

done in his principal's practice. Where special work is done by an assistant during an emergency, it is usual for the principal to give him an increase of salary, or a share of the fees derived therefrom, and the amount allowed by B. to A. seems fair and reasonable. In spite of his direct relations with the guardians, A. does not occupy the position of an independent extra vaccinator.

MIDWIFERY FEES.

M. C. M.—A country practitioner writes that he was called one night to a midwifery case six miles from his residence, and on arrival found a midwife in charge, who was unable to deliver the patient of a second child. He gave the necessary assistance, and visited the patient the next day, when he was paid a fee of one guinea. The following night he was again sent for, and found the patient showing symptoms of puerperal fever. He attended her for this for about six weeks, and on sending in a claim the husband declined to pay on the ground that the whole attendance was included in the guinea fee. Can he recover in the county court?

. Where a medical man attends a confinement the fee paid is usually considered to cover attendance up to the tenth or fourteenth day. All further attendance is usually paid for extra, and our correspondent would probably have no difficulty in recovering charges for at least this portion of his attendance.

UNIVERSITIES AND COLLEGES.

UNIVERSITY OF LONDON.

MATRICULATION EXAMINATION.

THE number of successful candidates at the Matriculation Examination in January was 731. The Honours Division contained 12 names, the First Division 410 names, and the Second 309.

CONJOINT BOARD IN ENGLAND.

THE following candidates passed the First Examination of the Board in the subjects undernoted:

In Chemistry.—L. E. Acomb, Middlesex; G. K. Awbery, King's College; A. J. K. Brayton, Owens College, Manchester, and University College, Liverpool; W. A. J. M. Briggs, Owens College, Manchester, and St. Thomas's; W. W. D. Chilcott, Charing Cross Hospital; R. M. Coalbank, St. Bartholomew's; G. W. Collinson, Yorkshire College, Leeds, and Halifax Technical School; G. H. Curtis, Birkbeck Institute; G. Eager, King's College; F. G. Edholm, Birkbeck Institute; L. G. H. Furber, Cambridge, St. Bartholomew's, and Hartley College; W. J. G. Gayton, London; H. G. Gibson, Felsted school; V. B. Green-Armytage, University College, Bristol; G. Holyrde, Yorkshire College, Leeds; T. J. Jenkins, University College, Cardiff; V. G. Johnson, St. Mary's; M. A. Kenny, Yorkshire College, Leeds; W. K. Kershaw, Owens College, Manchester; W. W. King, University College, Bristol; A. L. Loughborough, St. Thomas's; J. L. Meynell, London; A. J. Mundy, University College, Bristol; E. Morgan, F. Morres, C. M. Ockwell, and H. A. Pallant, Guy's; D. Phillips, St. Mary's; F. E. L. Phillips, London; S. K. Raina, Allahabad, Charing Cross, King's College, and Birkbeck Institute; H. T. Rossiter, University College, Bristol, and St. Thomas's Hospital; H. K. Salsbury, University College, Bristol; G. A. Simmons, St. Thomas's; F. Smith, Firth College, Sheffield; L. E. M. Smith, Charing Cross; F. H. Stephens, St. Mary's; E. J. F. Thomas, University College, Bristol; G. Wachter, Guy's Hospital; J. G. Watkins, St. Bartholomew's; J. W. Whiteman, University College, Bristol; A. B. Wolfenden, Yorkshire College, Leeds, and Halifax Municipal Technical School.

