

## OPERATION DAYS AT THE HOSPITALS.

**MONDAY.....** Metropolitan Free, 2 P.M.—St. Mark's, 9 A.M. and 2 P.M.—Royal London Ophthalmic, 11 A.M.—Royal Westminster Ophthalmic, 1.30 P.M.—Royal Orthopaedic, 2 P.M.

**TUESDAY.....** Guy's, 1.30 P.M.—Westminster, 2 P.M.—Royal London Ophthalmic, 11 A.M.—Royal Westminster Ophthalmic, 1.30 P.M.—West London, 3 P.M.—National Orthopaedic, 2 P.M.

**WEDNESDAY..** St. Bartholomew's, 1.30 P.M.—St. Mary's, 1.30 P.M.—Middlesex, 1 P.M.—University College, 2 P.M.—King's College, 1.30 P.M.—London, 2 P.M.—Royal London Ophthalmic, 11 A.M.—Great Northern, 2 P.M.—Samaritan Free Hospital for Women and Children, 2.30 P.M.—Cancer Hospital, Brompton, 3 P.M.—Royal Westminster Ophthalmic, 1.30 P.M.—St. Thomas's, 1.30 P.M.—St. Peter's, 2 P.M.

**THURSDAY....** St. George's, 1 P.M.—Central London Ophthalmic, 1 P.M.—Charing Cross, 2 P.M.—Royal London Ophthalmic, 11 A.M.—Hospital for Diseases of the Throat, 2 P.M.—Royal Westminster Ophthalmic, 1.30 P.M.—Hospital for Women, 2 P.M.—St. Thomas's (Ophthalmic Department), 4 P.M.—London, 2 P.M.

**FRIDAY .....** Royal Westminster Ophthalmic, 1.30 P.M.—Royal London Ophthalmic, 11 A.M.—Central London Ophthalmic, 2 P.M.—Royal South London Ophthalmic, 2 P.M.—Guy's, 1.30 P.M.

**SATURDAY....** St. Bartholomew's, 1.30 P.M.—King's College, 1 P.M.—Royal London Ophthalmic, 11 A.M.—East London Hospital for Children, 2 P.M.—Royal Westminster Ophthalmic, 1.30 P.M.—St. Thomas's, 1.30 P.M.—Royal Free, 9 A.M. and 2 P.M.—London, 2 P.M.

## MEETINGS OF SOCIETIES DURING THE NEXT WEEK.

**MONDAY.**—Medical Society of London, 8.30 P.M. Mr. Mason, "Case of Congenital Deformity of Rectum" (living specimen); Mr. Thomas Bryant, "On the Surgical Treatment of Intestinal Obstruction"; with Two Cases of Enterotomy.

**WEDNESDAY.**—Obstetrical Society of London, 8 P.M. Specimens: Sections of an Uterus on the first day of Menstruation, shewing Desquamation of the Decidua; Section of Dysmenorrhoeal Membrane (Dr. Cory); Fractured Fœtal Skull (Dr. Poole); Case of Hand-behind-Head Presentation (Dr. Bryden). Papers: Dr. Braxton Hicks, "Case of Caesarean Section"; Dr. Potter, "Case of Pregnancy complicated with Malignant Growth in Vagina and Rectum"; Dr. R. Cory, "Membranous Dysmenorrhoea";—Royal Microscopical Society, 8 P.M. Mr. A. D. Michael, "On new British Cheyleti".

**THURSDAY.**—Harveian Society of London, 8.30 P.M. Dr. Buzzard, "A Case of Bлеpharospasm"; Mr. Edmund Owen, "A Case of Epithelioma of Rectum"; Dr. John Williams, "Cases of Fibroid Tumour treated by Hypodermic Injection of Sclerotic Acid".

## LETTERS, NOTES, AND ANSWERS TO CORRESPONDENTS.

**CORRESPONDENTS** not answered, are requested to look to the Notices to Correspondents of the following week.

**CORRESPONDENTS**, who wish notice to be taken of their communications, should authenticate them with their names—of course not necessarily for publication.

**AUTHORS** desiring reprints of their articles published in the BRITISH MEDICAL JOURNAL, are requested to communicate beforehand with the printer, Mr. Thomas Richards, 37, Great Queen Street, W.C.

**PUBLIC HEALTH DEPARTMENT.**—We shall be much obliged to Medical Officers of Health if they will, on forwarding their Annual and other Reports, favour us with *Duplicate Copies*.

