 7,670 | 30.7 | 18.8 | 2.28 | 937 | 1 | 199 | 71 | 49 | 246 | 87 | 284 | 169 | 0.6 | |
| Leeds | 347,298 | 12,011 | 6,797 | 34.0 | 19.3 | 2.31 | 1,024 | — | 200 | 102 | 56 | 205 | 101 | 360 | 173 | 3.5 | |
| Sheffield | 220,844 | 7,171 | 4,245 | 31.9 | 18.9 | 3.92 | 745 | — | 260 | 57 | 51 | 113 | 62 | 202 | 173 | 2.8 | |
| Hull | 140,386 | 4,873 | 2,828 | 34.2 | 19.8 | 3.00 | 428 | — | 143 | 27 | 8 | 76 | 53 | 121 | 158 | 0.9 | |
| Sunderland | 98,436 | 3,583 | 1,910 | 35.8 | 19.1 | 3.10 | 310 | — | 137 | 26 | 18 | 35 | 22 | 72 | 172 | 0.9 | |
| Gateshead | 212,223 | 6,701 | 3,981 | 31.1 | 18.5 | 2.08 | 450 | — | 139 | 26 | 39 | 103 | 33 | 110 | 165 | 0.5 | |
| Newcastle-on-Tyne | | | | | | | | | | | | | | | | | |

year of age to births registered, was equal to 167 per 1,000, and corresponded with the mean rate in the ten preceding years. In London the rate of infant mortality was equal to 161 per 1,000, while it averaged 172 in the thirty-two provincial towns, among which it ranged from 135 in Brighton, 142 in Bristol, 143 in Bradford, and 149 in Halifax to 184 in Wolverhampton and in Oldham, 187 in Leicester, 197 in Birmingham, 199 in Salford, and 203 in Preston.

The causes of 3,147, or 1.5 per cent. of the 208,534 deaths in the thirty-three towns during 1896 were not certified, either by a registered medical practitioner or by a coroner. All the causes of death were duly certified in Croydon; in the other towns the lowest proportion of uncertified deaths were registered in Plymouth, Derby, Bolton, Oldham, and Newcastle-upon-Tyne, and the highest in West Ham, Birmingham, Liverpool, Preston, and Sheffield.

HEALTH OF ENGLISH TOWNS.

IN thirty-three of the largest English towns, including London, 6,715 births and 3,970 deaths were registered during the week ending Saturday last, February 20th. The annual rate of mortality in these towns, which had been 20.8 and 19.6 per 1,000 in the two preceding weeks, further declined to 18.8 last week. The rates in the several towns ranged from 13.7 in West Ham, 14.2 in Brighton, 14.9 in Huddersfield, and 15.1 in Portsmouth to 23.2 in Salford, 23.8 in Liverpool, 25.1 in Burnley, and 25.8 in Preston. In the thirty-two provincial towns the mean death-rate was 19.5 per 1,000, and exceeded by 1.7 the rate recorded in London, which was 17.8 per 1,000. The zymotic death-rate in the thirty-three towns averaged 1.5 per 1,000; in London the rate was equal to 1.4, while it averaged 1.5 per 1,000 in the thirty-two provincial towns, and was highest in Gateshead, Plymouth, Bolton, and Salford. Measles caused a death-rate of 1.0 in Salford and in Gateshead, 1.8 in Bradford, 3.0 in Bolton, and 3.2 in Plymouth; and whooping-cough of 1.1 in Bristol, 1.2 in Blackburn, and 1.5 in Burnley. The mortality from scarlet fever and from "fever" showed no marked excess in any of the large towns. The 59 deaths from diphtheria in the thirty-three towns included 40 in London, 2 in West Ham, 2 in Cardiff, and 2 in Birmingham. One fatal case of small-pox was registered in London, but not one in any of the thirty-two large provincial towns. There were 34 cases of small-pox under treatment in the Metropolitan Asylums Hospitals and in the Highgate Small-pox Hospital on Saturday last, February 20th, against 9, 21, and 38 at the end of the three preceding weeks; 3 new cases were admitted during the week, against 7, 12, and 20 in the three preceding weeks. The number of scarlet fever patients in the Metropolitan Asylums Hospitals and in the London Fever Hospital, which had been 3,311, 3,153, and 3,050 at the end of the three preceding weeks, had further declined to 2,901 on Saturday last; 227 new cases were admitted during the week, against 254, 245, and 226 in the three preceding weeks.

