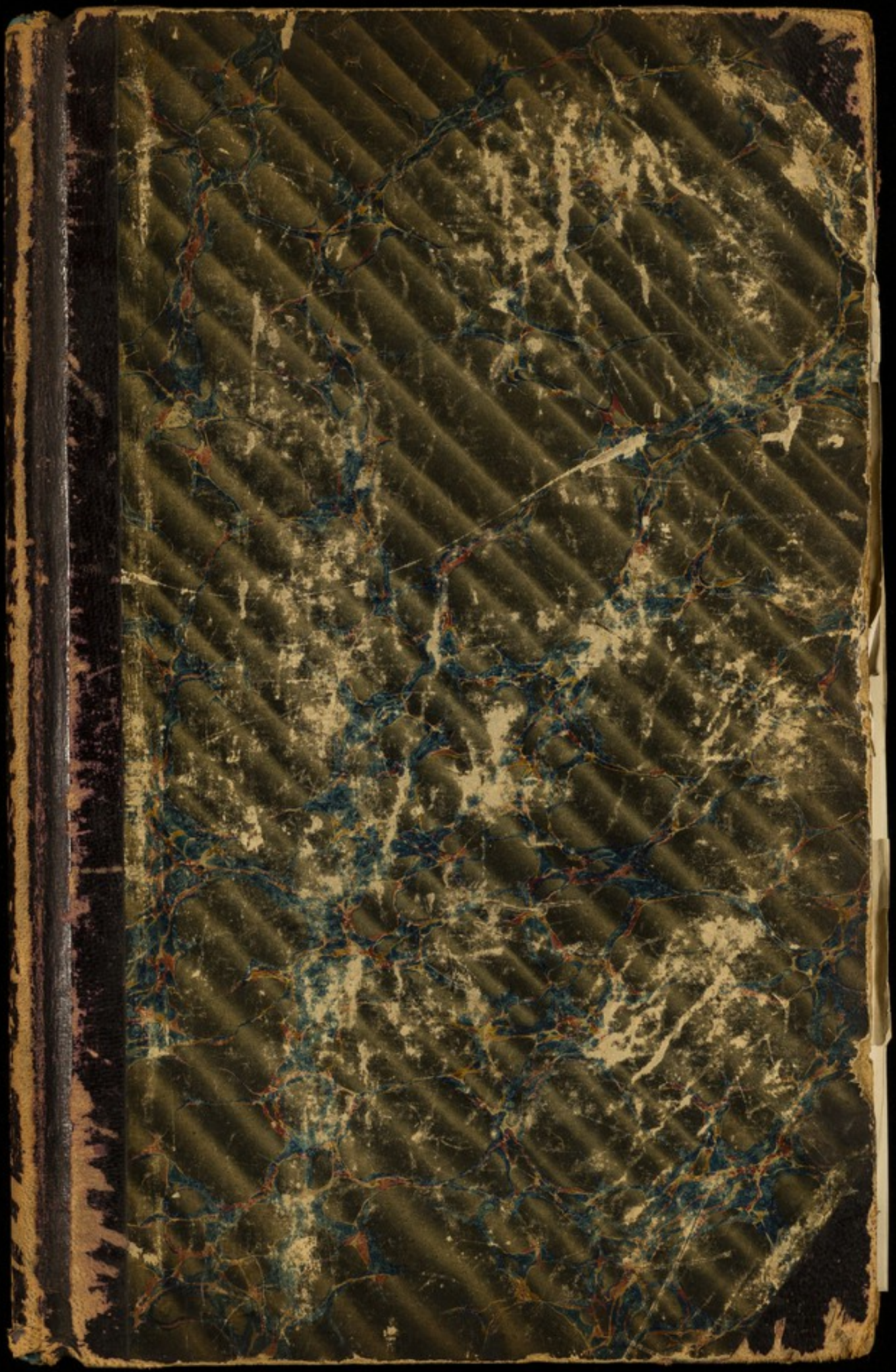

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which have not been Photographed.

Liver notes and clippings.

Liver abscess

Urea

If the abscess is in the liver. urea is almost entirely absent from the urine.
If the abscess is in the liver the urea is increased

---

after Dr. urea comes in quantity in the hepatic abscess

Aphorisms.

1. Bile acids in urine indicate obstruction to outward flow of bile in other words to mechanical obstruction in bile ducts.

2. Marked diminution of uric acid in urine - with liver trouble indicates impeded biliary concretion as the cause

Biliary Treatment of Hardy p. 290

℞ Calomelanos gr iii
Pulv Rhei gr iv
Magnesiæ gr xii
at bedtime.

This purges freely. then to maintain the active function of the liver

℞ Succi Taraxaci ℥j
Sodii Sulphatis ℥ss. gr xxx
Sodii Bicarbonatis gr x
Infusi Calumbæ ad ℥ss.
H.S. between meals in ½ pint water
Shake the bottle before using.
Further to aid the intestines which are necessarily sluggish
℞ Strychninæ Acetatis gr 1/36
Ext Belladonnæ gr 1/6.
Al. Socotrinæ gr 1/3
Ext. Taraxaci. gr iii
a pill after each meal.

TROPICAL ABSCESS OF THE LIVER.

By J. C. Day, M. B.,
Assam.

This peculiar condition of the liver is beyond doubt better understood to-day and treated more successfully than it was

few years back. There has always been great diversity of inion as to the real cause of these large single abscesses oc- ring in hot climates. Some have asserted that the abscess is result of portal infection from the ulcers found in the intes- es of dysenteric subjects, and to support this view, they give tances of the frequency with which hepatic abscesses follow acks of dysentery. Others assert, that the two diseases are tirely independent of each other, and that though many those who are attacked by dysentery in the tropics also liver abscess, yet cases of hepatic abscess occur in which re is no history of dysentery, and that are not followed by y dysenteric symptoms. I maintain there is a close con- ction between the two diseases, and although there may be ceptions, the rule is for abscess of the liver in tropical coun- es to be connected with a history of dysentery, and there little doubt the two are both due to the same cause, but the imary infection always takes place in the large intestines, the fection being carried by the blood from them to the liver.

Those liable to liver abscess are:—the intemperate, those posed to the effects of malaria, and the middle aged of all asses of residents in hot climates. Malaria certainly pre- sposes to liver abscess as well as dysentery, and this fact will supported by any medical man who has practiced his pro- ssion for any length of time in malarious parts of the globe. ow, although I have referred to tropical liver abscesses as ing single, they are frequently multiple. They sometimes ain an enormous size, and have been known to contain as uch as 6 to 7 pints of pus. Recent large abscesses have a gged inner surface, and have no semblance of living mem- ane. Small abscesses of the liver do not shew themselves y any objective sign, the pus from these abscesses often ecomes absorbed, and instances have been known where con- tracted cavities have been found filled with cretaceous matter, the remains of previous abscesses. When absorption does not take place, we find the liver becomes sensitive to pressure, and the abscess makes its way to the surface and creates peri- hepatitis.

Abscess of the liver may open into the duodenum, colon, or stomach, or by perforating the diaphragm enter the pleural cavity or the lungs. Thus, we may have the complication of pleurisy and pneumonia.

Abscess of the liver is generally usherd in by chilliness and gor, followed by a rise of temperature and symptoms of everishness. Pain and fulness in the right infra-maxillary region. There is generally a dragging sensation when the patient lies on either side. The bowels may be loose or consti- pated, the motions clay-colored and devoid of bile. There is hepatic dulness, with obvious bulging, and a sense of weight in the right side. Pain in the right side, which may extend up to the right shoulder, and which increases as the abscess approaches nearer the surface. As the case progresses, there is increased fever, night sweats, pain and dulness. Jaundice may or may not be present. Generally a short dry cough with increased and (where there is much enlargement upwards) laboured respiration from pressure on the lungs. The tongue

is dry and furred. Nausea and vomiting is a frequent symp- tom, and the fever settles down to a hectic type. Tropical abscesses are however sometimes insidious in their develop- ment, and where the patient is suffering from continued fever may never be suspected, till fully developed or till it shews itself by opening up by one of the channels mentioned, or till after death. I have known a typical case of the latter kind, where a previously healthy young European was attacked with enteric fever which proved fatal to him on the 26th day after his admission to hospital. At the *post mortem* I discovered a large abscess of the liver, in fact, the organ was a mere bag of pus. Yet, liver abscess was never previously suspected, and the patient had never complained of anything troubling him that suggested disease of the liver.