**COMMUNICATIONS** respecting editorial matters, should be addressed to the Editor, 37, Great Queen Street, W.C.; those concerning business matters, non-delivery of the JOURNAL, etc., should be addressed to the General Manager, at the Office, 36, Great Queen Street, W.C., London.

**WE CANNOT UNDERTAKE TO RETURN MANUSCRIPTS NOT USED.**

## UNCOMMON FORMS OF DISLOCATION.

**SIR.**—Under this heading, in the JOURNAL of April 6th, Mr. Robson mentions dislocation of the jaw occurring during an attack of hysteria. Though such cases may not be recorded by the authorities Mr. Robson quotes, I do not think they are unknown to the majority of practical surgeons. As a case in point, I may mention the following. Some time ago, I was hurriedly called to see a lady who was reported to be in *articulo mortis*. The friends stated that two days previously she had had a fit, which was immediately followed by facial distortion (the mouth remaining widely open), and inability either to speak or swallow. A medical man had been called in, and pronounced the case a "severe attack of apoplexy", and administered a turpentine enema. The history of the attack was clear, and left no doubt whatever that hysteria had to answer for the evils the lady suffered. Dislocation of the jaw was plain, and, under the persuasive influence of a little manipulation, the (so-called) apoplexy vanished, the drawn features returned to their normal position, the power of swallowing, so necessary to life, and the power of speaking, almost equally necessary to womankind, were happily recovered. It was the end of a little fairy tale.

I may add, that the enema did not prove of any absolute value in this case, nor that its administrator has since been remembered in the prayers of an ungrateful patient.—I am, etc.

Manchester, April 1878.

E. ARNOLD BIRCH, F.R.C.S. Eng.

**J. N.**—Mr. Howard Marsh, Mr. Berkeley Hill, and Mr. Barwell, have lately published reports of cases successfully treated by Sayre's suspension method and plaster jacket.

**CORRESPONDENTS** are particularly requested by the Editor to observe that communications relating to Advertisements, changes of address, and other business matters, should be addressed to Mr. Francis Fowke, General Secretary and Manager, at the Journal Office, 36, Great Queen Street, W.C., and not to the Editor.

## MEDICAL ETIQUETTE.

**SIR.**—Under the above heading, you have published a paragraph in your issue of the 20th April (p. 583) relating to my advertisement of scale of charges. You state that you will be very happy to publish the opinion of any medical authority on the subject; but before making any remark on that head, permit me to repeat that your libellous paragraph of the 6th instant, which was of a most malicious character, and which you have now followed up by another, to the effect that I have done something very wrong, as not being "consistent with the generally accepted notions of professional propriety among the medical profession in this country", has been used directly to damage my professional character; and that, as you have been informed through my solicitor, W. M. Skinner, Esq., of Sunderland, the paragraph of the 6th instant has been copied from your JOURNAL into the *Sunderland Daily Echo*, with a manifest intention to damage me. I beg also to inform you that copies of that paper, with the paragraph marked, have been sent to some of my country patients, and to one gentleman in particular, upon whom I had performed lithotomy. As my solicitor has informed you, medical men have asserted that, through your paragraph, I would lose my licence and be struck off the *Register*. Therefore, for the sake of justice, and to prevent having the question settled in a court of law, I demand from you an apology, published in your JOURNAL, to the effect that I have not acted against the rules and discipline of the Apothecaries' Society, or any other society to which I am amenable. I claim to know what true professional propriety in this country is, as well as the editor of any medical journal. Have I not finished a full curriculum of four years at the College of Medicine, Newcastle-upon-Tyne, University of Durham? You say your Association claims to uphold a high standard of professional propriety amongst medical men. I claim to do the same. But are you now doing it in the way it should be done? Has not your Association admitted, and does it not admit as members, medical men who style themselves "Doctors", and have "Dr." on their doorplates and elsewhere, without ever having passed an examination as such at any university, and, therefore, of course holding no doctor's diploma? Not only so, but other members of the so-called medical profession, who never passed an examination in chemistry, do or did hold office in your Association. I was once, as you know, a member of it, and the reason why I left it was, that its order of professional propriety was not high enough for me. You would refer me to an opinion on the subject of my advertisement (published in self-defence) to the Council of your Association. I know that many highly educated men of the most unexceptionable professional mark and standing are members of it; but that does not alter the fact, that the Association includes an abundance of self-styled doctors who have no good title to be called such. I therefore decline to be judged by such an anomalous body, or to square my conduct according to its *dictum*. Those who live in glass houses should not throw stones. I thank Heaven that neither you nor your Association are any legal authority, nor have you any power to give a legal opinion. As to your second proposed reference—to the Council of the Apothecaries' Society—I have nothing to do with that body. When I presented myself to its Courts of Examiners in 1868, I satisfied these gentlemen, and passed my examination, receiving, therefore, my diploma. In accordance with the Society's Royal Charter, I have a right to publish my scale of charges, whether spontaneously or in self-defence, and I need no further reference. I have the letter of the law and the spirit of good law, which is justice and common sense, to protect me; and as I claim to have as legitimate a professional standing as any medical man in England, I shall defend my professional character wherever, whenever, and by whomsoever impugned, before the highest court of appeal that exists.—I am, yours truly,

