fore, to say with certainty what would be the action of school-masters, in respect to the study of Greek, if they were left to act freely. But there are evident considerations which point to the gradual subordination of Greek."

I have ventured to submit that there are, having regard to the special needs of medical students, considerations which point to the necessity of the subordination of Latin.

I will for a moment refer to the present status of education in the case of those who desire to become, and in that of those who do become, medical students. In 1889, the College of Preceptors received 362 candidates at their "special medical students' examination." Of these 362, only 131 passed—that is, were qualified to become medical students. And yet, anyone who could get only 37 per cent. of the marks, would have got through. These figures are taken from a table in the General Medical Council's minutes, 1890. This table suggests some very serious reflections. The rejected may have been incurable dolts or idlers; some of them probably were. But all? On the other hand, they may have been well educated, but not on the lines laid down by the General Medical Council. In that case I for one regret that they should have been excluded. Thirdly, they may have been the victims of bad schools. In that case the conclusion is that their time and their fathers' pockets should be protected by Government inspectors armed with large powers. A fraudulent bankrupt or a bogus company promoter is much less injurious to the public than the proprietor of a bogus school, if such a person exists.

As regards "English," I will only quote a resolution, passed by the General Medical Council on June 3rd, 1890: "That the President be requested to communicate with the bodies holding preliminary examinations recognised by the Council, calling their attention to the great deficiency in the education in the English language, as proved by the deficiency in knowledge of English shown by many medical students."

The evidence as to Latin is equally authentic. It is to be found in a volume published in 1888 by the General Medical Council, and on sale at their office. It is entitled "Inspector's Reports and General Commentaries on the Final Examinations in Medicine, Surgery, and Midwifery conducted by the several Licensing Bodies in the United Kingdom, together with Remarks thereon by the Bodies inspected."

The Inspector in Medicine turned his attention in some instances to the Latin in which prescriptions were written. In no single instance did he commend it. Some of his criticisms follow. It is not necessary to parade the names of the bodies, though they are all given in the volume referred to above: Body A. "In as far as the prescriptions were given in Latin, this was often very inaccurate, notwithstanding the fact that all the candidates (29), with three exceptions, were graduates in arts."

Body B: "As regards prescription writing, the same point falls to be noticed as has been the subject of remark elsewhere. Correct, full, and unabbreviated Latin has not been at the command of many of the candidates—of any at least of those whose papers I read. The two examples quoted hereafter—and many other instances might be given—show to what depths ignorance in this matter may go. A very desirable improvement would be not to require it. It is surely out of date now, and the more reasonable course would be to let prescriptions be written as they would be sent to a chemist or dispensary."

Body C. "It may be added that the prescriptions were of the usual varied quality both as to matter and form. The directions to the patient were required to be in English, the other parts of the prescriptions in Latin, and without abbreviations."

Body D: "The prescriptions in unabbreviated Latin without symbols were of the usual quality."

In his "General Commentary," the Inspector says: "The writing of prescriptions in Latin without abbreviations has been referred to more than once as to individual examinations. It may be repeated here that the Latin is so generally incorrect that it would be well to depart from this somewhat antiquated method, and allow candidates to concentrate their attention on the therapeutic side of their prescriptions."

No single licensing body challenged the justice of these criticisms. The Examination Committee of the General Medical Council must be taken to endorse them in the following paragraph of their Report to the Council itself: "Many candidates appear to be imperfectly instructed in Latin prescription writing, and the examination on it appears to be inadequate in some boards. The frequent occasions also upon which fault is found in respect of the Latin in which these prescriptions were couched, and this especially so

in the instance of university students, as also the complaints about bad spelling, point to what must be considered as evidence of the unsatisfactory character of the preliminary examinations which these candidates must have passed. Your Committee directs this also to the consideration of the Education Committee."

