MEDICAL CANDIDATES AT THE GENERAL ELECTION.

To the list of medical candidates for election to Parliament at the next General Election published in the BRITISH MEDICAL JOURNAL of last week the following should be added :

Mr. Charles Harvey Dixon, M.R.C.S., L.R.C.P., Conservative candidate for the Market Harborough Division of Leicestershire.

Sir George Scott Robertson, K.C.S.I., Liberal candidate for Central Bradford.

Sir George S. Robertson, who received his medical education at the Westminster Hospital medical school, entered the Indian Medical Service in 1878, and retired with the rank of Lieutenant-Colonel. He served through the Afghan campaign of 1879-80, and in June, 1888, passed into the employment of the Indian Foreign Office. In 1890-91 he travelled for a year among the wild hillmen of Kaffiristan, and his work on The Kaffirs of the Hindu Kush is the principal authority on the topography of that almost unknown mountain land. He conducted a political mission to Chitral in 1893, and early in March, 1895, was besieged there, and severely wounded.

PROPOSED AMALGAMATION OF $_{2}$ LONDON MEDICAL SOCIETIES.

A SPECIAL general meeting of the Royal Medical and Chirurgical Society was held at 20, Hanover Square on the afternoon of November 23rd for the purpose of considering the report on the union of medical societies adopted at the meeting of the General Committee of Representatives of the Societies held on July 19th. There was present a large and representative gathering of the Fellows.

Sir R. DOUGLAS POWELL, Bart., President of the Society, after stating from the chair that the object of the meeting was the consideration of the Representative Committee's report with the suggested amendment of the Council of the Society, and if approved to instruct the Council to proceed further with the matter, recapitulated the facts of the position of which the report was the expression.

Sir WILLIAM CHURCH then moved,

That the report on the union of medical sccieties as amended and adopted at the meeting of the General Committee of Representa-tives of the Societies held on July 19th, 1905, be and is hereby approved and adopted, subject to the modifications recommended by the Council of the Royal Medical and Chirurgical Society, and that the Council be and is hereby instructed to endeavour, in negotiating with the General Committee of Representatives of the Societies, to secure the adoption of all these modifications.

He emphasized the fact that what was then before the Society was not the scheme for an amalgamated society, but the question of the possibility of analgamation laying regard to financial and other considerations. The Council had decided that it was feasible. It was not intended that all medical societies in the outskirts of London, much less in the provinces, should be affiliated, in the first instance at any rate, but only those meeting in the Society's house and in that of the Medical Society of London. It was believed that such an amalgamation would tend to the welfare of the science of medicine and of the medical profession. Speaking as Honorary Treasurer of the Society he could say that never during the past ten years had it been in a sounder financial position.

Dr. ROBERT HUTCHISON, in seconding the resolution on behalf of the junior Fellows, said that amalgamation recommended itself to them because it made for economy and efficiency.

Colonel MYERS moved that the resolution be postponed for six months in order that the financial considerations involved should be more carefully investigated, particularly in regard to any outstanding debts of other societies. He suggested that the Society had much to lose and little or nothing to gain by the amalgamation. He considered it would mean the extinction of the Society. This amendment did not find a seconder.

Dr. F. E. BATTEN considered that the list of the societies for whom amalgamation was proposed should be the minimum and that it should be open to attach others.

Dr. EDGAR WILLETT remarked that if women were excluded from the amalgamated society, at least one society in the list would find difficulty in taking part. Dr. SEYMOUR TAYLOR thought that if women were admitted

they should not be entitled to take part in administration.

The resolution was then put to the meeting and carried with one dissentient.

Dr. P. PYE-SMITH then moved a second resolution directing. the Council to take the necessary steps for carrying into effect the amalgamation of the Society with any sufficient number of the Societies named in the report or other societies. Mr. D'ABOY POWER seconded this resolution, which he looked. upon as a vote of confidence of the Fellows in the Council, and it was carried unanimously.

AUSTRALASIAN MEDICAL CONGRESS.

[FROM OUR SPECIAL CORRESPONDENT IN SYDNEY.] THE Seventh Session of the Australasian Medical Congress was held at Adelaide, South Australia, from September 4th to oth.

Addresses. The President was Professor E. C. Stirling, M.D., F.R.S., C.M.G., Professor of Physiology in the University of Adelaide, who, by his geniality, warm hospitality, and excellent pre-sidential address, proved himself an ideal president. His address on medical science and social problems was delivered in the Elder Hall before a very large audience of lay and profeasional people, and was warmly applauded. In the Section of Medicine the address was delivered by Dr. Daniel Colquhoun of Dunedin, New Zealand, President of the Section, on the standard of ethics and work in medicine. In the Section of Surgery the presidential address was given by Mr. Frederick Bird of Melbourne, on abdominal syphills. In this address Mr. Bird gave a summary of his recent experiences of this form of syphilitic disease, which was listened to with deepest attention. In the Section of Pathology Professor David Welsh, Professor of Pathology in the University of Sydney, gave his presidential address on recent work on the pathology of cancer. This address proved to be one of the best addresses' at the Congress. In the Section of Gynaecology the address on some practical points in gynaecology and obstetries was delivered by Dr. Byrne of Brisbane. Dr. Syme gave the address on medical ethics in the Section of State Medicine, and Dr. W. G. Armstrong of Sydney gave the address on infantile mortality in the Section of Public Health. Several important resolutions were passed at the last general meeting of the Congress.

Next Meeting.

Professor Allen of Melbourne was elected the President of the next Congress to be held in Melbourne in 1908. Professor Allen, who is the Professor of Anatomy and Pathology in the University of Melbourne, has always taken an active interest in the welfare of the profession, and there is no doubt he will worthily fill the presidential chair.

Organization of the Profession.

Probably one of the most important acts done by the Congress was the appointment of a Committee composed of representatives from all the medical associations throughout Australia, to take into consideration the important question of the organization of the profession in Australia. This Comat the meeting of the Congress at Melbourne in 1908. How far this Committee will be able to devise a scheme for this purpose which will be entirely satisfactory to all parties remains to be seen; but it is quite obvious that such a schemecan only be completed by a policy of give and take on all sides. Hitherto the Branches of the British Medical Association in Australia have been both numerically and influentially the most important of the Australian medical organizations, and those who have worked hard in the past in raising these Branches to their present position of influence are not likely readily to give way to any scheme which might imperil the-union of these societies with the parent Association.

Public Health.

Other resolutions passed at the Congress dealt with various matters of the public health, such as the compulsory notifica-tion of pulmonary phthisis, the establishment of sanatoriums for the treatment of pulmonary tuberculosis among the poor, improvements in school hygiene, etc. It was also resolved that the use of the x rays, radium and Finsen light treatment. should be in the hands of the medical profession alone, or under its direct supervision. It was also resolved that the future provision for the care and treatment of the insane in. Australasia should be based upon a recognition of the threefold. requirements of (1) up-to-date mental hospitals; (2) farm and industrial colonies; and (3) benevolent asylums. That there industrial colonies; and (3) benevolent asylums. was imperative need for the establishment in the different.