GUSTAV ABRATH, M.D., etc.; late Voluntary Surgeon at the War Hospitals, Courcelles, Investing Army, Metz; Medical Conductor of a Sanitary Train Railway between Pont-à-Mousson and Saarburg; Eisenbahn Etappen-Arzt Third Army at Eprenay; Medical Member of the Royal Evacuation Commission of the German Army at Eprenay; Physician and Surgeon to the Military Hospital at Strassburg.

Sunderland, April 23rd, 1878.

**AN OLD ASSOCIATE** (Pontypool).—We are inclined to think that the master is liable for the servant; and if the message summoning an Old Associate were delivered by one of his agents in his name, there can be little doubt on the subject.

## "COMMISSIONS."

**SEVERAL** correspondents forward us copies of the subjoined enclosure, with expressions of such indignation as may naturally be aroused by an insult of the kind. We cannot understand how the author of this circular can permit himself to make offers so grossly insulting to the respectable members of the medical profession. The statement with which the circular opens is one which cannot be read without disgust; but it must be taken for what it is worth, and in connection with the circumstances in which it is made a part of an advertising circular. There are black sheep in all callings, and the author of this circular may have had dealings with them, but this does not justify his insulting the respectable members of the profession in his district by addressing such offers to them.

"Dear Sir,—For a considerable period it has been my practice to remunerate medical men for the honour they do me in recommending me to their patients. Finding that this system begot a feeling of mutual confidence, I have determined, in every case of recommendation by medical men, to present them with a fourth part of the sum received. I estimate my profits at fifty per cent., and in every case I shall allow twenty-five per cent. to the medical man recommending me. I need scarcely add, that my system is one combining nature with utility, and renders mastication an easy and comfortable performance. I may here state that my attention has been very much directed to the regulation of children's teeth by means of invisible gold plates, thus arresting the deformities of the mouth, which would otherwise take place. I may add, that in consequence of the attention bestowed, I invariably give perfect satisfaction. This is a subject well worthy your consideration, as it is astonishing the sums I pay even to men in comparatively small practice. It is desirable that in every case you will instruct your patient to hand me your card or name and address.—I am, yours very truly, Surgeon Dentist.—P.S. On completion of a case or operation, I will immediately forward you a cheque for the percentage due."

**ERRATUM.**—In the JOURNAL of April 6th, page 489, column 1, line 7, for "oligopyrenæmia", read "oligapyrenæmia".

**NOTICE TO ADVERTISERS.**—Advertisements for insertion in the **BRITISH MEDICAL JOURNAL**, should be forwarded direct to the Publishing Office, 36, Great Queen Street, W.C., addressed to Mr. FOWKE, not later than *Thursday*, Twelve o'clock.