Instances are given by the Inspector. They show ignorance of common classical words, cases, genders, and words, prepositions, verbs, etc., and cannot be disposed of by saying that all prescriptions are written in a sort of dog-Latin. It is impossible to conceive that the perpetrators of them have received any of those benefits which accrue from a Latin education. I have no compunction in saying that the time spent in acquiring an ignorance of Latin might have been better spent—for example, on science—for this reason, if for no other, that the so-called "Latin education" comes to a final stop at this stage, whereas science education would go on, with a chance of making up for early deficiencies.

I deserve neither praise nor blame for endeavouring to put a stop to Latin education, for the simple reason that I have not done so. What I have done is to suggest that Latin should not be compulsory. In that case parents would give their sons the benefits of a Latin education if they believed in it; and any competent student would be able to acquire by 15 that moderate knowledge which the Council requires. He would also be able to use this knowledge as a means of passing his preliminary examination. If, on the other hand, preliminary education is still to go on to the age of 17, the Council could and ought to raise the standard very much indeed. It is not to the interest of classical education in the long run that a number of persons should pretend or be supposed to have had it when they have not. It argues very little faith in the advantages of a classical education to say that as soon as it ceased to be compulsory it would at once fall into abeyance. I for one do not believe so. But, suppose it to be true, it cannot be right for a body not comprising a single educational expert to force its views upon an unwilling public at this stage of the world's history. I believe, then, that were my suggestion adopted it would tell, not against, but very much in favour of real classical education.

NOTES

ON

SOME GERMAN UNIVERSITIES.

By WALTER K. SIBLEY, M.B., B.C.CANTAB.,
Assistant-Physician to the North-West London Hospital.

II.—THE UNIVERSITY OF BERLIN.

(Concluded.)

The Augusta Hospital.—Professor Küster.—Professor Ewald: his *Work on the Digestive Organs.*—Nursing.—*The Friedrichshain Hospital.*

THE Augusta Hospital was founded in 1866, at the instigation of the Empress Augusta, as a branch institution of the Women's Patriotic Association, and it was primarily intended for the training of nurses. The hospital, which was designed by Dr. Esse, the late director of the Charité Hospital, is built on the barrack plan, being the first of the kind erected in Germany. It contains 200 beds, including several small private wards for paying patients, together with an out-patient department. Medical and surgical cases of all kinds, except syphilis and skin diseases, are admitted; children are also received, there being a special department for cases of diphtheria. The medical staff consists of a physician and a surgeon, who give their services gratuitously. The surgeon has three assistants, and the physician two; there are also students who act as clerks and dressers. The report for 1888 states that during the year 2,152 patients were treated in the wards, of whom 1,265 were surgical. The number of major operations performed was 829, the mortality of this department being 5.52 per cent., the lowest yet attained since the foundation of the hospital. Among the deaths there were 2 from sublimated poisoning, and 2 from sepsis following operation. Fifty-two cases of diphtheria were treated with a mortality of 46.17 per cent. In the medical department 888 patients were treated, including 35 cases of enteric fever, of whom 26 are returned cured; 23 of pneumonia, 21 cured, 11 proved, and 1 carried on to the next year; 174 of phthisis, with a mortality of 16.6 per cent. Next in frequency was rheumatism, of which there were 41 cases all cured except 2, which were ma e

out-patients. The principal remedies employed were salol, salicylic acid, benzoic acid, and their salts. Some interesting experiments have been made with regard to the tubercle bacillus. The dust from several Berlin hospitals and private dwellings has been collected and examined, and while in the dust from some hospitals bacilli were found, that collected from the Augusta Hospital was proved free from contagious power by inoculation experiments.

