

time. Dr. Sterling married some sixteen years ago, and leaves a widow, with whom deep sympathy will be felt.

**SURGEON-GENERAL SIR JOHN HARRY KER INNES, K.C.B.**, died in Florence on March 12th, in his 88th year. Born in 1820, he entered the Army Medical Service as Assistant Surgeon, April 8th, 1842; became Surgeon, March 11th, 1853; Deputy Surgeon-General, December 31st, 1858; and Inspector-General, July 24th, 1872. He retired from the service, January 27th, 1880. In 1854, his regiment being in India, he went to the Crimea as a volunteer, and took part in the siege of Sebastopol and in the attack on the Redan on June 18th (medal with clasp and Turkish medal). During the Sepoy revolt in India he served with great distinction with the 1st Battalion of the 60th Rifles. He was wounded and his horse shot in the action on the Hindun; he was present at the battle of Budli ke Seral, at the storming of the heights before Delhi, and the siege, assault, and capture of that city. As P.M.O. of Sir John Jones's force he went through the Rohilkund campaign, and subsequently held a like appointment in Oude with Brigadier Troup's column (frequently mentioned in dispatches, medal with clasp, and appointed C.B.). In 1871 he was selected to act as British Medical Commissioner on the staff of the Crown Prince of Prussia during the Franco-German war. At the close of this campaign he received from the Emperor the Steel war medal and the Iron Cross. From 1876 to 1880 he held the appointment of P.M.O. in India, and in 1877 was appointed an Honorary Surgeon to Queen Victoria. In 1878-9 Surgeon-General Ker Innes was P.M.O. of the Afghanistan expeditionary force; he was present at the assault and capture of Ali Musjid and the subsequent advance up the Khyber Pass (mentioned in dispatches, medal with clasp). He was in receipt of a Reward for Distinguished Service granted him in 1885, and was promoted to be K.C.B. in 1887.

**DR. ORONHYATEKHA**, of Toronto, who died on March 3rd of heart disease and diabetes, was a full-blooded Mohawk, and was born on the Six Nations Reservation near Brantford, Ontario, in 1841. He received his medical education at the University of Toronto, and was, we believe, for some time at Oxford. He practised his profession in Ontario until 1889, when he took up his residence in Toronto.

**DEATHS IN THE PROFESSION ABROAD.**—Among the members of the medical profession in foreign countries who have recently died are: Dr. Gustav Hirsch, Physician to the Czar, aged 79; Dr. Ottomar Rosenbach, sometime Professor of Internal Medicine in the University of Breslau, aged 56; Dr. Labéda, formerly Professor of Operative Surgery in the Medical Faculty of Toulouse; Dr. Peter Ssauschtschinski, formerly Professor of Pharmacology in the Military Medical Academy, St. Petersburg, aged 64; Dr. Wladyslaw Krajewski, of Warsaw, one of the leading surgeons of Poland, aged 52; Dr. John H. Brinton, of Philadelphia, author of the article on gunshot wounds in the first portion of the *Medical and Surgical History of the War of the Rebellion*, and afterwards Surgeon to the Jefferson Hospital and Professor of the Practice of Surgery and Clinical Surgery in the Jefferson Medical College, aged 75; and Dr. Joao Augusto Teixeira, Director of the Medico-Chirurgical School of Funchal.

## HOSPITAL AND DISPENSARY MANAGEMENT.

### INVERNESS DISTRICT ASYLUM.

THE Medical Superintendent of this asylum is able to submit an exceedingly favourable report for the year ending May 15th, 1906. There were 659 patients on the register on May 15th, 1905, the total cases under care during the year numbered 811, and there remained 888 on the register on May 15th, 1906, showing an increase of 29 during the year.

During the year 152 cases were admitted, of whom 99 were first admissions. In 72 the attacks were first attacks within three, and in 18 more within twelve, months of admission; in 45 the attacks were "not-first" attacks within twelve months of admission, in 14 the attacks were of more than twelve months' duration, and in 3 were of congenital origin on admission. Only 37 were in average bodily health and condition when admitted, 83 being in indifferent or reduced, and 32 in

bad or exhausted, conditions. Further, 53, or 34 per cent., had been under treatment before, as compared with 27 per cent. of the previous year. It is to be noted, however, that several of these cases were readmitted to the asylum from amongst those boarded-out, and are thus not to be regarded as really relapsed cases.