#### KOUMISS.

SIR,—I do not think that "A Physician" is confounding the really fermenting koumiss and the spirituous liquor distilled from mare's milk, which is of an intoxicating character. In referring to Dr. Jagielski's book on *Koumiss and its Use in Medicine*—at present, I am told, out of print—I find on page 8 that "the koumiss of the Kirghises is prepared from mare's milk in summer, but during winter (when mare's milk fails them) from cow's milk, and this they call airen, argen, or argan. The koumiss which contains a greater quantity of spirit is called ariva". The fresh koumiss they call soumal, the old koumiss. The Kalmucks call it tchigan, and others araca, but koumiss is the Tartar name for the fermented mare's milk. The fresh mare's milk is called by the Kalmucks *jouven-ousoun*, and the fresh cow's milk *oukiren-ousoun*. In their tents, where they live, they distil a spirit from koumiss, which they keep all the year round in stock. They usually keep their mare's milk in a bag made of horse's hide undressed, which, by being smoked, acquires a degree of hardness. Its shape is conical, somewhat triangular, from being composed of three different pieces, set in a circular base of the same hide. The sutures, which are made with tendons, are secured with a covering on the outside, with a doubling of the same skin, very closely fastened. It has a rather dirty appearance and disagreeable smell. These leathern bags they use both for the preparation and transport of koumiss on their vans. They usually cover these bags with a woollen cloth, a thick rag, or a large sock, but so that the stick at the lower end (made in a manner of a churn-staff, and used for agitating the vinous liquor) may be in sight and at hand. In some parts, they transport it on the backs of camels, supposing that the continuous agitation gives a better flavour and stronger taste to the koumiss, which they spare for particular occasions, as weddings, for the entertainment of good old friends, etc., where old koumiss is of greater value, being more advanced in fermentation, stronger, and more exhilarating.

The best koumiss is manufactured in the government of Osenberg, especially on the large estate of Testeleff, in the village of Kilimow, in the district of Beleber. In the government of Stavropol, Taurien, and on the Kaukasus, the koumiss is not so well prepared, and has an unpleasant effluvia of horse perspiration, as even the best sorts of koumiss prepared from mare's milk always have more or less, but to which patients soon grow accustomed.

I have myself seen many formulæ for making koumiss from cow's milk or ass's and goat's milk, but I think that, since the koumiss is so well prepared in London by Messrs. Edwin Chapman and Co., we should use their preparations with all the confidence which, according to my own experience and that expressed by many members in your valuable *JOURNAL*, their various preparations merit. There is no doubt that particularly their medicine koumiss answers well in cases of gastric catarrh, vomiting, bronchitis, consumption, albuminuria, etc.; and the patients usually like it at once, or get soon accustomed to its prolonged use, if necessary.—I beg to enclose my card, and remain, dear sir, yours obediently,  
April 1878.

MEDICUS.

#### MENSTRUATION AND THE CURING OF MEAT.

SIR,—I thought the fact was so generally known to every housewife and cook, that meat would spoil if salted at the menstrual period, that I am surprised to see so many letters on the subject in the *JOURNAL*. If I am not mistaken, the question was mooted many years ago in the periodicals. It is undoubtedly the fact, that meat will be tainted if cured by women at the catamenial period. Perhaps the fact is not so generally known, that meat cured by men suffering from gonorrhœa or syphilis will also be spoiled. Whatever the *rationalis* may be, I can speak positively as to the fact.—Your obedient servant,  
Linslade, April 8th, 1878.

WM. STORV.

D. M. R.—Fairlie Clarke on *Diseases of the Tongue*, and Morell Mackenzie on the *Use of the Laryngoscope*.

#### MUSCÆ VOLITANTES.

SIR,—I have been for some time a sufferer from what are called *muscæ volitantes*, and having read several authors on the subject, and performed many experiments on myself, I beg to offer you the following explanation of their origin. *Muscæ volitantes* appear to occur only in weak eyes, or those which water freely from long gazing at any object. They pass slowly downwards over the field of vision, and disappear until the eyes are blinked, when they once more appear and vanish as before. They occur on standing at some luminous object, as a window. My theory is, that they are caused by molecules of conjunctival secretion, slowly gliding over the anterior surface of the cornea, becoming renewed upon the surface of the membrane at each closure of the lids in the act of winking. Does not their circular and watery appearance justify this supposition? If you will kindly give this publicity in your columns, perhaps some of your many readers may suggest a remedy for this distressing affection.—I am, sir, your obedient servant,  
F. R. GREENWOOD, M.R.C.S.

St. Bartholomew's Hospital, April 15th, 1878.

MR. E. MATTHEWS (Redhill).—We have no information on the subject.

#### MR. HUME-ROTHERY AGAIN.

IN REFERENCE to this gentleman's letter in the *Standard* of April 6th, on the subject of compulsory vaccination, we beg leave to refer to a paragraph in *Punch* of April 13th, which runs as follows. "Shall we deal with fools according to their folly, or bray them in the mortar of penal law, whether their folly depart from them or not under the braying? Such is the question raised on Mr. Pease's Bill for limiting the cumulative penalties under the Vaccination Act. Mr. W. E. Forster and Mr. Gladstone in favour of second reading of the Bill; Lord R. Churchill, Dr. Playfair, and Mr. *Punch* against, and the Bill thrown out—as it deserved to be—by 271 to 82. Fools cannot be allowed to perpetuate and disseminate small-pox. The only amendment of the law Mr. *Punch* would sanction would be one authorising compulsory vaccination of children, where parents had neglected to protect their little ones from the one plague against which science has reared an impregnable barrier, behind which—though many from ignorance and carelessness neglect it—only fools that are fanatics, and fanatics who are fools, obstinately refuse to shelter. Consideration to them is cruel and wrong to their children. And to prevent this the law must take order."