The surgeon to the hospital is Professor Küster. On the medical side Professor Senator has been succeeded by Professor Ewald, well known by his writings, especially his work on the digestive organs. He is also editor of the *Berliner klinische Wochenschrift*. Professor Ewald, in examining the condition of the oesophagus, attaches great importance to the sounds heard with the stethoscope placed on the pit of the stomach. The sounds which accompany and follow the act of swallowing are normally two, viz., the first, *Spritz-geräusch* (syringe gurgle); and the second, or *Luft-geräusch* (air gurgle). The first has no diagnostic value and is often absent in cases of hysteria, etc. The second is of great significance, and when present denotes a normal contraction of the walls of the oesophagus; the absence of the sound signifies a stricture or obstruction of the middle or lower third of the oesophagus. In the operation of gastrostomy for oesophageal stricture he recommends that a very small opening should be made into the stomach with the cautery point, and a fine cannula inserted. The fistula afterwards enlarges sufficiently of itself. With regard to the gastric secretion, Ewald states that the secretion of hydrochloric acid is not a continuous act, and that there should be no free hydrochloric acid present in the stomach, unless it be reflexly excited by the presence of food in the mouth. Ewald speaks of three stages of normal digestion, as revealed by the accompanying substances found in the stomach: (1) Lactic acid; (2) hydrochloric and lactic acid, and (3) hydrochloric acid alone. This third stage should occur after one hour's digestion. Before removing the contents of the stomach, a "*Probe-frühstück*" (sample breakfast) is given, that is to say, a small definite quantity of white bread, eggs, etc., is given on an empty stomach, and, after a fixed interval, the contents are removed and examined. If, after removal, the contents of the stomach reveal the presence of an acid by reaction with phenolphthalëin, it must be determined if this be a free acid or only an acid salt. This is most readily done with one of the aniline colours, which change if a free acid be present. Thus fuchsin becomes yellow; methyl violet, blue, etc. Ewald has an elaborate set of tables of the percentages of various substances necessary to give the reactions. The best tests for free hydrochloric acid are tropæolin and Günzburg's reagent phloroglucin-vanillin. The routine examination of the contents of the stomach to determine the amount of acid present is carried out as follows: 10 cubic centimètres of stomach contents are taken and two drops of phenolphthalëin added thereto in a saucer. To this a standard 1 per cent. salt solution is added drop by drop from a graduated tube till the colour changes to red. The percentage of acid present is determined by the amount of salt solution added, the normal acidity being between 40 and 60 cubic centimètres of this graduated tube. In ulcer of the stomach a great excess of acid is usually present. Kussmaul pointed out that in carcinoma of the stomach the hydrochloric acid is deficient, and this appears to be also often the case in anæmia, Addison's disease, and most chronic affections. In most cases of carcinoma there follows, as a secondary degeneration, an atrophy of the mucous membrane, which lessens the secretion of hydrochloric acid. Lactic acid appears in the stomach during the first stage of digestion, very shortly after a meal, and before the hydrochloric acid appears; it normally disappears in about an hour. If present after this it denotes pathological changes—chronic gastritis, atrophy, etc. The most convenient test for this is Uffelmann's with perchloride of iron, which, with lactic acid, becomes yellow. Butyric and sebaic acid are not normally present in the stomach; they give a faint brown colour with Uffelmann's test.

With regard to pepsin and peptones, four are recognised—albumin, syntonin (parapeptone), propeptone, and peptone. These are analysed as well as the acids, the result often helping and sometimes settling the diagnosis according to their increase or decrease, as compared with the normal standard.

The absorptive power of the stomach is determined by giving iodide of potassium internally; this should be found in the saliva in from fifteen to twenty minutes. To ascertain the motor power of the viscus, a capsule of salol (1 gramme) is given, and the urine

tested with perchloride of iron for salicylates. Another less convenient method is to give a definite quantity of oil by the mouth, and after a given interval remove the contents of the stomach and ascertain the quantity of oil still present.

Ewald also maintains that the intestines cannot long carry on the whole digestive process when the stomach is entirely disabled, but that marked changes soon arise, and he believes that pernicious anæmia is sometimes primarily of gastric origin, atrophy of the mucous membrane often following chronic catarrh.

The nursing in the Augusta Hospital is in the hands of the "*Frauen-Lazareth-Verein*" (Ladies' Nursing Association), and the nurses are all ladies of noble birth; the dresses are much the same as those used in our hospitals. The objects of this Association are (1) in war, the military administration of the nursing of wounded and sick soldiers, and their support by well-regulated private assistance; (2) in peace, the education of volunteer and paid nurses and the management of infirmaries by the collection of information as to improvements in hospital administration. The Association also keeps nursing *personnel* and *matériel* ready for active service in case of need. The Association has built an establishment for the education of nurses in the neighbourhood of the Augusta Hospital.