HEALTH OF SCOTCH TOWNS.

DURING the week ending Saturday last, February 20th, 963 births and 761 deaths were registered in eight of the principal Scotch towns. The annual rate of mortality in these towns, which had increased from 24.3 to 28.8 per 1,000 in the three preceding weeks, declined to 25.5 last week, but exceeded by 6.7 per 1,000 the mean rate during the same period in the thirty-three large English towns. Among these Scotch towns the death-rate ranged from 19.9 in Edinburgh to 30.7 in Perth. The zymotic death-rate in these towns averaged 4.0 per 1,000, the highest rates being recorded in Glasgow and Perth. The 404 deaths registered in Glasgow included 38 from measles, 33 from whooping-cough, 10 from diarrhoea, 3 from "fever," and 2 from measles. Three fatal cases of whooping-cough were recorded in Perth, and 8 in Edinburgh.

IRISH POOR-LAW SUBSTITUTES.

As a rule, Irish doctors stick to each other through thick and thin where the public services are concerned, but we regret to find that a certain medical member of the Belfast Board of Guardians has gone out of his way to reduce the remuneration of a brother practitioner. Owing to the illness of the medical officer of one of the Belfast dispensaries, another gentleman was appointed by the Dispensary Committee to the temporary duty at the not very exorbitant remuneration of £3 a week. When the minutes of this Dispensary Committee meeting came before the Board of Guardians, it was, according to the report of the Belfast *Evening Telegraph*, a medical man who proposed and carried a resolution to reduce it to £2 10s. a week. Further comment upon such conduct is unnecessary, but we would point out for the information of the parties concerned that if a Dispensary Committee enters into a contract with a medical practitioner to do Poor-law duty for a certain sum, he can refuse to take less; and if he brings an action he will get a decree for the full amount and costs. This question has been decided over and over again against Boards of Guardians, and we trust will be once more so decided in this case.

DIPHTHERIA IN LONDON.

THERE was a slight increase in the mortality from diphtheria in London last week. The fatal cases of this disease, which had been 53, 46, and 37 in the three preceding weeks, rose again to 40 during the week ending Saturday last, February 20th, and were 5 above the corrected average number in the corresponding weeks of the ten preceding years. Of these 40 fatal cases, 6 were of persons belonging to Camberwell, 4 to Lambeth, 4 to Greenwich, and 3 to Hackney. The number of notifications of diphtheria in London, which had been 246, 219, and 220 in the three preceding weeks, rose again to 251 during the week ending Saturday last. Compared with the numbers in the preceding week, there was an increase in the number of new cases notified in each of the five groups of sanitary areas, but the increase was most marked in South London. Among the sanitary areas of West London the prevalence of diphtheria was most marked in Chelsea, where 10 new cases were notified. In North London there was a marked increase in the prevalence of the disease in Marylebone, where 7 new cases were notified, against 1 in each of the two preceding weeks. Among the sanitary areas of East London there was a considerable increase in the number of cases notified in Mile End Old Town and Poplar. In South London the prevalence of diphtheria showed a marked

increase in St. Saviour Southwark, Wandsworth, Lewisham, and Woolwich sanitary areas. In Camberwell 31 new cases were notified, corresponding with the number in the preceding week. The admissions of diphtheria patients into the Metropolitan Asylums Hospitals during last week were 104, against 95 and 104 in the two preceding weeks; and 853 patients remained under treatment in these hospitals on Saturday last, February 20th.

SUPERANNUATION OF POOR-LAW OFFICERS.