NEMO (Torquay).—A memorandum on the subject of the construction and arrangement of temporary fever or epidemic hospitals has been prepared and issued by the Medical Officer of the Local Government Board, from whom copies may be obtained on application.

**NOTICES of Births, Deaths, Marriages, and Appointments, intended for insertion in the BRITISH MEDICAL JOURNAL, should arrive at the Office not later than 10 A.M. on Thursday.**

#### ROYAL COLLEGE OF SURGEONS OF ENGLAND.

THE following were the questions on Anatomy and Physiology submitted to the candidates at the written examination on March 29th, when they were required to answer at least four (including one of the first two) out of the six questions. 1. Describe an act of respiration, and the changes which the blood and air undergo. 2. Describe the mucous membrane of the dorsum of the tongue. 3. Describe the ethmoid bone and its articulations. 4. Describe the scalenus anticus muscle, its attachments and relations. 5. Describe the course, relations, and branches of the anterior tibial artery from its origin to the ankle-joint. 6. Describe the dissection required to expose the trunk of the musculo-spiral nerve. Give its branches and their distribution.

The following were the questions on Surgical Anatomy and the Principles and Practice of Surgery submitted to the candidates for the membership at the written examination on April 12th, when they were required to answer at least four (including one of the first two) out of the six questions. 1. Describe the axillary artery, its course and relations. Supposing this vessel to be ligatured in its third part, how would the collateral circulation in the arm be carried on? 2. What are the differences between the coverings and relations of an oblique and a direct inguinal hernia? What are the risks attending the operation for strangulated bowel in either case? and how would you avoid them? 3. Describe the disease usually called fistula lacrymalis, its causes, and the treatment to be adopted for its relief. 4. Describe and explain the symptoms of fracture of the spine, with compression of the cord, in the middle dorsal region. How would you treat such a case? 5. What do you understand by the healing of a wound by the "first intention"? what by the "second intention"? Describe the nature of the process in each case. 6. What is a hæmatocele? under what circumstances may it occur? Give the treatment you would adopt immediately, or in a chronic case.

The following were the questions on the Principles and Practice of Medicine. 1. Describe the symptoms, course, and sequelæ of diphtheria, and state the treatment you would adopt in the various stages. 2. What are the pathological conditions leading to hemiplegia? State the prominent differences in the symptoms according to the locality of the lesion. 3. Give a list, and the average doses for the adult, of the vegetable and saline purgatives contained in the *Pharmacopœia*, specifying their various modes of action. Write out a prescription in full for a single draught.

#### CERTIFYING FACTORY SURGEONS.

SIR,—You will much oblige me by publishing in the *BRITISH MEDICAL JOURNAL* this correspondence, as I believe that it throws light on a subject of importance to certifying factory surgeons.—Your obliged,  
HERBERT M. MORGAN.

Lichfield, April 11th, 1878.

Wolverhampton, April 6th, 1878.

"Dear Sir,—The Lichfield Brewery Company have applied to me respecting a charge you have made for examining three boys, for which you have charged 2s. 6d., in addition to 6d. for each boy. A short time ago, a resolution was passed by the chief inspector, that in places where there were never more than five persons under the age of sixteen, these might be taken to the surgeon's house and examined there for 6d. each, without the 2s. 6d., which is to be paid when the certifying surgeon goes to the factory. I am afraid that I have omitted to explain this to you before. Personally, I prefer that the certifying surgeon should go to the factory; but as the regulation exists, persons who come under it have a right to avail themselves of it.—I have told the Brewery Company that it is my fault for not explaining it to you.—I am, yours truly, G. S. L. BLENKINSOPP.—Dr. Morgan."

Lichfield, April 8th, 1878.