In the latter stages the liver becomes sensitive to pressure, the most painful spot indicating where the abscess points. The patient becomes extremely prostrated, and there is profuse perspiration. The subsequent symptoms will depend upon the direction in which the abscess progresses, points, and discharges.

The average duration of abscess of the liver is from three to four weeks.

Diagnosis is most surely established by making an explora- tory puncture, and to satisfy himself thoroughly, the practitioner should not be afraid to resort to this method of ascertaining with certainty the presence of an hepatic abscess. For, when puncturing for this purpose is performed properly, the risks of injury from it are very slight. Abscesses may be confounded with pleural effusions, acute peri-hepatitis, hydatid of the liver, or a suppurating gall-bladder. Pleural effusions ascend higher up posteriorly than anteriorly, and an exploratory puncture of the posterior wall of the thorax is decisive for the diagnosis. Hydatids can only be mistaken for abscess of the liver from their shape and size, the presence of hook-like bodies in the fluid, and the absence of constitutional symptoms, should enable us to determine the presence of an hydatid. Peri-hepatitis is always accompanied by most acute pain, which is constant and severe, and aggravated by pressure.

Fortunately, the substance of the liver is very tolerant, and is believed capable of a certain amount of regene- ration. At the present day, the majority of cases recover under treatment. The smaller abscesses may be considered favorable, as also the absence of severe complication.

When the practitioner has fully satisfied himself of the presence of an abscess, he should not hesitate to evacuate the pus at once. There are several methods of doing this. Cases have been known to recover after a single evacuatory puncture with an aspirator. The trocar has been used for puncturing the liver under antiseptic precautions, and Dr. M. C. Maclean, C. B., M. D., Professor of Military Medicine in the Army Medical School at Netley, describes this operation in a case reported in the *British Medical Journal*, for May 1879, as follows. *The operation was performed by Surgeon-Major Porter, Assistant-Professor of Surgery. The patient being put under the influence of ether, a powerful steam-generating carbolic spray playing on the part. An opening was made with a full-sized trocar between the ninth and tenth ribs. Twelve ounces of thick creamy looking pus having been with- drawn, a drainage tube was introduced and secured, in the usual way; the part was dressed with carbolised gauze and tow, and secured with a carbolised bandage, acc ding to Mr. Lister's method the spray playing until the dressing was com- pleted. At every subsequent dressing, the same method was carried out with scrupulous care, so as to avoid the entrance of uncarbolised air, and the discharge was received in the un- carbolised dressings.* Another method of operating on hepatic abscess has been recommended by Dr. Little of Sha ghai, which is as follows:—"After finding the seat of the abscess with a needle, a bistoury is introduced along the needle, which serves as a guide, and cutting through the abdominal wall into the liver, the edges of the wound are opened, a good sized tube introduced and kept in its place with stout silk guards, and a dressing of antiseptic gauze applied over the whole."

rgh Sacramental Fast

HEPATIC CIRRHOSIS IN A BOY OF NINE.

BROWN (*Archives of Pediatrics*, xl., p. 48) has reported the case of a boy, nine years and nine months old, of healthy German parentage, who was seized with pain in the head, back and abdomen; tympanites, epistaxis, and irregular elevation of temperature. Considerable improvement took place; but a short time later face, legs, and abdomen became swollen, and subsequently slight jaundice appeared for a few

days. The urine was high-colored and passed in small amount, but was not albuminous. The bowels were constipated. Cathartics and diuretics gave rise to copius stools and increased diuresis and vomiting, but the ascites became so threatening as to necessitate thoracentesis, which had to be repeated several times, considerable quantities of fluid being evacuated. Throughout, the appetite continued enormous. There was a continued febrile movement, with morning remissions. Later, intense jaundice developed, and amid the symptoms of intoxication the boy died. Though not strong, he had never previously been seriously ill. He had always been an inordinate eater, though his food had not been particularly rich or varied. He had grown rapidly and was five feet in height, although his parents were rather undersized. He had drank a little beer occasionally, but no alcohol in any other form. From early childhood he had suffered from bilious attacks, attended with diarrhœa and vomiting. At the post-mortem examination the body was found much emaciated. The abdomen was much distended, and presented on its surface veins of considerable size. The skin was deeply jaundiced. The abdominal cavity contained five and a half quarters of clear yellow serum. The liver was of greenish-yellow color and reduced to about half of its normal size; it was rough and nodular and cut with considerable resistance. The spleen was enlarged and deeply congested. The mucous membrane of the stomach was somewhat thickened. The kidneys were yellowish in color, congested, and rather larger than normal.—*Amer. Jour. Medl. Sciences.*

Pulmonary Liver Abscess.

a case of mistaken diagnosis

Vol 35 Chinese Customs Report page 22

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which have not been Photographed.

The Journal of Tropical Medicine.

A MONTHLY Journal, dealing with the Diseases of Warm Climates is to be published in London, if sufficient support is forthcoming from those interested in Tropical work.

The Journal will be devoted to the publication of papers on Tropical Diseases and to the discussion of subjects, scientific and practical, affecting the interests of medical men in Tropical and Sub-tropical countries.

It will in no way interfere with the several excellent local Medical Journals published in India and elsewhere, but will rather serve them by giving a wider circulation to the important information they contain, while it will focus the knowledge acquired by medical men in different parts of the world.

That no publication of the kind exists is a matter for surprise, when the vastness of the population, the variety of climate, and the scattered nature of the countries composing the British Empire are taken into consideration.

When the young medical practitioner first essays the diagnosis and treatment of disease in a Tropical climate, he finds that his previous experience, gained in more temperate regions, is of but little use in fitting him to deal with the unfamiliar ailments he is sure to meet with in Tropical practice. He begins to appreciate the fact that Medical Journals devoted to meet the general interests of the profession, do not afford him sufficient guidance, and he will long for an opportunity of interchanging his newly acquired experiences with others similarly situated to himself.

For a Journal with such aims a wide circulation is necessary, not only to cover expenses, but in order to secure men of high standing over a wide area as contributors of papers.

It is felt that many of the conclusions arrived at, on the subject of Tropical Disease, have been framed upon experience too local in its extent to be accepted as universally applicable. The opportunities for intercommunication, which would be afforded by a Journal with the special aims herein indicated, would do away with this defect, by giving a wider basis upon which to found conclusions and generalisations.

There are well nigh 6,000 medical men holding British Diplomas practising their profession outside the British Isles, most of whom reside in warm climates, and it is believed that a large proportion of this number would take a deep interest in the success of a Journal devoted to their immediate professional wants.

With so large a number, therefore, to appeal to, and with many eminent men ready and willing to contribute articles, there should be neither lack of subscribers nor of contributors. The Medical Officers of the Naval, Military, and Colonial Services, the Medical Missionaries, and, most numerous of all, the general practitioners, who, though following general practice are really specialists in Tropical Diseases, can from the wealth of their experience supply material at once authoritative and interesting. Too little finds its way into medical literature from the capable men in the Public Services, and the loss to Medicine in all its branches is in consequence very great.

The Editors have received cordial support from many influential men interested in Tropical work, amongst others :

Sir JOSEPH FAYRER, Bart., K.C.S.I., LL.D., M.D., F.R.S.

Sir JAMES N. DICK, K.C.B., R.N., Director-General, Naval Medical Department.

Surgeon-Major-General J. JAMESON, C.B., Director-General, Army Medical Department.

Surgeon-Major-General W. ROE-HOOPER, M.D., C.S.I., President, Medical Board Indian Department.

PATRICK MANSON, M.D., LL.D., F.R.C.P., Medical Adviser to the Colonial Office, and to the Crown Agents for the Colonies.

ALEXANDER TURNBULL, M.D., R.N., Inspector-General, Royal Naval Hospital, Haslar.

Surg.-Col. KENNETH MCLEOD, M.D., LL.D., Professor of Military Medicine, Netley.

Surgeon-Major ANDREW DUNCAN, M.D., F.R.C.S., Indian Medical Service.

ANDREW DAVIDSON, M.D., F.R.C.P.Edin., Colonial Medical Service (retired).