THE Yorkshire Poor-law Conference, held recently at Leeds, at the invitation of the Leeds Board of Guardians, appointed a committee to consider the amendments of the Poor-law Officers' Superannuation Act deemed to be necessary. This committee met on February 19th at Leeds, and appointed Mr. Bacon Franks its chairman, Alderman Wragge of York, vice-chairman, and Mr. Alfred Hobson of Leeds, honorary secretary. Mr. Hobson will proceed to obtain information in the matter, and the result of his inquiries will be submitted to the next meeting of the committee.

POOR-LAW MEDICAL OFFICERS AND NURSES.

WE see by the *Bromsgrove Messenger* that at a recent meeting of the Droitwich Board of Guardians it was seriously proposed to make such an alteration as would enable the guardians to save expense by appointing more nurses and fewer doctors, the proposer stating that such a change would be a great boon, as the extra fees paid to doctors were very high. A second guardian expressed the fear that the appointment of additional nurses would in the end be more expensive than at present. Not one of the speakers on this subject appeared to think of his duty to the sick poor as one of their legally-appointed guardians. Expense was the only subject really under consideration; efficient medical care and treatment appear to have been altogether forgotten or overlooked. The Droitwich guardians would doubtless be prepared to appoint an increased number of medical officers if their services could be procured gratuitously. We should, however, recommend them carefully to study the law in reference to Poor-law medical district appointments, and, if they do so, we question whether they will then think it advisable to devote any further time to the consideration of this proposal.

OPHTHALMIA AT ELY SCHOOLS.

THE result of the official inquiry into this outbreak resolves itself into a question of cheeseparing; the school is understaffed, the mistress and a housemaid having charge of 53 infants, the oversight of bathing, washing, and dressing. The medical officer is not in a position to give his undivided attention to the schools, so, though he gives instructions for the treatment and isolation of the affected children, he cannot see to the carrying out of them. There does not appear to be a fully-qualified nurse on the permanent staff of the schools.

PAUPERS AND FEVER HOSPITALS.

FROM a report, in the *Daily Mail*, of an inquest held on February 12th, at the Vestry Hall, St. George-in-the-East, we gather that a child was taken to the London Hospital, where she was found to be suffering from diphtheria. The Asylums Board ambulance was sent for, and the child was removed, not to the fever hospital, but back to his own home, the nurse saying that a conveyance would be sent later to take it to the hospital. The child, however, died.

Under these circumstances the coroner found fault with the Asylums Board, which was an enormous expense to the ratepayers, and, as a rule, attended to the cases by allowing the children to be quietly taken home again, and their only explanation was that they had no room.

As we have pointed out before, this is not quite fair to the Asylums Board. There is a complete organisation, through the district medical officers of health, for the notification to the Central Board of all cases requiring removal, and a responsible officer is engaged to weigh the evidence as to urgency, a very serious and anxious duty, so that when the applications exceed the available beds the most urgent cases shall be taken in.

A practice, however, grew up of looking upon cases which were reported from among the out-patients of the general hospitals as especially urgent, and a certain priority was given to them. Now the East End public were not slow to see the benefit of this arrangement, and they soon got into the way of taking scarlet fever and diphtheria cases to the out-patient departments of the great hospitals—notably, of the London Hospital—and leaving the authorities to get out of the difficulty as best they could. So long as the Asylums Board would accept the cases there was no difficulty, but it soon became obvious that this proceeding entirely nullified all attempts to select the most proper cases for admission. The Asylums Board then, instead of removing such cases to the hospitals, took them home again. Which is the explanation of all the trouble.

The Coroner seems to have had an inkling of the true state of affairs, for he suggested that they ought to have gone to the relieving officer. We believe that this is a point that has not yet been raised, or at any rate seriously discussed. But there can be very little doubt that paupers have a first claim on the hospital accommodation at the disposal of the Asylums Board. Primarily this Board was a co-operative arrangement, among the several unions of the metropolis. Non-paupers were let in afterwards, but the guardians have not lost their right to use the hospitals for their paupers in the first instance. We believe that if tested it will turn out that an order from a relieving officer will in law take precedence of one from the sanitary authority.