"Dear Sir,—I beg to thank you for your courteous letter, informing me of an alteration in the fees payable to certifying factory surgeons, of which I was in total ignorance. If I have your meaning correctly, the present regulation is as follows. An employer, who has not more than five young persons on his premises, may send one of them to me to be examined for a medical certificate of health, for which examination and certificate he tenders me the handsome fee of *sixpence*. I hope that I am mistaken, and that no such insult to the medical profession has been authorised by the chief inspectors; but if such be the case, I must ask you to at once accept my resignation of the post of certifying factory surgeon for Lichfield, and to notify the same to the proper authority. I reserve the right to publish this note and your reply in the medical papers.—Yours faithfully, HERBERT M. MORGAN.—G. Blenkinsopp, Esq."

Wolverhampton, April 9th.

"My dear Sir,—In reply to your note, I enclose you a memorandum issued by the inspectors in 1871. As far as has come to my knowledge, very few have availed themselves of the sixpenny fee, owing to the trouble of taking the persons to be examined, or of sending some one with them, to the house of the certifying surgeon. As regards your resignation, I should be glad if you would defer it till I have an opportunity of seeing you, though, if you desire it, I will forward your letter to Mr. Redgrave.—Yours faithfully, G. S. L. BLENKINSOPP.—H. M. Morgan, Esq."

Lichfield, April 10th, 1878.

"Dear Sir,—I am much obliged to you for your note and enclosed printed memorandum. I must ask you to accept my resignation forthwith, as I cannot submit to receive sixpenny fees; at the same time, I will continue to act for you for the next month or so until you can make fresh arrangements with another surgeon, so that you may not be put to inconvenience by my sudden resignation; but I shall dismiss the sixpenny cases after certifying without taking any fee. In conclusion, let me thank you for placing a disagreeable communication in as pleasant a form as you could personally.—Yours faithfully, HERBERT M. MORGAN.—G. Blenkinsopp."

#### HEADACHES.

SIR,—In reply to an inquiry from Brighton as to how headaches, supposed to arise from the overstimulating quality of the air, should be treated, a correspondent from Liverpool advised giving up stimulating food and drink, including tea. Now, I find that when the air is overstimulating from dryness, weak tea has a tendency to induce skin-moisture, and to relieve the heart and the head, while coffee and cocoa are more suitable to moister weather: and this seems to agree with the indications of national taste. The inhabitants of the dry regions of Central China, and Russia, drink tea. In the moister climates of Italy and France, cocoa and chocolate are preferred. In the medium climate of Germany, coffee largely prevails. We observe, too, that the tea-plant grows in upland districts away from the sea, coffee at a moderate height not far from the coast, cocoa in low shore districts and islands.

There seems to be some connecting link of suitability between the food produced by a climate and the natives thereof, or of similar places. I have no doubt much of our English taste for tea arises from the artificial house-climate produced by carpets and fires.—Yours faithfully,  
Jo. C.



## MATERIA MEDICA EXAMINATIONS.

SIR,—I fear lest the discussion upon this subject should die away, leaving us still doubtful how much of botanic and pharmaceutical detail may safely be omitted from our teaching. Dr. Farquharson's letter was generously conceived in the interests of the students; but the interests of the lecturers themselves may furnish arguments for reform also. They can scarcely lecture with energy upon matters which they, in common with their hearers, consider really valueless. May I, therefore, attempt, if no one else will do so, to revive the question, What shall materia medica lecturers teach? Perhaps if it were desired of any one that he should propound a general theory of examinations, he would say that they should test the capacity of a man for doing the work he proposed to do by actual observation of how he did it. This plan is now partially followed in the clinical and practical work expected of candidates in medicine and surgery. It may be reasonably extended to materia medica. In his future career, the medical man may even yet find it necessary—at least occasionally—to dispense medicines himself. He must, of course, know how to prescribe them; and he must, as far as possible, know what change each drug is capable of effecting, in varying quantities, in any or all of the body-tissues. It is unnecessary to point out how a practical examination based upon these requirements should be conducted, further than to suggest that in those parts of the examination which are representative of life circumstances, in which books will usually be at hand, and in which instant action, and, therefore, ever present knowledge is not required, books of reference may be consulted by the candidate, the object being to find whether he will be able to do his work under these very conditions. And inasmuch as the examination is, on the present hypothesis, to represent the actual requirements of practice, not less nor more, the candidate should not be expected to remember now what he will not need to remember hereafter; nor, on the other hand, should he be allowed to pass if he forget now what it is essential he should always remember hereafter. What medical man knows to what "natural order" nux vomica belongs, or of what avail has this memory been to him? Concerning the extrication of strychnia, the same may be inquired: but the appearance, the precise action, the dose, the purity, and the chemical and physiological compatibilities of strychnia are relations of it with which the brain of every student should be deeply impressed; and there is little doubt that the concomitant introduction of almost useless relations deadens the impressions that it is so desirable these other relations should make upon him.