The late Sir WILLIAM MACKINNON, K.C.B., formerly Director-General, Army Medical Department, a few days before his death, wrote as follows :—" I should think it a very good and useful move, for the interests of the public and that of the Medical Profession, that a Journal of Tropical Medicine should be brought out in England ; and, if it be well supported by Medical men, now so numerously employed in all our Tropical and Semi-tropical Colonies and Stations throughout the world, it would add greatly to our knowledge of diseases and climates."

This communication is but a type of many received, and the Editors are aware that the same feeling pervades the general body of medical men resident in Tropical and Sub-tropical countries.

At the Annual Meeting of the British Medical Association, to be held this year in Edinburgh, one of the Sections will be devoted to the subject of Tropical Diseases. The Editors hope that the first number of the *Journal of Tropical Medicine* will appear before the date of this Annual Meeting, and have made arrangements for the

publication in it of full reports of the papers and discussions in this Section, the establishment of which is a proof of the growing interest in the study of Tropical Diseases.

It is hoped that intending subscribers, whilst intimating their willingness to contribute funds to promote the publication, will also express their intention to forward reports from time to time of all important matters, whether of Medical, Surgical, Gynæcological, Therapeutic, or Pathological interest, met with in Tropical practice.

The Journal will be delivered, post free, for 17 shillings annually. The money is payable in advance.

The Journal will be issued with a letterpress of not less than 26 pages. It is intended to issue the first number at an early date.

JAMES CANTLIE, M.B., F.R.C.S.,
W. J. SIMPSON, M.D., M.R.C.P., } *Editors.*

April, 1898.

Communications to be addressed to

THE EDITORS,
"The Journal of Tropical Medicine,"
c/o Messrs. John Bale, Sons & Danielsson, Ltd.,
85-89, Great Titchfield Street,
London, W.

To the Editors "THE JOURNAL OF TROPICAL MEDICINE."

I intend to become a subscriber to "THE JOURNAL OF TROPICAL MEDICINE," *and upon the receipt of the first number will forward the Subscription for the first year.*

Name _____

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I intend to forward the following articles at an early date:—

1 _____ 2 _____

3 _____ 4 _____

Name _____

THIS PART TO BE TORN OFF AND SENT BY RETURN OF POST.

MATINAL (HILL) DIARRHŒA.

By James Cantlie, M.A., M.B., F.R.C.S., *Hong Kong.*

I have read with interest Dr. Crombie's article on hill diarrhœa and various corollaries to the same, the last by Dr. Weatherly published in the *Indian Medical Gazette.* I speak with diffidence, not having personally seen a case of hill diarrhœa *in* India, although I have seen cases *from* India, therefore cannot directly compare it with a form of diarrhœa met with in Hong Kong. However, from the detailed account given by Dr. Crombie, I am convinced we have a similar disease to deal with. Frequent morning stools—the first causing the patient to rush to stool immediately on waking or on getting out of bed is characteristic. The second usually one or two hours later, the third say after breakfast, and the fourth about 10 or 11 A.M. For the rest of the day the patient is quite well, gets about his daily employment, takes his food with appetite and his exercise with energy. Next day, the same thing is repeated, the days grow into weeks and months before he seeks advice, so little physical deterioration at first does this disease cause. The stools are white, of the consistence of mud, bulky, sometimes fermenting and frothy. The patient after a time gets alarmed, the condition worries and vexes him, and he begins of his own accord to stop this and that food, and to leave off or change his stimulants. Dyspeptic symptoms advance—chiefly cæcal and colic—with much flatulent discomfort. Clinically, the evidence is the absence of bile from the stools.

Are we correct in assuming bile is absent from the fæces, or is it only the colouring matter that is withheld? When bile is diverted from the intestine as in jaundice, a troublesome constipation is the result; why, then, if bile is absent, as stated in matinal diarrhœa, is there not constipation? In hill diarrhœa the bile is not diverted into other channels as evidenced by the clear urine, the pale conjunctivæ and the pallid skin. Nor is intestinal digestion at fault, as the food is sufficiently digested, at any rate as far as the breaking up of its constituents are concerned. The term hill diarrhœa may be convenient for India, but even there the height at which it appears is uncertain and instead of being met with at great elevation, it seems that it is found at the moderate height of 2,500 feet, and again that it is lost when an altitude of 12,000 feet is attained. Dr. Weatherly gives an account of the disease in Natal Hills, but does not state the elevation at which it occurs. So far as I know and have read, these are the only two places whence records of 'hill' diarrhœa have issued, *viz.*, the Himalayas and the Natal Hills. Seeing that a similiar disease is present in Hong-Kong, it is interesting to note the natural features of the locality.

Hong Kong is rocky granite island, rising abruptly out of the sea. The city of Victoria is built on a mountain side. Where the Europeans dwell especially, succeeding rows of houses look down upon the roofs of those on the lower level, and in turn their chimneys discharge their smoke just below the windows of the row above. The highest levels of the town are 600 feet above the sea-level, and but a few hundred yards from the sea-shore. Many Europeans live at the "Peak" in houses situated from 1,200 feet to 1,700 feet above sea-level. Now on all levels I have met with matinal diarrhœa although more on the higher than the lower levels. I am not speaking of the disease called "Sprue" or "Psilosis;" but of a simple morning diarrhœa with pale stools of a porridgey consistence. With this information before one, is it correct to still accept the term hill diarrhœa? Certainly in Hong Kong we have nothing but hills, but the disease is met with a few hundred feet above the sea-level. Has the barometeric pressure anything to do with it? I doubt it. It surely cannot be food, for there can be nothing in common between the food in the Himalayas, Natal and Hong Kong. Is the water the cause? This cannot be so easily disposed of, as although not on high hills, we are supplied by mountain streams of injurious purity.

The absence of sufficient lime salts in the drinking water must be injurious; and the deficiency of both alkalies and alkaline earths are not conducive to good digestion. Now my usual treatment for such cases is bicarbonate of soda in 10 or 15 grain doses before meals, or three hours after. The bile being absent, as assumed by the pale stools, the soda supplies one element towards the perfecting the biliary components and the taurocholic and glycocholic acids are provided with a base whereby the taurocholate and glycocholate of soda are formed. Whether the physiology of this method of treatment is correct or not experience will prove. I find, however, that the addition of oxide of zinc as an intestinal tonic and astringent, and rhubarb as a stomachic, aid the bicarbonate of soda in fulfilling the process of cure. My prescription runs as follows:—

R.	Zinci Oxide	... grs. x.
	Sodii Bicarb.	... grs. x.
	Rhei pulv.	... grs. v.

administered in a wafer-paper twice daily half an hour before meals. This is combined with a diet of milk exclusively in severe cases; but in milder cases, milk and soda, biscuits, conjee water, mashed potatoes and plain jelly are allowed. Rest in bed for a few days to begin with facilitates the cure.

It would be interesting therefore to ascertain the quality of the drinking water in the regions where hill diarrhœa is prevalent, whether it is deficient in alkalies or alkaline earths. Owing to the scarcity of vegetation on the banks of the stream, these salts may be absent until nearing the plains, or the geological formation may be at fault. Again, at great altitudes wells, not streams, are the usual sources of potable water. This may aid Dr. Grainger to solve the problem that at 12,000 feet the disease is unknown, at any rate, in certain regions.

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which have not been Photographed.

Enema. Threadworm

℞ Naphthalin
ol. olivae. } gr. x ad ℥j. fiat enema

℞ Naphthalin
ol. olivae } gr. 60 ad ℥ii ad enema

Beggs theory of Sprue & its cure

I have not any cancrum oris
ulcers but I have seen failure
to stop the disease.
The cantharis of the shops
has been refined and is therefore
more uncertain. Whether change
takes place in it from decomposition
by exposure to sun the results
is that when it is rich yellow
it will act and when it is
white it won't. Suppose it
for days to strong sunlight
and then filter it. It
must be given in a dose
merely floating in it but not
rubbed up. and the bowel
must be well cleared out
first. Dose is 5 fos and
I give for its cancrum oris
only. Has never been any
bad effects from it even when
continued for long periods.
I test the patient and keep

Hanker
8th Nov 93

Dear Dr Cantlie

It gives me the greatest
pleasure to answer your letter
of yesterday for the success I met
in treating Sprue you will
be sure a strong believer
in the true pathology
of the disease and the way
to cure it. I hope to
send you by this mail a
copy of a paper I read
in Edinburgh when last time
if I have a copy left.
As this I will only note the
points I consider essential
It is not any dealing there
cancrum oris is but accidental
producing in the production of
the patient a condition of things
that results in diarrhoea

him at rest for a day or two if possible.