One of the finest hospitals in Berlin is that at Friedrichshain in the north-eastern outskirts of the town. It was opened in 1874, and is constructed entirely on the pavilion system. It cost £235,925.

The main building contains in the basement heating and disinfecting apparatus, and on the ground floor are the reception rooms, administration department, dispensary, consulting rooms, together with a library for the medical staff and a room for the attendants. Upstairs are the private apartments of the directors. Behind this block are situated twelve isolated pavilions at a considerable distance from one another. There are four two-storied pavilions, each with 64 beds for the medical division, and two two-storied pavilions with 64 beds, and four one-storied ones with 32 beds for the surgical department. There are also two one-storied isolation pavilions for infectious diseases (typhus, scarlet fever, etc.), each with 44 beds. In 1886 a special pavilion for diphtheria, with 26 beds, was erected.

Six of the pavilions are for men and six for women, the thirteenth being for children. Each pavilion forms a complete hospital in itself, and contains on each floor a ward with 28 beds, small wards with one or two beds for special cases, a day room, together with adjacent rooms and apartments for the resident sisters, attendants, etc. In the isolation pavilions there are only eight beds in each ward.

The ground floor is paved with special tiles manufactured at Mettlah, the upstairs flooring being of wood; the walls are oil-painted. The beds consist of an iron framework with straw sacking, Indian fibre mattresses, and horsehair pillows.

In each pavilion there is a medium pressure hot-water apparatus, the pipes of which are laid for the greater part in heating chambers under the ground, by means of which the ingoing fresh air is warmed. In the other buildings the air is heated by means of *calorifères* in the basement.

The diphtheria pavilion is provided with a low pressure steam heating apparatus, so that, if need be, steam can be freely admitted into the wards. The foul air is drawn out through suction chimneys, which are heated in winter by the warm air of the wards and in summer by the hot water from the baths. For the purpose of more thorough ventilation the double windows are provided with perforated overpanes, and the lattice-valve system is used, besides Firsi's ventilating system, which was applied here for the first time. In 1882 an operating theatre, together with a consultation room, was built, the fittings of which consist chiefly of iron and glass.

Opposite the main building is the administrative block, together with one, fitted up with steam, for washing and cooking, bath-houses, and deadhouse with two *post-mortem* rooms.

The number of beds in general use is 620. Of these, 572 are for adults and 48 for children; the number has been increased to 700 in times of emergency.

The expenses for the year 1888 amounted to 602,400 marks (£30,120). The average number of patients daily was 611, the amount paid by patients being 1.75 marks (1s. 9d.) for adults and 1.25 marks (1s. 3d.) for children.

The director of the medical department is Professor Fürbringer and of the surgical Professor Eugen Hahn. There are also 11 assistants, 2 dispensers, 45 nurses, 29 male attendants, and 12 probationers.

There are no regular courses of lectures at Friedrichshain, but post-graduate vacation courses are given by Professors Fürbringer and Hahn; these are attended by numbers of qualified men.

THE ROYAL COLLEGE OF SURGEONS AND ITS FELLOWS AND MEMBERS.

In anticipation of the meeting of Fellows and Members of the College on Thursday, November 6th, at 3 P.M., the Council have issued their usual report. It contains a record of their transactions during the collegiate year from July, 1889, to July, 1890. The financial details are noticed elsewhere. Much is stated throughout this report as to items concerning the numerous alterations and extension of buildings upon the College premises. The estimate for the new museum amounts to £11,000, whilst the new small museum for casts, drawings, etc., will entail a considerable outlay. The entire question of museum management is, perhaps, the most satisfactory of all problems connected with the College, and as the collection is constantly increasing, and many of the specimens are crowded up at present, an enlargement of the premises is clearly desirable.