To take an example from the inorganic series of drugs—iodide of potassium—it would be a relief to both teachers and learners to neglect its mode of preparation, and to attend only to those of its qualities or properties which are of positive moment to therapeutists and prescribers. And why should they not? For no other reason than that the students may possibly be asked at an examination a question demanding knowledge upon that point. To whom shall we appeal? What examining bodies, what individual examiners, will plainly tell us that henceforth we may leave the general chemical knowledge which such questions involve to be dealt with in the chemistry lectures and papers? We surely do not suppose that students can keep these things long in their minds: it is enough if they have ever comprehended the general principles of chemical science upon which such details are based. Now that therapeutic science has such vastly greater proportions than formerly, when text-books on materia medica contained very little else than applied chemistry and botany, these latter must yield in place as they do in practical importance. The time has come for reform: why should it be for another day delayed?—I am, sir, your obedient servant,  
LEEDS, April 1878. T. CHURTON, M.D.

MR. M. M. BRADLEY may have observed that a similar communication in somewhat more detail had been earlier received from Dr. Duffey, and was published.

MR. R. BYRDEN (Uffculme).—The notice was inserted at page 551 of the JOURNAL for April 13th.

## DIALYSED IRON.

SIR,—I should not have troubled you with any reply to Messrs. von Glehn and Sons' remarks on my observations on dialysed iron, were it not that they contain a curious blunder, to which I might be supposed to assent if I were silent. They say "nitrogenous food is colloid, but it is absorbed none the less; and the hydrated oxide of iron cannot, therefore, fail to be at once acted upon by the acid of the gastric juice and rendered capable of absorption". Is it possible that Messrs. von Glehn think that the iron is converted into a peptone? I can attach no other meaning to their remarks; but such a view is really too ridiculous to need discussion. The dialysed iron is incapable of absorption as a solution; but as, on dilution with ordinary water, it all becomes precipitated in gelatinous flocculi, it no doubt is in this condition in the stomach. If the "London Physician's" experience have led him to think this a good form of administration, it is in direct contradiction to that of other physicians in and out of London.—I am, sir, your obedient servant,  
JOHN CAVAFY.

THE following communications have been handed to the General Manager:—Dr. W. R. Hughes, Liverpool; Commander Blount, London; Dr. H. Donkin, London; Mr. Henry G. James, Beverley; Dr. J. W. Moore, Dublin; Dr. C. B. Ball, Blaenavon; Dr. R. Bowles, Folkestone.

## A PECULIAR CASE.

SIR,—I should be obliged if you would give publicity to the enclosed observations, soliciting from your numerous readers any remark which might tend to elucidate the diagnosis and treatment of this peculiar case.

A. C., a boy aged 10, born of healthy parents, had no disease up to the age of nine. He then had a slight attack of gastritis, which was cured in ten days. He always was and is of a lively disposition, is intelligent, and in every respect healthy. About a year ago, on returning from school, he had an attack of hicough, which lasted for a few minutes, and repeated three or four times a day. This lasted for two or three months; after which, the hicough was replaced by a peculiar cough, which also lasted for two or three minutes each time, was repeated three or four times a day, and also lasted two or three months. At this time the cough was replaced by bleating like a sheep, which symptom he has had until now. He bleats on rising in the morning, takes a shower-bath and bleats again, has breakfast and bleats twice until one o'clock, then again at 6 P.M.; after which he stops until the next morning, continuing every day, and at the same hours more or less. He sleeps well, and immediately after the attacks is as merry and well as any other child. This is the information given by the father, who is a very intelligent man. I was asked to see the boy to-day for the first time. On going upstairs, I heard him bleat three times. This was the end of an attack: immediately afterwards, he came and spoke to me as if nothing had happened. He speaks with a hoarse voice, evidently from the effects of the bleating. In answer to my questions, he told me he knew when the attack was coming, but could not help it. He runs away to the back of the house, where he is least heard, and begins. He is perfectly conscious, can walk about during the attack, and has no convulsion or fit of any kind. Several medicines have been tried, to no purpose. Sea-baths during

four months at the seaside reduced the bleating to once a day, and then lasted about half a minute instead of two or three. During this time his hoarseness almost disappeared.