I see I have several copies of a notice I wrote for the Medical Report in 87. but only a single copy of my Edinburgh paper so I send you one of the former. all that is essential is detailed in it except of course little things appertaining to the cases I have had since that date.

I must you will let me know the result of your experiments with Sprue as I am most interested. I feel certain if you will prepare your patient for the Golden Yellow Santonine in Olive Oil. (say 3i.) you will be pleased with the result.

Hoping to have the pleasure some day of meeting from a paper acquaintance with one of whom I have heard so much both in China and in England believe me

Yours Sincerely

Mark Boyd

Boyd's Theory of Sprue & its Cure

Philpott
Diabetic table
translated into Chinese

忌食之物

鮮菓　干菓　糖菓　餅食　点心　白飯　糯米　麥麵
粉仔　河絲　津絲　龍粉　各荳　芹菜　白菜　蘿蔔
風栗　番薯　深薯　薯仔　茨菇　麥芽　葱頭　金針
青蒜　大黃　甘草　芥末　棗子　蜜糖　番瓜　綠柚
山楂　冬瓜　青瓜　櫛瓜　矮瓜　絲瓜　西瓜　香瓜
菩提　竹笋　葛瓜　蓮藕　蓮子　白合　荳腐　芋頭
牛奶　羊奶　豬肝　鷄肝　鴨肝　羊肝　牛肝　蝦蟹
蟑蛙　蝗蚧　禾虫　○忌飲各色本地酒　啤酒　波打
碎酒　紅酒　利嬌酒　嬌利梳　三鞭酒　啉酒　甑酒

西醫本初鍾景儒訂

宜食之物

鮮魚　鹹魚　豬肉　牛羊　鷄鴨　白鴿　鷓鴣　鶴鶉
禾雀　山鷄　水鴨　肥鵝　鷄蛋　鴨卵　豬膏　牛油
豬腰　豬心　牛肚　火腿　田鷄　脚魚　魚肚　花膠
魚翅　燕窩　海參　山瑞　草菇　白菌　香信　云耳
冬菇　芽菜　生菜　莫菜　波菜　烤麵飽西名多士
檸檬　炒米粥　炒杏仁　鹹漁乇　清燉湯　茄啡
青茶　泉水　礦水　梳打水　○洋酒宜飲　舊巴蘭地
舊威士忌　干些乇　舊鶴酒　畢近地

消渴一症早見於中土醫書惜考核欠精未能洞悉其源蓋不知病者之溺味甜而有糖也按溺之有糖乃由血之有糖所致而血之有糖則因食物之糖質與乎能變糖之質處置失宜淫溢其間從內腎洩出西醫以化學覈溺故得其詳凡治是症以清源爲本故非嚴令病者禁口辨其宜忌謝絕一切糖品及可以變糖之質則縱有良醫妙藥亦恐徒然余有鑒於此特選食品中之可食與不可食分列清楚俾患此者有所遵循況痾早起不無小補焉

A Number of Blank Pages Follow,

which have not been Photographed.

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Imperial Institute.

A PAPER,

WILL BE READ BY

JAMES CANTLIE, Esq., F.R.C.S.,

ON

"The Organisation of the Colonial Medical Service."

SURGEON-GENERAL

SIR JOSEPH FAYRER, BART., K.C.S.I., M.D., F.R.S.,

In the Chair

Wednesday, 2nd of March, 1898, at 3.30 p.m.

Admit Bearer. EAST CONFERENCE HALL.

81

Imperial Institute.

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Admit Bearer. EAST CONFERENCE HALL.

SEASONABLE BENEVOLENCE.
MR. R. ROSS ROBERTSON'S ENTERTAINMENT TO THE OUT-DOOR POOR.

83

The Seventh Annual Entertainment to the out-door-poor (Bower Cottage), St. Pancras, took place at the British School-room, Kentish Town-road, on Friday evening last, the 9th inst. R. Ross Robertson, Esq. occupied the chair, and was supported by the Rev. W. M. Wilson, North Parish Church, Aberdeen, John Duncan, Esq., William Lewis, Esq., Alexander Scott, Esq., James Simpson, Esq. J. E. Lloyd, Esq., and many other friends sympathetically interested in the above object.

The following ladies and gentlemen kindly lent their assistance ta the programme of music:—Misses Milne, Robertson, Duncan, H. Duncan, Renwick, Rait; Mrs. Soane, and Mrs. Wilson; Messrs. Root, Lewis, Tallack, J. Cantlie, F.R.C.S., Robertson, and Rait.

After a few introductory remarks from the chairman, the concert opened with a pianoforte duet, "Gipsy Quadrilles," played by Miss Milne and Miss Robertson, whose execution was highly spirited; a song, "The outlaw," by Mr. Root followed, who sang it in a most efficient manner, Mr. Root also sang, "From rock to rock," narrowly escaping an encore; Mrs Wilson substituted "When the swallows homeward fly," for "In the gloaming," and delivered it with much taste and grace; Mr. Lewis gave a reading, entitled "tale of a goat," and created a round of merriment, he also read "Love in a balloon," and being recalled, gave "The Dutchman's first pipe," and received the hearty plaudits of the auditory; Miss Rait's contribution was "In my wild mountain valley;" and the young lady sang with a neatness and finish worthy of *adebutante* of more mature years; Mrs. Soane and Miss Milne, in the pianoforte duet, "Let the hills resound," played with vigour, and the latter lady, in conjunction with Mr. Root, in a pianoforte and flute duet, was rapturously encored. Mr. F. Tallack is the possessor of a good bass voice and sang well in "The tar's farewell"; Miss E. Renwick was on the programme for the song "At the Ferry," but through indisposition was unable to appear; a duet, "One word," was most skilfully and artistically rendered by Miss and Mr. Rait; Mr. Cantlie was immensily received in his rendition of "Come lasses and lads," and was vociferously encored, to which he responded by giving "The Laird o'Cockpen," later on he sang "The year of Jubilee," when another *bis* was demanded, and equal to the occasion, he contributed "Nanny that lives next door," a nondescript song we confess never to have heard before; but, notwithstanding, so much hilarity and grotesque humour did the worthy gentleman throw into the effusion, as to spring a mine of laughter in the assemblage. Brilliantly did Miss Winkley execute her pianoforte solo, "Mazurka;" with a freshness and simplicity did Miss H. Duncan warble "Olivia"; and Mr. Rait sang Dibdin's "Tom Bowling," with much feeling and finish; Miss Duncan scoured the warm plaudits of the audience for the very great expression she infused into "Home, Sweet Home"; Mr. R. A. Robertson sang with great humour, "Moods and tenses"; and Mrs. Wilson followed in her most sympathetic vein with "Don't forget the old folks," who, be it said, were not unstinted in manual recognition of this gifted lady's efforts The Misses Renwick in a pianoforte duet, "Chilperic," played with considerable desh. The concert was brought to a most satisfactory finale by the audience joining in "God save the Queen." The musical entertainment gave general satisfaction.

At the termination of the concert 125 lbs of tea, 500 lbs of sugar, and a copious supply of oranges, were distributed among the aged infirm, and unemployed then assembled.

We have, on previous occasions, had the satisfaction of chronicling acts of munificence on the part of Mr. and Mrs. Robertson, of Percy Villia, Camden-road, whose "hands," it may be said, "are open as day for melting charity"; and we have again the pleasure of bearing testimony to the seasonable benevolence of this lady and gentleman.

Before the concert began a supply of buns was distributed, kindly provided for the occasion by Miss Milne.

Praise is due to Mr. Copeland, for his untiring and assiduous efforts in this undertaking; and Mr. Thom is also deserving of special mention for his general assistance in carrying out the arrangements. Messrs. Wheatly and Stevens, the relieving officers, and their assistants, also rendered efficient service.

The Rev. W. M. Wilson proposed a vote of thanks to the chairman, who suitably responded. The meeting was then brought to a termination.

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THER MINERAL WATERS,

GINGER BEER, AND

MARVEL OF DELICIOUSNESS

KENTISH TOWN, N.W.