Another subject that takes up much space in the report, and must be passed over as not purely a College of Surgeons question, is the extension of the Examination Hall buildings. Akin to this subject is the action of the joint Committee on the educational and scientific uses to which the new building on the Embankment is to be applied. It was agreed that the "scientific purposes" be, in the first place, the investigation and exposition of such branches of science connected with medicine and surgery as the two Colleges may from time to time determine. Rules for the use of the laboratories were drawn up, and after due notice Dr. German Sims Woodhead was appointed Director of the Laboratories. The newly-appointed director was then officially consulted as to the purchase of apparatus and instruments for chemistry, physiology, bacteriology, histology, and photographic purposes. These recommendations were adopted, and it was reported in June that permission to work in the laboratories had already been granted by the Committee to four applicants, one of whom had already set to work.

Another matter, of which much is said in this report, is the Diploma of Public Health, but this subject is a purely joint affair between the two Colleges, and is, moreover, well known to our readers. The public health question was considered by a joint committee of management, which also took into consideration the very important subject of the time for professional study, and recommended the extension of that important period from four to five years. More joint matter, as it may conveniently be called, was transacted in respect to the study of chemistry and gynecology, and also in reference to the scheme for the reconstitution of London University. Of considerable interest is the report of Lord Camperdown's Committee on the pay, status, and conditions of service of medical officers of the army and navy. A committee reported on that report, and the President accordingly addressed a letter to the Secretary of State for War, wherein it was stated that the withholding of strictly defined army rank and titles from medical officers was unjust and very prejudicial to the service. Lastly, there is a report on the Father Damien Fund, and letters of condolence to the families of Mr. Haynes Walton and Mr. Alexander Shaw, and proceedings which ended in the removal of the Membership of a man convicted of theft. Thus the report, though full of matter of interest, scarcely touches on the main subjects in dispute between the Council and its Fellows and Members.

Under the heading "Meeting of Fellows and Members," in the table of contents, the reader is guided to three short paragraphs to the effect that the President, after the usual formalities, received the resolution carried at the meeting of Fellows and Members, November 7th, 1889. That resolution, it must be remembered, was: "That this meeting of Fellows and Members of the Royal College of Surgeons of England, having considered the Report of the Council, dated October 17th, 1889, is of opinion that immediate steps should be taken to forward the introduction early in the next parliamentary session of a Bill to amend the constitution of the College, so as to secure to the Members a just representation in and upon the governing body of the College." The Fellows and Members will doubtless insist that in future a little more time will be devoted to their direct requests. Their opinion on the important joint matters above noticed might, perhaps, have been consulted.

CALENDAR OF THE ROYAL COLLEGE OF SURGEONS OF ENGLAND.

THE annual Calendar has just been published by the Council of the College; it contains the names of 1,153 Fellows of the College, of whom 773 obtained the Fellowship by examination, 13 were elected as Members of twenty years' standing under Section 5 of Chapter 15 Victoria, and 2 *ad eundem*. It also contains the names of 17,345 Members and 800 Licentiates in Midwifery (the examination for this licence, which had been suspended since 1876, has now been abolished). The Licentiates in Dental Surgery are stated to number 703. Holders of the diploma of Public Health (granted by the Royal Colleges of Physicians and Surgeons) number 45.

The Examiners in Elementary Anatomy and Physiology, appointed in conjunction with the Royal College of Physicians, under the scheme for an Examining Board in England, are elected annually. There have been four examinations during the past collegiate year; 712 candidates presented themselves in Elementary Anatomy and Physiology, of whom 483 passed in both subjects, 90 in Elementary Anatomy, 77 in Elementary Physiology, 62 candidates were referred in both subjects; 80 candidates presented themselves in Elementary Anatomy, 66 of whom passed; 108 candidates presented themselves in Elementary Physiology, of whom 83 passed. The fees received from candidates for this examination amounted to £4,068 4s. 6d., the examiners receiving as fees £599 5s.; 723 candidates presented themselves in Chemistry, 529 passed and 194 were referred; 890 presented themselves in Materia Medica, 509 of whom passed and 381 were referred.

