Dr. Macartney protested against both.

It was then proposed that two classes of examiners should be chosen: the *permanent* or resident examiners, and the non-resident; the former to be chosen by concours, the latter by the councils.

Mr. Farr explained that the former would be wholly occupied in their vocation, and would not be allowed to engage in other duties. They would be a consulting board in matters relating to public health, as in the testing of poisons, in questions of medical jurisprudence, &c.

Dr. Grant could not perceive the necessity of disconnecting the examiners from other employments than those specified. They would be more likely to be qualified for their office by a life of active employment, as in teaching, than by one of the character in question.

Dr. M. Hall thought they would have occupation enough.

Dr. Macartney thought the concours would form a bad corps of examiners. He could not see why one part of the board should be chosen differently from the other.

Dr. R. D. Thomson supported the appointment of examiners, by concours, in a long speech.

Dr. Webster alluded to the University of London, in exemplification of the present system of appointing examiners. The concours would have provided a more efficient board.

Dr. Forbes said, the fault was owing to the mode in which the senate of the university was appointed; they were irresponsible, and they chose examiners from their own body. Such would not be the case under a representative form of government.

Mr. Carter thought it might be left to a representative council to settle its own mode of appointing its examiners. The conference need not decide the question.

Dr. Webster thought the principle of the "concours" should be acknowledged; and it having been proposed that *part* of the examiners should be chosen by concours, there appeared

<i>For the motion.</i>	<i>Against.</i>
Dr. Webster.	Dr. Grant.
Dr. Hall.	Dr. Forbes.
Dr. Thomson.	Dr. Macartney.
Mr. Farr.	Mr. Ceely.
Dr. Davidson.	Mr. Carter.

Dr. Forbes thought the concours decidedly applicable to the case of lecturers, but not of examiners; it was also well adapted to young men at college, but would not be submitted to by persons established as first-rate practitioners; they would fear that their reputation might be injured by defeat: there were many qualifications for an examiner which the concours could not ascertain, such as temper, judgment, &c. He did not think this method was suited to this country.

The meeting was adjourned until Tuesday, at a quarter before four o'clock.

FOREIGN MEDICAL LITERATURE.

CLINICAL REMARKS ON AMAUROSIS.

BY M. PETREQUIN.

M. PETREQUIN, surgeon to the Hotel-Dieu of Lyons, has published some practical observations

on amaurosis, in the "Annals of the Society of Bruges." The author distinguishes several species of amaurosis, and applies to each a peculiar mode of treatment.

The first species of amaurosis described by the author is the *asthenic nervous* form; it is the simplest, but not the most common species; is usually met with in weak or debilitated persons, and is caused by the prolonged action of light, by distress, age, narcotics; in a word, by any debilitating agency, either local or general. The progress of the disease is slow, and it is unattended with pain; the sight gradually gives way: there is a sensation of cloudiness with dilatation of the pupil, and diminished contractility of the iris, dulness of countenance, &c., but without any symptoms of irritation or congestion. Although writers generally agree in regarding this as a dangerous form of amaurosis, the author assures us that he has employed the following means with very great success: 1st. Strengthening diet, with preparations of iron, bark, &c.; 2nd, Stimulating frictions with the tincture of nux vomica; aromatic fumes, blisters on the forehead, dressed with strychnine; electricity, &c.

M. Petrequin always applies strychnine by the endermic method. He excites a blister by means of the ammoniacal paste; then removes the epidermis, and powders the surface with a mixture of strychnine and any convenient vehicle. He has also found it advantageous to rub the temples and forehead with an alcoholic tincture of nux vomica, prepared by treating four ounces of the nux with a quart of brandy. The author relates three cases of asthenic amaurosis cured by the above means. In the last, which depended on a general state of debility, the patient was cured in twenty-six days, although he had been six months ill, and had tried without effect every other mode of treatment. Some cases of amaurosis produced by the action of lightning, and also cured in the same way, are related.

The second species of amaurosis, according to M. Petrequin, is the *verminous*. This form is rare, but the author cites some examples. In one case, that of a girl, twelve years of age, the loss of sight was restored under the use of vermifuge remedies. In recent cases the amaurosis disappears as soon as the worms are expelled; but, in others of longer standing, the disease persists for some time, although its cause has been removed. The author next examines *traumatic* amaurosis. This species is usually attended by congestion, and should be combated at first with antiphlogistics and derivatives. It may afterwards assume the characters of asthenic amaurosis, and must then be treated by the means already noticed. The following examples are given by the author.