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ality at the lowest possible prices.

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ood Salt, 1s. Delicious Cheese, 6½d. Good ditto, 4½d

f Bacon, 9d.

will prove the fact. Families waited on.

MANAGEMENT.

H. I

CORRESPONDENCE.

[We do not hold ourselves responsible for the opinions expressed by our correspondents.]

THE MEDICAL INSPECTION OF SHIPPING.

TO THE EDITOR OF THE "DAILY PRESS."

DEAR SIR,—The questions regarding port sanitation which have lately arisen are of such general importance that they must be my excuse for thus "rushing into print." It seems to me that Dr. Clark's proposals for securing as far as possible the detection of non-boat diseases are only such as (perhaps with slight modifications) would be adopted by any sanitary authority which had an adequate sense of its responsibilities towards the community, and certainly had I still been a member of the Sanitary Board he should have had my support. It is unfortunate that the only unofficial member, who is both a keen sanitarian and acquainted with the wants and wishes of the shipping interest, should have been absent and that such a grave question should be practically decided by the double-barrelled casting power of one expert pitted against an equally good authority.

The opposition to the scheme may be summarised into three points, viz., 1st, Injury to the port; 2nd, inefficiency of the present system; 3rd, impracticability.

With regard to the first, what the shipping firms mostly fear is delay. When we consider that ships are frequently not visited for hours after their arrival, that in order to make sure of obtaining a "bill of health" it has to be applied for the previous day, or, if a vessel has to be despatched at short notice, messengers have to be sent flying all over the colony to get the port Health Officer's signature, that when a case of infectious disease has occurred on board a ship it may be a long time before the Port Health Officer can be found and then most probably only "by deputy," who has no authority whatever to order the removal of such patients or give the necessary instruction to the ship's officers or surgeon—such a case has happened lately to a mail steamer, her surgeon having to take the responsibility of landing the patient and disinfecting the ship and passengers himself to avoid a delay of more than twelve hours, and the increased risk of infection—we can quite appreciate their fears and sympathised their opposition. But Dr. Clark meets this objection by having two medical officers constantly on the harbour during daylight, and with regard to "bills of health," the port being either infected or not, signed bills-of-health, should be obtainable at the offices of the Sanitary Board on application, as well as from the Port Health Officer. Everyone admits that the introduction of infectious diseases into the colony does infinitely more harm, and is far more costly, than any moderate detention. The Principal Civil Medical Officer and Port Health Officer seem the only persons satisfied with the efficacy of the present system. The representative committee condemned it, even from the shipping point of view, on many points.

How we can be satisfied with a system which has admitted over 50 per cent. of all infectious cases (and that Dr. Clark takes every means to trace the origin of such cases I can personally vouch) exclusive of plague, I am really at a loss to understand. Take the case of the steamer Chang Hoi Kiou, which arrived on 1st November with 600 passengers and had 17 deaths from cholera the day before arrival, all of which, surgeon and passengers, were landed, the ship herself not being placed in quarantine until the 20th, by which time 19 more deaths had occurred. It has been argued that we need not fear the introduction of cholera, because it has never previously obtained a foothold here, but this argument is most fallacious. In 1885, 19 Europeans died of undoubted cholera and 183 Chinese of "cholera diarrhœa, vomiting, and purging," which we may safely assume to have been cholera. Likewise, in 1886, 25 Europeans succumbed to "Cholera" and 253 Chinese. In both these years the disease was imported and reached the proportions of a "mild" epidemic, for it is certain that the statistics as given are, as they always are, much below the true numbers. Again, as cholera is propagated by contamination of water or food, the Chinese habit of making their cookhouses the storerooms "for the port system" is specially dangerous, and too much care cannot be exercised in keeping out the disease. Likewise it is argued that because small pox is endemic here, a few cases more or less landed can make no difference. But small pox is not prevalent amongst Europeans, yet a few months ago three or four hotels in the colony were infected through passengers landed from the Tonkin steamer, and a large number of the Cornwallis troops contracted the disease here. These cases were early discovered because a private practitioner was called in twelve hours after the landing, during which time infected persons were moving freely about. Although two of these cases showed well-marked signs of the disease and one had been lying ill in the cabin for three days, no report was made by the commander; nor was any prevention instituted against him. Vaccination is a most excellent protection, but does not do away with the necessity of reasonable preventive measures.

One of these cases found its way to Canton, was brought back at 1 a.m. and reported to the Health Officer (Dr. Clark) and the cabins locked and disinfected. Late in the afternoon the Port Health Officer turned up and ordered the ship, then moored for Canton, into quarantine, the little difference of opinion between the two Health Officers costing the Hongkong, Canton, and Macao Steamboat Co. some thousands of dollars. Surely such a system must not only be wrong, but radically inefficient.

The boat and boat populations and shipping communities are brought into such frequent and intimate contact that one health department can alone adequately deal with the sanitary questions constantly arising.

On the third point, impracticability, too much has been taken for granted. The only occasion on which a real supervision of the harbour has been attempted was in 1894, and then it was carried out by the "Permanent Committee of the Sanitary Board" without assistance from the Port Health Officer's department. At this time "[illegible]" junks were boarded. In 1896, likewise, the Canton steamers, passenger-launches, junks, etc., were closely supervised by the Sanitary Board, and numerous cases of plague detected and dealt with, and I have no hesitation in saying that had these or similar measures been adopted early in 1894 the epidemic of that year would in all probability not have exceeded that of 1896. In both years the plague was imported; in 1896 individual cases were at once detected and isolated; in 1894 the disease was widespread before it [illegible]

I take it that Dr. Clark's suggestion of $50 guarantee for every Chinese passenger landed from an infected port is intended as a preventive measure, or obstacle. We don't want coolies landed here from an infected port, and this suggestion, if enforced, would necessitate greater care on the part of shippers, and would undoubtedly diminish the numbers to be dealt with here. The other alternative is forbidding such immigration.

The number of medical officers—two—originally proposed by Dr. Clark seems to me sufficient, but that is a matter for consideration. Dealing with emigrants from Hongkong is not an integral part of the Port Health Officer's work—he simply does it, and is paid for it, as a private practitioner.

No one is more opposed to unnecessary interference with shipping than the writer, but I certainly can see no reason why this port should not adopt protective measures similar to other large shipping centres.

We certainly have local conditions to contend against, but there is no insuperable difficulty to be overcome. The number of Chinese coming across the frontier is small. Aberdeen and, Stanley can easily be supervised by the Police, and all reasonable precautions can then be taken against the introduction of infectious diseases. Our motto should be "the maximum of protection with the minimum of interference," but to be outbeat with our present system, or rather want of it, can only be described by Dr. Clark's word "deplorable."—I am, sir, yours,

WILLIAM MARTIGNAN,
M. D. Dept. 98th Reg.

Hongkong, 22nd August.

A Number of Blank Pages Follow,

which have not been Photographed.

Gonorrhea

℞ Inject. Zini Chloridi fort. ii ad ℥j. one 3 ordinaria

℞ Sandal wood oil in 10 min. capsules W.S.

℞ Magnesia : ʒiii
Pot. Bromidi : ʒj.
Cap. Glycyrrhiza. ʒj. at bedtime
Jonathan Hutchinson in N. O. Journal. Mch. 1882.

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which have not been Photographed.

Yaws.

Histology of: Saville Clarke. Trans. Path. Soc. 1892.

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which have not been Photographed.

Bridge, S.E.

SAD END OF A WAR CORRESPONDENT.—Mr. Langham held an inquest on Thursday, at the City mortuary, concerning the death of Mr. George William Ward, who was found dead on Monday afternoon in one of the tunnels at Moorgate-street station. The deceased was a war correspondent, having represented the *Daily Mail* in Abyssinia, the *Pall Mall Gazette* during the Ashanti campaign, the *Morning Post* in the Soudan, and *Black and White* in the China and Japan war. A bill-poster named William Huck stated that he saw the body lying 20 yards inside the tunnel. The other evidence showed that he must have first injected some morphia to deaden his feelings, and then thrown himself on the line. The deceased's father, Mr. Robert Ward, of Swindon, stated that his son suffered acutely from rheumatism, caught through falling into the Nile, and that it must have been the intense pain which drove him to end his life. The jury returned a verdict of "Suicide whilst temporarily insane."