NOTIFICATION FEES.

M. D., having occasion to notify three cases of fever in the persons of inmates of one household, certified all three on one form of certificate under the Notification Act of 1889. He has been paid only the sum of half a crown, on the ground that the local authority have received but one certificate, and he asks if he is not entitled to be paid as for three certificates sent in the "spirit of the Act."

. There would seem to be no doubt as to the "spirit" of the Act, having been complied with, and the withholding of the additional 5s. is

a quibble. But the strict letter of the statute seems to grant only a single fee in respect of "each certificate" (Sec. iv (2)); and Sec. ii (b) implies that "a certificate" shall be sent for "the patient," that is, for each separate case. It were well, therefore, that medical practitioners should leave no ground for question by any departure from the strict letter of the law.

DISPOSAL OF INLAND SEWAGE.

DR. T. H. REDWOOD (Rhymney) writes: Having lately seen several chemical, and partly chemical, processes for the treatment of sewage in operation, I can recommend what is known as the "oxygen" to "M.O.H.," who can get all information on it from Mr. Thomas Shegog, 23, Ombersley Road, West Park, Newport, Mon., County Council Lecturer in Chemistry.

OBITUARY.

WE regret to hear of the death of Surgeon-Lieutenant JOHN D. M'MILLAN, I.M.S. He was educated at Kinross and at George Watson's College, Edinburgh, and afterwards proceeded to Edinburgh University, where he attended the arts classes for two years. Subsequently he passed through the medical curriculum there with much success, and received the degree of M.B., C.M., in August, 1893. He passed the examination for the Indian Medical Service in 1894, and on arrival in India in March, 1895, was attached to the 15th Bengal Lancers. He was serving with this regiment at Loralai in Baluchistan, when he died on February 5th in his 27th year.

THE tidings of the unexpected death of Mr. ENOCH DAVIES, L.R.C.S., L.R.C.P.Ed., of Bryn-Teifi, Llandyssil, at the age of 52, were received throughout Wales with sincere sorrow. Mr. Davies had been suffering from an affection of the kidneys for some time, and in November last he consulted Sir William Roberts and Mr. Reginald Harrison. He was advised to undergo an operation, which was performed; but the shock proved to be too great, and he sank on the third morning. Mr. Davies was educated at the Carmarthen Grammar School and Frome, and studied medicine in the University of Glasgow and at University College, London. When he became qualified he joined his brother, Dr. John Davies, of Maesteg, as Assistant Surgeon to the Llynvi Iron and Coal Company's workmen, and soon afterwards he was appointed Surgeon to the Great Western Railway Collieries, Glyncoerwg, and others. Mr. Davies was an able, careful, and conscientious worker, and a shrewd clinical observer, and had acquired a reputation as a successful lithotomist. Ten years ago he resigned all his appointments and went to live at Bryn-Teifi. Here he devoted the whole of his time to political and social questions; he was a Poor-law guardian, Chairman of the District Council, and a member of the Cardigan County Council.

WE regret to have to record the death, on January 26th, at this residence at Bristol, of Mr. WILLIAM CASSEL PRATT, at the age of 65. Mr. Pratt was the fifth of the nine sons of the late Dr. C. E. Pratt, of Kennington Oval. All nine brothers studied for the medical profession, and seven lived to enter on medical practice. Mr. W. C. Pratt received his medical education at Middlesex Hospital, and obtained the diploma of M.R.C.S.Eng. in 1855. In 1866 he became L.S.A., and in 1876 L.R.C.P.Lond. For over thirty years he was engaged in extensive practice in Newport, Monmouthshire, where he held the post of Medical Inspector of Seamen to the Board of Trade, and of Deputy Medical Officer of Health for the Port. Five years ago he retired from practice and settled at Clifton, where his genial disposition quickly gained him a large circle of friends. While in practice he gave himself up to the claims of his profession with simple and boylike enthusiasm, spending all his energies in work, and earning the gratitude of all without thought of reward. He was mercifully spared a lingering illness; the cause of death was adynamic pneumonia and cardiac failure.