A man, twenty years of age, fell from the first story of a house; he was taken up with loss of consciousness and of vision of the right eye, with partial paralysis. Local and general bleeding, purging, &c., were employed. A few days afterwards the man had completely recovered from the effects of his fall, but vision remained imperfect. As there was no symptom of irritation or congestion, Mr. Petrequin resolved on employing the tincture of nux vomica. The diplopia was soon removed, but the tincture had been all used; and its employment was suspended: the diplopia re-

turned, but was again removed by the same means, and in three days vision was completely restored.

A man was severely wounded during the blasting of a mine; among other injuries, the sight was completely gone. Antiphlogistic remedies were employed in the first instance, and on the fourteenth day after the accident, he was affected with complete amaurosis on the right side, but on the left with partial loss of vision only. Leeches were applied to the temples, and purgatives were freely administered, and he recovered in a few days. Another patient, also wounded while blasting, suffered from amaurosis during six weeks, when frictions with the tincture of nux vomica were employed with the best effects; but care was taken not to have recourse to the stimulant treatment, until all symptoms of congestion and irritation had disappeared.

SYRUP OF THE IODURET OF IRON.

As soon as a solution of the ioduret of iron is exposed to the air, a portion of the iron becomes oxydized, and a corresponding portion of the iodine is disengaged; water saturated with sugar prevents the oxydation of iron, and should be henceforward employed in preparations of ioduret of iron. M. Beral give the following formula:—

Simple syrup, 200 scruples, solution of ioduret of iron (equal parts,) 1 scruple: mix. Each teaspoonful contains a grain of solid iodine.—*Journ. de Chim. Med.*

UNIVERSITY OF DUBLIN.

We are informed in the Dublin Medical Press of last week, that the following letter and document have been *privately* distributed to the members of both Houses of Parliament:—

"SIR—I have the honour to submit to your consideration the foregoing statement, *agreed to by the Board of the University of Dublin*, and the Professors of the School of Physic in Ireland. —I have the honour to be your most obedient servant,

"FRANCIS BARKER, M.D.
Regr. to the Professors."

"*Statement in reference to a draft of a bill to amend the laws relating to the medical profession in Great Britain and Ireland.*

"The defects connected with the licensing of medical practitioners appear to consist in an undue facility of obtaining testimonials, whether the certificates of lectures, or the diplomas of colleges; whereby persons of very different grades of real qualification are presented to the public as if they were equally qualified.

"The remedy for this evil will be found, not in framing a schedule for the purpose of fixing the number or form of such testimonials as a test of medical education, but in adopting means to secure a due correspondence between such vouchers and the facts they profess to authenticate.

"It does not appear how this object would be furthered by either of the measures contained in the drafts of acts of parliament proposed by Mr. Warburton or Mr. Hawes. An indiscriminate registry of practitioners would rather

increase the evil, by presenting to the public, under the guise of similar professional attainments, persons possessed of widely varying degrees of education and professional skill.

"The constitution of a medical senate or council, elected by a profession of medicine, surgery, and pharmacy at large, would probably lead to similar results, from the preponderance among the electors of the more numerous and less qualified members of the profession, who would then be rendered its managers and rulers.

"In the School of Physic in Ireland, connected with the University of Trinity College, and the College of Physicians, under the act, 40th Geo. III., ample means of instruction are afforded in the different branches and practical departments of the profession. A liberal education accessory to the study of medicine; strict moral conduct; and the test of having passed a rigid final examination, are required of candidates previously to their obtaining degrees in medicine.

"The attention of the governors of this school has been directed, for many years, to improvements in the system of medical education, and plans likely to conduce to this end, without overburthening the student, or introducing mere nominal lectures and attendance, have been adopted.

"Another plan has been proposed—namely, that of appointing extra-university or extra-collegiate assessors to attend at the examinations of candidates for degrees or diplomas in universities or colleges. On this plan it should be remarked, that such assessors, if *not* of the medical profession, will be incompetent judges of the value of questions proposed, or answers given, at examination. On the other hand, if such assessors *are* members of the profession, they will not present any greater obstacle to insufficient examination than at present exists; the examiners in the School of Physic in Ireland, acting under the obligation of an oath, all experienced in the work of examination, and each of them operating as a check on the remainder.

"Finally, it would appear that any practicable improvement in the system of licensing practitioners is obtainable by extending the powers of existing bodies, rather than by instituting a system of untried and doubtful experiments, which must impose additional burthens on the public.

"It is also to be borne in mind, that the benefits likely to accrue from any proposed measure are not to be estimated by its being approved of by a majority of colleges or of medical practitioners. A system might prove injurious to the medical profession, and to the public at large, and yet be favourable to the interests of those colleges or practitioners. Even in such a case, it is probable that it might receive their approbation, and be sanctioned by their authority."

REPORT FROM THE APOTHECARIES' HALL OF IRELAND.

The governor and company of the Apothecaries' Hall of Ireland, coinciding in the opinion generally entertained that a change is required