The Examiners in Anatomy and Physiology, appointed in conjunction with the Royal College of Physicians, under the scheme for an Examining Board in England, are elected annually. They have conducted the "Primary" Examination, under the old regulations, as well as the "Second" Examination of the Examining Board, and have held during the year four examinations, at which 794 candidates presented themselves in Anatomy, 526 of whom passed and 268 were referred; 906 candidates presented themselves in Physiology, of whom 537 passed and 369 were referred. The fees received for these examinations amounted to £3,375 16s., the examiners receiving in fees £1,526 15s.

The Board of Examiners in Anatomy and Physiology for the diploma of Fellow consists of nine members, annually elected by the Council from the Fellows of the College, and has held during the past collegiate year two examinations; 185 candidates presented themselves, of whom 64 passed and 121 were referred. The fees received from this examination amounted to £1,228 10s., the Board receiving £828 in fees.

The Court of Examiners consists of ten members elected by the Council for five years from the Fellows of the College. They conduct the Third or Final Examination in "Surgery" of the Examining Board, as well as the Pass or Final Examination under the old regulations, and the Pass or Final Examination for the Fellowship. During the year the Court has held two examinations for the Fellowship and four for the Membership. At the former there were 81 candidates, 44 of whom passed; 5 being referred for one year and 32 for six months. For the Membership, there were 805 candidates, of whom 471 passed and 334 were referred. The fees paid by candidates amounted to £7,377 15s. 6d., and the fees paid to the Court of Examiners and the Examiners in Midwifery amounted to £5,246 19s. The Examiners in Medicine under the scheme are elected by the Royal College of Physicians; 536 candidates presented themselves, of whom 377 passed and 159 were referred. The Examiners in Midwifery are appointed in conjunction with the Royal College of Physicians; 569 candidates presented themselves, of whom 406 passed and 163 were referred.

The Board of Examiners in Dental Surgery has held two meetings for the examination of 58 candidates, 32 of whom received the diploma. The fees paid amounted to £336, of which the Board received £243 12s.

The receipts from all sources during the collegiate year amounted to £37,871 12s. 9d., the largest receipt being from fees for the diplomas of the College, namely, £18,653 16s. 6d.; the next largest being from sale of stock, £10,544 4s. 10d.; incidental receipts, that is, hire of rooms, sale of calendars, catalogues, questions, etc., £393 9s. 10d. Receipts from house property and investments, £7,115 13s. 9d.; from trust funds, £253 1s. 11d.; fees retained for candidates, £740 5s.; balance at bankers, Midsummer day, 1889, £171 0s. 11d.

The expenditure for the year amounted to £37,159 10s. 2d. leaving a balance of £712 2s. 7d., the largest item being for fees to examiners, £8,441 11s.; extension to College premises, £5,185 15s. 8d.; half expenses Examination Hall and laboratories, £1,158 0s. 9d.; salaries, wages, and pensions for officers and servants in the three departments—office, museum, and library—amount to £4,992 12s. 2d.; rates, taxes, and insurance absorb the sum of £1,408 2s. 7d.; alterations and repairs, £1,254 3s. 10d.; extraordinary expenses—conservator, £106 14s. 4d.; furniture and fitting, £224 18s.; purchase of books, etc., for the library, £838 19s. 8d.; fees returned to candidates, £770 10s.; law expenses, £286 14s. 5d.; half expenses Savoy estate, £6,825. Under miscellaneous items—fuel, light, printing, stationery, trust funds, lectures, etc.—about £2,700 appears to have been expended.

ASSOCIATION INTELLIGENCE.

LIBRARY OF THE BRITISH MEDICAL ASSOCIATION.

MEMBERS are reminded that the Library and Writing Rooms of the Association are now fitted up for the accommodation of the Members, in commodious apartments, at the offices of the Association, 429, Strand. The rooms are open from 10 A.M. to 5 P.M. Members can have their letters addressed to them at the office.