DR. EDWIN KLEBS, the well-known German pathologist who has been appointed Professor in the Rush Medical College, Chicago, will also occupy a position in the post-graduate medical school of the University of Chicago.

MEDICAL NEWS.

A DISCUSSION on Indian sanitation will be opened at a meeting of the Sanitary Institute on Wednesday, March 10th, by Mr. Baldwin Latham, M.Inst.C.E. The chair will be taken at 8 P.M. by Sir W. Guyer Hunter.

FRENCH CONGRESS OF ALIENISTS AND NEUROLOGISTS.—The eighth French Congress of Alienists and Neurologists will be held this year at Toulouse on August 2nd and following days. The questions proposed for discussion are: 1. The diagnosis of general paralysis. 2. Infantile hysteria. 3. The organisation of the medical service in lunatic asylums.

SMALL-POX IN LONDON.—It is satisfactory to note that the prevalence of small-pox in London, which had recently showed a rapid increase, showed a marked decline last week. The notifications of this disease in the metropolis, which had been 4, 8, and 23 in the three preceding weeks, fell to 3 last week.

EXECUTION BY GAS.—A special committee of the Allegheny Medical Society has reported in favour of the abolition of hanging and the substitution of gas as the means of carrying out the last penalty of the law, and recommending the presentation of a Bill to that effect to the Pennsylvania State Legislature.

THE President of the Board of Trade has appointed a Committee to inquire into the ventilation of the tunnels of the Metropolitan Railway, with the view of remedying the present defects. He has been fortunate enough to secure the services on this Committee of Sir Douglas Galton, F.R.S., and of Dr. J. S. Haldane, who has made so many important contributions to an exact knowledge of the problems of ventilation, and of the effects of various noxious gases on life. The other members of the Committee are Major Marindin (who will act as chairman), Earl Russell, and Sir Charles Scotter.

OUT-PATIENT INQUIRY.—At the annual Court of the Governors of the Royal Free Hospital, the Chairman, Mr. Justice Bruce, in moving the adoption of the report, said that every effort was made to prevent the abuse of the out-patient department. The almoner's report, he added, showed that over 70 per cent. of the applicants were fit persons for free relief, while the remaining 30 per cent. were so poor that they probably needed food rather than medicine, and were fit subjects for Poor-law relief. Out of 2,475 persons interviewed by the almoner, only 7 had been refused further treatment as being able to pay for medical relief.

INFANTS' AND MIDWIVES' CORDIALS.—The evidence given at an inquest held at Broughton on the body of a child, as reported in the *Reporter*, led the coroner to express a very strong condemnation of the practice of dosing infants. He considered it to be both unwise and illegal for midwives to administer medicines, and that it is their duty to call in the services of a medical man whenever medicine appears to be required. In the particular case now referred to there was no proof of the presence of any narcotic in the cordial, and it was stated by the midwife who made it to be free from morphine or laudanum, though these are too frequently the chief ingredients of the "cordials" administered to infants for the purpose of keeping them quiet, and not infrequently with fatal consequences. As a most mischievous form of domestic medical practice this system of dosing children cannot be too severely censured. It is particularly disquieting to find a midwife treating infants with a cordial manufactured by herself. It is a form of unqualified practice which must be strongly condemned.

MONKWEARMOUTH AND SOUTHWICK HOSPITAL.—On February 16th a new wing of the Monkwearmouth and Southwick Hospital was formally opened by Lady Elizabeth Williamson in presence of a large gathering, which included Sir Hedworth Williamson, President of the hospital; Councillor Addison, Chairman of the Executive Committee; Dr. Modlin, Dr. Square, and many other members of the corporation, the clergy, the medical profession, and the general public. Councillor Addison made a graceful reference to the help which Lady Williamson had given in the work, particularly in connection with an "Old Paris" bazaar which had