A Number of Blank Pages Follow,

which have not been Photographed.

"A GUID SCOTCH NICHT."

Should you chance tae come upon a gatherin' o'
half a dozen freen's,
Whaur the drink is Scottish whisky, or some ither
"Border blends,"
An' the freen's are fu' o' "speirin'" an' the grippin'
o' you're han's,
Or the talk is o' the "tartans" an' o' "plaidies"
an' o' "clans,"
You can' tak' things duc'd easy, an' can judge
you're going richt,
For you've had the luck tae tumble on a "guid
Scotch nicht."

When you're pitched in among them in a happy
sort o' way,
As "another man an' brither" frae the Tweed or
frae the Spey;
When you're tak'n by the oxter an' you're coup'd
intae a chair,
While some ane slips some whusky in you're
tumbl'r unaware,
Tho' the present seems less dismal, an' the future
fair an' bricht,
You've struck earth's grandest treasure, in a "guid
Scotch nicht."

When you hear a short name shouted, an' the same
name shouted back,
Till you think in the confusion that they've a' been
christened "Mac;"
When you see a red beard flashing' in the corner by
the fire,
An' a giant on the sofa wha is six feet three or
higher,
An' before you've guessed the colour, or before
you've gauged the hicht,
You're come tae the conclus'n it's a "braw Scotch
nicht."

When the red hair in the corner puts his strong
voice tae the proof,
As he gie's the "Hundred Pipers," till it near
lifts the roof;
Or when a chiel sings the "Auld Scotch Sangs
wi 'their tender sweet refrain,
Till the tears come on you're e'en, an' the drin
comes roon'd again,
When they chant the stirrin' war sangs that won
mak' a coward fecht,
Then you're fairly in the middle o' a "big Scot
nicht."

When the plot begins tae thicken an' the ba
begins tae play,
When every jim-pot chieftain has a word or tw
tae say;
When he'd sell a foreign station for a sprig
native heath,
While there's one upon the tab'le an' a coup
underneath,
When half o' them are sleepin', an' the bale o' the
are ticht,
You'll ken that you're assistin' at a "grand Scotc
nicht."

When the last big bottle's empty an' the daw
creeps grey an' cauld,
An' the table is faulded an' the last big lie
tauld;
When they totter down the pathway in a brav
unbroken line,
Tae the peril o' the passers by an' the tune
"Auld Lang Syne,"
You can tell the folks at breakfast, as they watch
the fearfu' sicht,
That they've only been assistin' at a "braw Scotc
nicht."

Edinburgh. JAS. W. BOGUE.

AN INCIDENT OF THE TEN YEARS' CONFLICT.

A BLOODLESS MILITARY EXPEDITION

"PLACING" A MINISTER AT GL[illegible]

In the "Highland Light Infantry [illegible] W. Ross, the following interesting letter from [illegible]ment (and late quartermaster-sergeant in the [illegible]deen) is pub- now resident in Craigie Street, A[illegible] lished:—

"When the depot, 71st H.L.I., [illegible] an order was re- in Aberdeen in 1841 and 18[illegible] spare a detachment ceived from headquarters to [illegible] All being in readi- of 50 men for special servi[illegible] under the command ness, the force was despatc[illegible] requisite number of of Captain Foy, with [illegible] took place in February, subaltern officers. The [illegible] severe month as regards 1842, accounted the m[illegible]rn parts; and as there were weather in these nor[illegible] trip into in those days, we no snug carriages [illegible] way. The first day's march had to foot it all [illegible] was 15 miles, to [illegible]verurie, with all our belongings on our back, a[illegible] in addition, 60 rounds of ammunition per [illegible]an for the old flint-lock muskets. The second [illegible]y's march was one of 22 miles, to Huntly, which—to the majority of us, being youngsters—was quite equal to enough in such weather and on such roads.

"Huntly was our destination, where we remained for a month billeted on the inhabitants, who took kindly to us; many of them had never seen a soldier in uniform before. Now, Mr Editor, I can fancy you saying—"Why don't you explain the object of the expedition?" Be patient. You have the waste paper basket in reserve—en revenge—but as you are not likely to solve the problem, I may as well out with it. I was not to resist a French invasion, a subject of so much talk in those long-ago days; but to "place" a minister in the Church of Glass, whom the then authorities insisted on "placing" in opposition to the will of the congregation. It will be remembered that the Church of Scotland was then approaching a crisis [illegible] which took place the following [illegible]

[illegible]

American Railways have been depressed in response to the renewed uneasiness in New York speculative Cities, but close well above the worst. New York Central shares are 1½ lower, while Denver First Con. Mort. and Union Pacific Pref. both 1 down. Union Pacific shares have lost ½, as has also Louisville. Other falls, which are general, range from ¼ to ½.

Canadian Pacifics are firm on the truce in the rate war and the possibility of an early settlement. Grand Trunks are strong, the traffic increase of £9461 helping matters considerably. The First and Second Prefs. are 1½ higher, at 65½ and 46½ respectively. The Guar. has gained ½.

Mexican Railways have been steady. Arrestings show no special feature.

Western and Brazilian Telegraph descriptions have been helped by expectations of an early arrangement between this and the direct West India cable companies. Russian Oils harder, after dullness. Allsopps and Hudsons easier.

The following changes have taken place to-day:—

Foreign Bonds—Rise—Tregany 3½ per Cent. ½, West of Minas Railway Bonds and Buenos Ayres 1882 ½, Argentine E Cedulas, Brazil 1883, and Do. 1888 ½, Turkish B. C. and D ½. Fall—Bulgarian 1888 and Do. 1892 Bonds 1, Egyptian State Domain, Mexican Internal, and Do. 1893 ½, Argentine Funding, Buenos Ayres Water, Buenos Ayres I Cedulas, and Mexican 1888 ½.

Home Railways.—Rise—Chatham ½. Fall—South Western Ord. 1, Great Western, Lancashire and Yorkshire, and South Western Def. ½, North British Def. ½, Caledonian Def., Great Northern Def. Ord., Brighton A, South Eastern A, North Western, Midland Def., and Great Eastern ½.

American and Canadian Railways.—Rise—Grand Trunk First and Second Prefs. 1½, Do. Guar. ½, Do. Third Pref. ½, Do. Ord. ½, Canadian Pacifics ½. Fall—New York Central 1½, Denver First Con. Mort. and Union Pacifics 1, Do. shares ½, Louisville and Southern Prefs. ½, Norfolk Pref. ½, Erie First Pref., Illinois Central, Atchison Pref., Do. Adjustment Mort., Norfolk Common.

"A GUID SCOTCH NICHT."

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Whear the drink is Scottish whisky, or some ither "Border blends,"
An' the frien's are fu' o' "spekin'" an' the grippin' o' you're han's,
Or the talk is o' the "tartans" an' o' "plaidies" an' o' "chess,"
You oot' tak' things doo'd easy, an' ean judge you're going richt,
For you're had the luck tae tumble on a "guid Scotch nicht."

When you're pitched in among them in a heppy sort o' way,
As "another man an' brither" frae the Tweed or frae the Spey;
When you've tak'n by the outer an' you're coup'd intae a chair,
While some aae slips some whisky in you're rumb'r unaware,
Tho' the present seems lae dismal, an' the future fale an' bricht,
You're struck carth's grandest treasure, in a "guid Scotch nicht."

When you hear a short name shouted, an' the same name shouted back,
Till you think in the confusion that they're a' been christened "Mac;"
When you see a red beard flashing in the corner by the fire,
An' a giant on the sofa who is six feet three or higher,
An' before you've guessed the colour, or before you've gauged the hight,
You've come tae the conclu'n it's a "braw Scotch nicht."

When the red hair in the corner puts his strong voice tae the proof,
As he gie's the "Hundred Pipers," till it near lifts the roof;
Or when a chiel singt the "Auld Scotch Songs wi' thair tender sweet refrain,
Till the tears come on you're e'en, an' the drin' roon' roun'd again,
When they chant the martin' war songs that wan' wak' a coward frae,
Then you're fairly in the middle o' a "big Scotch nicht."

When the plot begins tae thicken an' the lo begins tae play,
When every jim-jo chiffonie has a word or t tae say;
When he'd sell a bridge station for a sprig native heath,
While there's one upon the table an' a cup underneath,
When half o' them are thrpin', an' the hale o' the are tight,
You'll ken that you're assistin' at a "grand Scot nicht."