BRANCH MEETINGS TO BE HELD.

SOUTH-EASTERN BRANCH: EAST AND WEST KENT DISTRICT.—A conjoint meeting of these Districts will take place on Thursday, November 20th, at Maidstone; Mr. A. H. B. HALLOWES in the chair. Gentlemen desirous of reading papers or exhibiting specimens are requested to inform one of the District Secretaries, Dr. TYSON, Folkestone, or A. W. NANKIVELL, F.R.C.S., St. Bartholomew's Hospital, Chatham, not later than October 31st, 1890. Further particulars will be duly announced.—W. J. TYSON, A. W. NANKIVELL, Honorary Secretaries of the Districts.

LANCASHIRE AND CHESHIRE BRANCH.—The intermediate meeting of the Branch will be held in Macclesfield early in November. Members desirous of reading papers, making communications, or showing cases are requested to write to the Honorary Secretary at once, so that the complete programme may go out with the circular convening the meeting.—CHARLES ED. GLASCOTT, Honorary Secretary, 23, St. John Street, Manchester.

OXFORD AND DISTRICT BRANCH.—The next meeting will be held on Friday October 31st, at 3 P.M., in the Radcliffe Infirmary. Members who intend to read papers or show cases are requested to inform the Honorary Secretary on or before Tuesday, October 21st.—W. LEWIS MORGAN, Honorary Secretary, 42, Broad Street, Oxford.

STAFFORDSHIRE BRANCH.—The seventeenth annual general meeting of this Branch will be held at the Station Hotel, Stoke-on-Trent, on Thursday, October 30th, at 3 P.M. An address will be delivered by the President, Mr. John Alcock.—GEORGE REID, Honorary Secretary.

WEST SOMERSET BRANCH.—The autumnal meeting of this Branch will be held at the Railway Hotel, Taunton, on Thursday, November 6th, at 5 o'clock. Dinner (5s. a head, exclusive of wine) at 5.30. A discussion will take place on the Use of Ergot in the Second Stage of Labour. The titles of any paper or communication to be brought before the meeting must be sent to W. M. KELLY, M.D., Honorary Secretary, Taunton.

NORTH OF IRELAND BRANCH.—The autumn meeting of this Branch will be held in the Royal Hospital, Belfast, on Thursday, October 30th, at 4 P.M. Gentlemen wishing to read papers, show specimens or patients, will kindly communicate, as early as convenient, with the Honorary Secretary, JOHN W. BYERS, M.D., Lower Crescent, Belfast.

SOUTH WALES AND MONMOUTHSHIRE BRANCH.—The next Branch meeting will be held at Abergavenny on Thursday, November 6th. Members wishing to read papers, etc., should send titles to Dr. Sheen before the 22nd inst.—A. SHEEN, Cardiff, and D. A. DAVIES, Swansea, Honorary Secretaries.

STIRLING, KINROSS AND CLACKMANNAN BRANCH.—The autumn meeting of this Branch will be held in Stirling, on Tuesday, October 28th. Dr. Macpherson will exhibit specimens of Cortical Cell Degeneration in various forms of Insanity. Members desirous of exhibiting cases, specimens, etc., are requested to communicate with the Honorary Secretaries, C. J. LEWIS and J. PEAKE.

MIDLAND BRANCH: LINCOLNSHIRE DISTRICT.—A meeting will be held at the Guildhall, Boston, on Thursday, October 23rd, at 3 P.M. The President, Mr. Pilcher, invites members to join him in a run in the steamer from the Doughty Quay to the Witham Outfall, at 12.15 P.M.; on the arrival of the trains. Lun-

cheon will be provided at the Guildhall at 2 P.M. Tickets, 3s. 6d. each exclusive of wine. Members desirous of reading papers or exhibiting cases are requested to communicate with W. A. CARLINE, M.D., Honorary Secretary and Treasurer.

THAMES VALLEY BRANCH.—The next meeting will be held at Richmond, on Wednesday, November 5th. Members willing to read papers or exhibit cases are requested to communicate with the Honorary Secretary, CHARLES C. SCOTT, M.B., St. Margarets, Twickenham.