I heard of a similar case in a young girl a few years ago, whom I did not see, but whom I heard whining and barking like a young dog. I was told that these attacks came on at intervals of five or six hours, between which she was quite well.—I am, etc.,  
SEMPER VIGILANS (Member).

March 30th, 1878.

## MIDWIFERY ENGAGEMENTS.

SIR,—I should be glad if you or some of the members of the Association would give your opinions on the point of engagements to attend in midwifery. I have seen the point discussed several times, but cannot recollect that any settled decision was arrived at, as to whether, if a medical man were engaged to attend a woman in her confinement and not sent for at the time, he had a right to claim his fee or not. I know that some county court judges will order the fee to be paid, but the uncertainty of the law is proverbial. It has happened to me three or four times lately to have been engaged to attend and then not to be sent for at the time, and I have not been certain what I ought to do about claiming the fee. I did claim half the fee from a man to-day, and he flatly refused to pay it, so I would be glad to have some advice on the matter. I know that a great many women engage a doctor to attend them in their confinement, and do not mean to send for him unless it turns out to be a difficult case, and then they refuse to pay any extra fee, so I am very strongly of opinion that every woman that engages a doctor to attend in her confinement ought to be made pay the fee whether she sends for him or not.—I remain, sir, yours obediently,  
ROBERT E. BURGESS, M.D.

Frampton-on-Severn, Gloucester, April 13th, 1878.

DR. GILLES (Runlet).—Squire's Companion to the Pharmacopœia would suit best.

## PLUGGING THE NOSTRILS.

SIR,—Mr. F. Davison seems to have misunderstood my suggestion respecting plugging the nostrils, for I fully appreciate the value of Bellocq's cannula, as well as that of his old pensioners the gum elastic catheters. I think, however, that Mr. Davison will find, as I stated, that the soft or worm-catheter is much easier of introduction and more expeditious than either of the others. Mr. Davison must have been fortunate in meeting with cases of epistaxis requiring only one plug. I have had difficulty after using two, even when aided by iron, tannin, and ergot as adjuncts.—I beg to remain, sir, yours very faithfully,  
RIPON, April 10th, 1878. T. T. FRANKLAND.

ENQUIRER.—The degree of M.D. may be obtained without residence, by a duly qualified practitioner (such as M.R.C.S. Eng. and L.S.A.), from the Universities of Durham, St. Andrew's, or Brussels, under conditions which may be obtained from the authorities of those institutions. Our correspondent will also find the conditions on which the two British Universities above-named grant the degree in the Educational Number of the BRITISH MEDICAL JOURNAL (September 8th, 1877); and those relating to the University of Brussels in communications from correspondents in various numbers of the JOURNAL.

## A MEDICAL CHRONOGRAPH.

SIR,—In the JOURNAL of April 6th, a watchmaker inquires whether "a watch so constructed as to beat audibly in unison with the average healthy pulse . . . and having a hand describing the full circle of the dial . . . would be considered an advantage?" For obvious reasons, there would be no advantage in such an arrangement. There would, however, be an advantage in what I am about to suggest. Let quarters of minutes only be marked by audible sounds. A watch so constructed would not only enable the medical man to count the pulse in the dark, but it would also allow him to pay greater attention to its quality while in the act of counting than is possible for him when under the necessity of closely observing the watch-dial at the same time. Matters might be arranged so that the sounding apparatus could be thrown into and out of gear at will.—I am, etc.,  
APRIL 1878. ARTHUR LEARED, M.D.

WE are indebted to correspondents for the following periodicals, containing news, reports, and other matters of medical interest:—The Western Morning News; The Yorkshire Post; The Coventry Herald; The Wisbech Advertiser; The West Briton and Cornwall Advertiser; The League Journal; The Liverpool Daily Post; The Newport and Drayton Advertiser; The Exeter and Plymouth Gazette; The Chicago Times; The Manchester Guardian; The Berkshire Chronicle; The Glasgow Herald; The Oswestry Advertiser; The Edinburgh Daily Courier; The Middlesex County Times; The Liverpool Evening Albion; The Daily Courier; The Kelso Chronicle; The Fifehire Herald; The Merthyr Express; The Carnarvon and Denbigh Herald; The Surrey Advertiser; The Stroud News; etc.

COMMUNICATIONS, LETTERS, etc., have been received from:—

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