When the last big bottle's empty an' the daw creeps grey an' cauld,
An' the table is loaded an' the last big lie tauld;
When they totter down the pathway in a brea unbroken line,
Tae the peril o' the passers by an' the tune "Auld Lang Syne,"
You can tell the folks at breakfast, as they watch the frail' sicks,
That they've only been assistin' at a "braw Scot nicht."

Edinburgh. Jas. W. Boyd.

AN INCIDENT OF THE TEN YEARS' CONFLICT.

A BLOODLESS MILITARY EXPEDITION

"PLACING" A MINISTER AT GLASS.

In the "Highland Light Infantry Chronicle" the following interesting letter from W. Ross, late quartermaster-sergeant in the regiment and now resident in Craigie Street, Aberdeen, is published:—

"When the depot, 71st H.L.I., was quartered in Aberdeen in 1861 and 1862, the regimental colour was received from headquarters to be kept, all being in readiness of 50 men for special service, under the command of Captain Fay, with a respectable number of subalterns officers. The took place in February, 1861, amongst the worst month as regards weather in these northern parts; and as there were no strong storages, I trip into the depot, we had to take it all away. The first day's march was 18 miles, to Fraserburgh, with all our belongings on our backs, and in addition, 50 rounds of ball-cartridges for the old flint-lock musket. The second day's march was one of 22 miles, in Huntly, which, to the majority of us, being comparatively fresh, was quite equal to enough in such weather and on such roads.

Having at our destination, where we remained for a month billeted on the inhabitants, who took kindly to us; many of them had never seen a soldier in uniform before. Now, Mr Editor, I can hear you saying—'Why don't you explain the object of the expedition?' By gettest. You have the warm paper basket in reserve—an revenge—but as you are not likely to solve the problem, I may as well out with it. I was not to meet a French invasion, a subject of so much talk in those bygone days; but to "place" a minister in the Church of Glass, where the Presbytery authorities insisted on "placing" in opposition to the will of the congregation. It will be remembered that the Church of Scotland was then approaching a crisis—the Disruption—which took place the following year, causing a sensation throughout the Presbyterian Church, and resulting in the formation of the Free Church of Scotland. No medals or clasps were awarded for our services, but we were met by our band at the outstress on the city on our return, and when it struck up the spirited air of "Auld Lang Syne," and we were cheered by the citizens as heroes—as, of course, we in reality were—we were so proud that such trifles as medals were not to be thought of in comparison.

"The depot was shortly afterwards removed to Stirling, and in the following May to Winchester, when it was formed into a reserve battalion by volunteers from other corps. We were for a brief period stationed at Chichester, where we were fated by a captain of ours, Lord Archer, a relative of the then Duke of Richmond, whose proximity of Goodwood, we were amused, while there, marched to Portsmouth, and embarked for Canada, where, after a two months' voyage, we landed on 28th September, 1862, under command of Lieutenant-Colonel Ingleby, and where we again embarked on 24th September, 1863, for Canterbury, in Old England.

In reference to Mr Ross's letter, we find in the "Aberdeen Journal" of 23rd February, 1863, that "His Grace the Duke of Richmond has presented Rev. Wm. Dugald, preacher of the Gospel, to the church and parish of Glass, in the Presbytery of Strathbogie, vacant by the death of the late Rev. John Cruickshank."

This was followed on March 2 by the announcement that the Presbytery of Strathbogie arranged to proceed with Mr Dugald's ordination, and that "On Monday last a detachment of the 71st Regiment proceeded from this to Huntly, where, we understand, it is to be quartered for some time, in case of any attempted opposition of the inhabitants at Cabrach." It is added—"We sincerely hope, however, that the tranquillity of the district will not be again disturbed in so flagrant a manner as on the occasion alluded to. It may be mentioned that several of the Cabrachmen parishioners were subsequently tried at the High Court of Justiciary for rioting, but they were acquitted.

The "Journal" of March 9 states that at a meeting of the Strathbogie Presbytery on the previous Wednesday, Mr Thomas Rolland, commissioner for the Duke of Richmond, appeared, and laid on the table a presentation by his Grace to the church and parish of Glass, in favour of Rev. W. Dugald, minister of the Gospel, which presentation, together with the other requisite documents, was unanimously sustained, and among other arrangements, Rev. Mr Allardyce, Rhynie, was appointed to preach at Glass and to moderate in a call to Mr Dugald on Thursday, 19th inst."

The "Journal" of March 23 shows that the meeting was duly held, and that it was "numerously and respectably attended by the parishioners, and silenting as his text, 1 John iii. 7—'Little children, let no man deceive you: he that doeth righteousness is righteous even as He is righteous,' preached an excellent discourse, which was listened to with deep attention by the congregation." The usual forms having been gone through in accordance with the "good old laws of the Church," the call was unanimously signed, and "everything passed off in the most quiet and orderly manner."

No mention is made of the return of the detachment of the 71st from Glass, but in the "Journal" of March 30 this interesting paragraph occurs:—

"The depot of the 71st Highlanders (now the 2nd Battalion) left Aberdeen by the Brechin Dundee for Arbroath, on their way to Stirling, having been succeeded here by the depot of the gallant 42nd, which arrived by the same vessel on Wednesday. On the Tuesday evening the officers of the 71st gave a grand ball in the Corn Exchange Rooms, which was attended by upwards of 150 of our most distinguished society in the city and county. We cannot omit the opportunity of bearing our testimony, with which our readers will entirely agree, to the uniformly excellent behaviour of both the officers and soldiers of this corps while resident among us. On several occasions of fires breaking out in this city, the prompt attendance and assistance rendered by the military were of the greatest importance. It would be unpardonable also not to return thanks for the public thanks for the gratification afforded to the inhabitants by the performances of their fine band of bagpipes in different parts of the city—a treat which was quite a novelty in this quarter. While the many friends which the officers of the depot had made in Aberdeen in this city regret their departure, we know that the feeling is universal on the other side, and several of these gallant gentlemen have expressed their warm sense of the great kindness and courtesy which they have experienced from our citizens, of which they will ever retain a grateful remembrance."

The "Journal" of April 1 records the proceedings at a meeting of the Presbytery at which Mr Dugald's trials were sustained, and a sermon given on account of the ordination of Mr Dugald on April 21. "Objections of any kind were called for three times at the church door, but no objections having been offered, the Presbytery proceeded with the ordination. The church was filled in every part by an attentive congregation, and no intimation whatever was offered by the inhabitants. A party of twelve was stationed at an one stage, half a mile from the church in case their assistance might be found necessary." The officers to the new minister and congregation are reported to have been "served and obeyed in an ordinary degree, and behaved to with the most prudent attention by the congregation;" while at the close of the service Mr Dugald proceeded to the door of the church, where he had to remain nearly half an hour receiving the congratulations of the parishioners, who warmly and affectionately crowded around him for that purpose."

STELLA.

Neil Gow's Tree.

The grand oak tree of the famous fiddler, Neil Gow, has lost one of its "giant trunks." The tree stands near the village of Inver, not far from Dunkeld, where Neil was born and lived and died. A writer in the "Scots Pictorial" recalls some anecdotes of Neil. He was a great favourite with the Duke of Atholl, who, indeed, paid him a salary as family fiddler; but he had want respect for dukes and duchesses as such. "That lassie o' yours has a good ear," he remarked to her Ladyship of Atholl one day. Somebody who overheard the remark ventured to suggest to Neil that the Duchess might be offended at having her daughter called a lassie. "What would I call her?" said Neil. "I never heard she was a laddie." !!

The Fiddler and the Whisky.

Neil, like too many others, was fond of whisky. The Duchess of Gordon once complained to him of a giddiness and a "swimming" in her head. "Faith," said Neil, with a twinkle in his eye, "an' I ken something o' that, your ladyship." And so he did, no doubt. Another story is of a gentleman meeting him walking home from a Perth ball one morning. "It's a very long road you have before you," remarked the sympathiser. "Oh, it's nae the length o't that's troubling me, but the breadth," said Neil as he passed on. Gow is buried in the churchyard of Little Dunkeld.

A Little Mixed.