The admissions were classified as to the forms of mental disorder into: Mania of all kinds, 68; melancholia of all kinds, 60; dementia, 11; general paralysis, 5; acquired epilepsy, 2; and cases of congenital or infantile defect, 2. As to the probable etiological factors in the admissions, alcoholic intemperance was assigned in only 8, or 5 per cent.; syphilis in 5; adolescence, old age, and the climacteric in 25; phthisis in 20; previous attacks in 53, and moral causes in 43. Hereditary influences were ascertained in 42, or 27 per cent., and in 4 more congenital defect existed. In 17 no cause could be assigned. During the year 77 were discharged as recovered, giving the unusually high recovery-rate on the admissions of 50.6 per cent., and, notwithstanding the exceedingly unfavourable character of the admissions, 58 of these had recovered and been discharged before the end of the asylum year. There were also discharged as relieved 11, as not improved 7, and there were 28 deaths. The deaths are almost half those of the previous year, and give the record-breaking death-rate for this institution of 4.2 per cent. on the average number daily resident.

The deaths were due in 3 cases to general paralysis, and in 1 to exhaustion from senile mania; in 19 to chest diseases, including 6 deaths from phthisis pulmonalis; in 2 cases to general tuberculosis, and in 1 each to cancer of stomach, senile decay, and "malignant disease." All deaths were thus due to natural causes, and, further, no accident of a serious nature occurred during the year. The general health appears to have been good during the year, and no illness of epidemic form affected either inmates or staff.

**THE ROYAL NATIONAL ORTHOPAEDIC HOSPITAL.** From the statements made at the recent annual meeting of what is now the Royal National Orthopaedic Hospital, it would appear that the amalgamation scheme has, up to the present, worked very harmoniously, and that financial results have been entirely satisfactory. Building of the new premises is expected to commence early in the spring, the expenditure, estimated at £5,700, being partly covered by sale of the old premises of the Royal Orthopaedic Hospital in Hanover Square. During rebuilding it appears to be the intention to continue to rent some vacant wards at Charing Cross Hospital as well as use certain portions of the existing premises in Portland Street. It is still hoped that the City Orthopaedic Hospital will join in the amalgamation, but arrangements to that end have not yet been completed.

**KING EDWARD'S HOSPITAL FUND FOR LONDON.** The General Council of King Edward's Hospital Fund for London met at Marlborough House, on March 15th, to receive the accounts and report for the year 1906. The Prince of Wales, President of the Fund, took the chair. The report, read by Mr. Danvers Power, one of the honorary secretaries, stated that the total income of the Fund from general sources had been £110,955 16s. 1d., of which £110,000 had been distributed. Note was also made of the various large bequests to the capital, of which the Fund received notice during the year, though several had not yet been paid; of the completion of the revision of the system of keeping hospital accounts; and of the steps being taken to obtain a Bill for the incorporation of the Fund. The important meeting of the year being that held in December to receive the recommendations of the Distribution Committee, the business on the present occasion was mainly of a formal character; and after the reports had been adopted on the motion of the Prince of Wales, the proceedings terminated with a vote of thanks to the Prince for presiding.

### ROYAL SEA-BATHING HOSPITAL.

At the annual meeting of the Royal Sea-Bathing Hospital, an institution which, though situated at Margate, mainly caters for the needs of London patients, an intention was indicated to improve in many ways the accommodation and equipment of the institution at an early date. During last year the number of beds daily occupied was 133. The number of applications for admission—716—exceeded those of the previous year by 57. Of the total applicants 145 were, on medical examination, deemed to be unsuited for admission.

**THE ROYAL HOSPITAL FOR DISEASES OF THE CHEST.** The ninety-third annual report of the City Chest Hospital, the first established in Europe for the study and treatment of pulmonary disorders, records the completion of all the structural improvements and additions asked for by the Medical Council of the hospital in 1906. The hospital has therefore now been brought in every way up to the standard of present-day requirements. The number of in-patients treated—583—is under the figure for 1905, as one ward had to be kept closed during the alterations. The new arrangements include an x-ray room and improvements in the operating theatre.