SOUTH-EASTERN BRANCH: EAST SURREY DISTRICT.—The autumn meeting of this District was held at the White Hart Hotel, Reigate, on Thursday, October 9th, Dr. ROBERT JONES, Resident Physician and Superintendent, Earlswood Asylum, in the chair.

Conjoint Meeting of East and West Surrey Districts.—After the minutes of the previous meeting had been read and confirmed, a communication from the Honorary Secretary of the West Surrey District was read, suggesting that the meeting to be held in March, 1891, be a conjoint meeting of the East and West Surrey Districts, and that the President of the Branch, Dr. Sells, of Guildford, be requested to preside. After some discussion as to the most convenient place for the meeting, it was proposed by Mr. E. H. GALTON, seconded by Dr. NAPPER, and carried unanimously, that it be held at Upper Norwood.

The Midwives Registration Bill.—The CHAIRMAN OF THE PARLIAMENTARY BILLS COMMITTEE having been requested to explain to the meeting the provisions of the Midwives Bill, gave a full account of its history and details. Dr. HOLMAN proposed the following resolution, which was seconded by Mr. E. H. GALTON, and carried unanimously:—"That the best thanks of this meeting be given to the Chairman of the Parliamentary Bills Committee, for his able explanation of the provisions of the Bill for the Better Education and Regulation of Midwives, and that this meeting approves in general terms of the provisions of the Bill." On its being represented to the meeting that communications had been received by the Honorary Secretaries, and by the Honorary Secretary of the Branch, from Dr. R. RENTOUL, of Liverpool, relative to the Midwives Bill, inviting the meeting to enter into discussion on the subject, it was proposed by Mr. HALLOWES, seconded by Dr. PARSONS, and unanimously resolved:—"That this meeting, in the absence of any communication from the Council of the Association or the Parliamentary Bills Committee, or the Council of the Lancashire Branch, declines to discuss the questions raised by Dr. Rentoul."—Dr. WITHERS MOORE (President of the Council), Dr. JONES MORRIS (Secretary to the North Wales Branch), Dr. HOLMAN, Dr. DUNCAN, and other speakers, strongly condemned the habit of individual members of other Branches introducing subjects for discussion directly, instead of first obtaining the opinion of their own Branch on the matter, and laying this before the Council.

Communications.—Mr. BERRIDGE showed a Case of Unreduced Dislocation of the Hip-joint of eighteen months' duration, and invited the members present to give their opinions as to its treatment.—The CHAIRMAN read a paper on Septicæmia in Birds, by Dr. R. H. CLARKE, who was unfortunately absent owing to illness. A series of photographs and microscopic slides illustrating it were exhibited.—Mr. MALCOLM MORRIS described the Pathology of Eczema in its Relation to Germs, and gave a demonstration of the antiparasitic modes of treatment suitable for its various stages, exhibiting to the meeting Dr. Unna's preparations and others.—The CHAIRMAN, Dr. HOLMAN, Mr. HALLOWES, and Mr. E. H. GALTON made remarks on the subject.—Mr. BERRIDGE read a paper on the Treatment of Acute Abscess, recommending free incision, but not before the abscess had matured, and, after well washing out the cavity, thorough drainage with a tube of large calibre.

Dinner.—After the meeting twenty-five members and visitors, including Sir John Puleston, M.P., Sir Thomas Lennard, and Mr. Ernest Hart, Chairman of the Parliamentary Bills Committee, dined together.

NORTH OF ENGLAND BRANCH.

The autumnal meeting was held at the White Swan Hotel, Alnwick, on Tuesday, October 7th, at 4 P.M.

Pleuro-pneumonia and Empyema.—Dr. DRUMMOND read a paper on the connection between croupous pneumonia and empyema, in which he sought to prove that, with rare exceptions, cases of ordinary empyema were the result of an attack of pleuro-pneumonia.—This led to a good discussion, in which the PRESI-