At the licensing sessions held in a certain west country city recently, the Chairman, dealing with the statutory limit for bona fide travellers, and getting his expressions a little mixed, referred to it as being "three miles as the *flow cries*." Whereupon some one engaged in the case ventured to correct his worship. With a deferential smile this exponent tried to amend the phrase, but could get no nearer than "Your worship means as the *fly crows*—or rather," he added hastily, "as the *very flows!*" No one was sufficiently rash to make a further attempt.

Scotsman July 29 1893

ADDRESS TO SIR JOHN STRUTHERS.

Yesterday afternoon a number of Sir John Struthers' old pupils met at his house in George Square to present him with an address of congratulation on his recent honours. The small gathering included Dr J. Mitchell Bruce, London; Dr James Cantlie, Dr Garden, Aberdeen; Dr R. Farquharson, M.P.; Dr Hill Griffiths, Dr Butchart, Leith; Dr M'Gillivray, Dundee; Dr Leslie Mackenzie, Dr John Ruxton, and a number of others. The address, which was signed by every one present, was in these terms:—

Edinburgh, 28th July 1893.

Dear Sir John Struthers,—Will you permit us, a few of your old pupils now assembled in Edinburgh attending the meeting of the British Medical Association, to take advantage of the occasion, and offer you our sincere congratulations on the high honour Her Majesty the Queen has recently bestowed upon you? We are conscious how fully you deserved this dignity, and we feel that the branch of science with which you have been so intimately connected and our old University are also honoured thereby. Your long association with the University of Aberdeen as Professor of Anatomy makes us almost forget that Edinburgh has also a claim upon your affections and interests; but whilst willing to accord her the honour of being your alma mater, and the place where the earlier part of your career as a teacher was passed, we old Aberdeen students rejoice that for a number of years at the sister University we had the advantage of your presence, your teaching, your scientific example, your rare advice on all matters of medical education, and your kindly friendship. The department of Anatomy in Aberdeen, whilst you were Professor there, was abreast of the times, not only in respect of practical work, but also of the science of Anatomy, whilst your teaching was far ahead of that of most medical schools in this country. The stimulus which you gave us has not been lost or forgotten, and whilst all of us feel how much we individually owe you for the benefits which we derived, we could point to a number of your old pupils who have obtained eminence in anatomy, surgery, and other branches of medical science. The magnificent class-rooms, laboratories, dissecting-rooms, and histological department which comprise the anatomical section of the University of Aberdeen are the direct outcome of your individual labours in the interests of our alma mater, and the well-appointed anatomical museum is an honour to the branch of science which you so ably conducted. But not only are we proud of the material evidence of your distinguished career as Professor of Anatomy: we remember, respect, and cherish the personality of our old teacher. No study of your literary works, no inspection of your museum preparations, could bring home to others what John Struthers was to us. With that name we associate all that is best and most useful in our medical education, for it was in the anatomy class-rooms that we first learned the meaning of science, and the broad principles which guided the most eminent investigators of the day. It was no mere academic, mechanical, or tutorial education that we received. You presented anatomy to us in a scientific setting which, whilst attracting students, served also to make them think for themselves, and to probe more deeply the secrets of nature. In our student days we respected you as a teacher of the first rank, and now that we have gone forth from the University and gathered experience in other fields, we continue to appreciate more and more the immense advantages we derived from your tuition. We hope, now your active career as a teacher is over, that you may live long to enjoy the honours bestowed upon you, and to extend still further your investigations, in full assurance of the continued affection of your old pupils of the University of Aberdeen.

Sir John Struthers, who owing to recent illness has been unable to attend the meetings of the British Medical Association, was much affected by this spontaneous evidence of respect and affection, and made a reply full of feeling, and containing many happy turns and interesting reminiscences. The original intention was to entertain Sir John to a dinner or luncheon, but his medical adviser peremptorily forbade that excitement.

HOSPITAL FOR SICK CHIL

EDINBURGH,
28TH JULY 1898.

DEAR SIR JOHN STRUTHERS,

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L. D. ALEXANDER, Kilcreggan.
WM. BANNERMAN, Edinburgh.
A. C. BARRON, Dailly.
DAVID BOWER, Bedford.
J. MITCHELL BRUCE, London.
ROBERT W. BURNET, London.
CHARLES A. BUTCHART, Leith.
JAMES CANTLIE, London.
B. CRUICKSHANK, Nairn.
JAMES MACKENZIE DAVIDSON, London.
A. G. DUNCAN, London.
ROBT. FARQUHARSON, M.P., Finzean.
JAMES GALLOWAY, London.
ROBERT JOHN GARDEN, Aberdeen.
JOHN E. GARNER, Preston.
ROBERT GRANT, Glamis.
A. HILL GRIFFITH, Manchester.
A. KEITH, London.
A. M. M'ALDOWIE, Stoke-on-Trent.
P. W. M'DONALD, Dorchester.
A. M'GILLIVRAY, Dundee.
GEO. A. MACONACHIE, Aberdeen.
WILLIAM MEARNS, Gateshead.
G. C. MILLIGAN, Elie.
W. MILLIGAN, Manchester.
THOMAS MILNE, Aberdeen.
JAMES NEIL, Oxford.
DAVID NICOLSON, London.
JOHN M. RATTRAY, Frome.
ALEXANDER REID, London.
JAMES REID, Windsor Castle.
WILLIAM REID, Aberdeen.
JOHN RUXTON, Blackpool.
ROBERT SHEILS, Birmingham.
JAMES SIMPSON, Tullynessle.
W. J. SIMPSON, London.
W. JAPP SINCLAIR, Manchester.
A. R. URQUHART, Perth.
J. O. WILSON, Huntly.
J. D. WYNESS, Aberdeen.

University of Aberdeen.

6 August, 1898

The Dr Jas. Greig Smith Memorial.

Dear Sir,

The University Court at its recent meeting received from the Committee who had charge of the matter intimation of the arrival and the erection in the corridor of the University Union of the brass memorial-tablet to the memory of one of our distinguished graduates the late Dr Jas. Greig Smith, of Bristol.

The Court received this announcement with much satisfaction, and instructed me to request you to be so good as to convey to the subscribers its cordial thanks for this interesting memorial and to express its appreciation of those feelings of respect ~~of~~ which the memorial will commemorate.

I am, dear Sir,
faithfully yours,
Robert Walker,
Sec.r Univ.r Court.

Jas. Cantlie, Esq.re, M.D.
46 Devonshire Street
Portland Place
W.

The Physical Requirements of the Public Services

Lecture by Professor Kenneth McLeod, L.L.D.

Syllabus.

1. Circumstances under which Civil Practitioners may be asked to give an opinion on questions of physical fitness.
2. The objects to be held in view as compared with examination for life insurance capacity and pensionary liability.
3. Hereditary predisposition; inquiries necessary in some cases.
4. Previous ilnesses; question of constitutional character, liability to recurrence or impairment of soundness.
5. Physique; physical equivalents; present standard; method of taking and recording chest measurements.
6. Soundness; difficulties arise mostly with reference to minor ailments, malformations, defects or deformities.
7. Cutaneous system; scars, eruptions, glandular swellings, tumours. Vaccination deserter spots
8. Nervous system; fits, insanity, paralysis, spinal curvatures.
9. Respiratory system; polypus, flat chest, pigeon breast, asthma, aphonia, cough.
10. Circulatory system; irritable heart, functional murmurs, varicose veins, and varicocele.
11. Digestive system; teeth, tonsils, piles etc., rupture. Loss of teeth a stopped tooth is considered best
12. Genito urinary system; undescended testicle, hydrocele, stricture, gonorrhea, examination of urine.
13. Muscles, bones and joints; hammer toe, crowded and webbed toes, bunion, flat foot, talipes, stiff joints, fracture and dislocation.
14. Vision; standards for various services, mode of examination, Snellen's types, lenses, colour-blindness. Holmgren's wools.
15. Hearing; conversation, watch, tuning fork.
16. Speech; stammering.
17. Discretion; exercised by Examiners.
18. Conflicting interests; Certificates, Cases. grounds

Jaeger - vision

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Cerati ad ℥i
} lead opium ointment

℞ Bismuthi Subnitrat ℥ii

Morphinae gr i

Aqua Rosae ʒi

Mag! Zinci oxidi ʒss

Cerati ad ℥i.

M! ung!