In Practical Pharmacy.—G. K. Awbery, King's College; F. Barnes, Guy's; H. F. Bodvel-Roberts, Cambridge and St. Bartholomew's; R. Burges, London; A. H. Davis, St. George's; C. J. S. Dismore, Guy's; K. A. C. Dolg, Westminster; C. R. B. Eyre, St. Thomas's; G. E. O. Fenwick, Otago, and University College; C. A. Godson, St. George's; E. H. Griffin, Cambridge and Guy's; R. G. E. Grote, Charing Cross; C. J. H. Gunning, St. George's; G. R. Hannon, King's College; H. F. Hatfield, Guy's and St. Bartholomew's; G. W. Heron, Westminster; A. E. Hills, E. T. Holland, St. Thomas's; B. Hood, Charing Cross; F. R. Humphrey, M. O. Hunter, St. George's; E. Joseph, J. A. Laughton, Charing Cross; R. E. H. Leach, G. M. L. Lester, Oxford and St. Thomas's; G. M. Levick, St. Bartholomew's and University College; H. Nicol, Westminster; B. Pick, St. George's; C. H. Reinhold, J. F. Rey, Guy's; E. S. Routley, St. Mary's; M. W. Shutte, St. George's; F. M. V. Smith, Guy's; C. Speers, St. Mary's; F. J. Turner, Guy's; G. S. Welham, Charing Cross; F. E. Whitehead, A. C. Wilson, and F. H. Wood, St. Bartholomew's; G. E. Wood, St. Mary's.

In Elementary Biology.—R. N. W. Biddulph, University College, Bristol; A. J. K. Brayton, Owens College, Manchester and University College, Liverpool; A. Cordon, Mason College, Birmingham; H. D. Dakin, Yorkshire College, Leeds; L. E. Davies, University College, Liverpool; H. A. de Pinna, Middlesex; F. C. Doble and G. Eager, King's College; H. G. Gibson, Felsted School; C. V. Griffiths, King's College; W. R. Greening, J. K. A. Helm, H. J. Hills, Guy's; H. G. Hobson, Middlesex; G. Holyrde, Yorkshire College, Leeds; C. M. Kennedy and J. I. F. Knight, London; T. G. Lewis, King's College; A. L. Loughborough, St. Thomas's; P. J. Lush, London; O. Le F. Milburn, Birkbeck Institute; M. K. Nelson, University College, Belfast; J. H. Mayston, E. Morgan, G. H. Morris, G. R. Phillips, E. E. Rendle and A. T. Rivers, Guy's; C. F. Rumsey, Charing Cross; G. B. Scott, St. Bartholomew's; G. N. B. Sebastian, St. George's; S. Slade, Middlesex; F. Smith, Firth College, Sheffield; H. McL. Staley, Owens College, Manchester; A. W. Swinburne, Yorkshire College, Leeds; R. H. E. Stevens and A. C. Watkin, University

College; R. Willan, Guy's; J. D. Williams, University College, Belfast.

The following candidates have passed the Second Examination of the Board in the subjects undernoted:

In Anatomy and Physiology.—W. G. Attenborough, King's College; J. M. Barrionucvo and A. M. Benett, Guy's; C. M. Bernays, St. Thomas's; J. B. Binns, St. Bartholomew's; W. Bowater, Mason College, Birmingham; H. A. Bodkin and L. H. Bowkett, London; R. J. Brogden, University College, Cardiff; G. H. Cheyne, Guy's; P. D. MacI. Campbell and G. P. Claridge, St. Mary's; T. A. Clarke, King's College; O. C. P. Cooke, London; H. P. Costobadie, Guy's; J. A. Cowie, B.A., B.Sc., New Zealand, Otago and Glasgow Universities; J. R. Davies, University College, Cardiff; A. Dixon, St. Mary's; E. M. Dolan, Yorkshire College, Leeds; P. A. S. Dyson, Guy's; S. Field, St. Mary's; E. S. H. Gill, University College, Liverpool; A. D. Griffith, King's College; H. Gray and E. C. Hayes, St. Bartholomew's; S. C. Hayman, University College, Bristol; F. C. Hepburn, Cambridge University; R. R. James, St. George's; H. E. Kitchin, B.A., Cambridge, and Owens College, Manchester; A. Leeming, Guy's; A. S. Littlejohns, B.A., Cambridge and Guy's; S. H. Lockwood, St. Mary's; C. Loddiges, St. Bartholomew's; F. J. Macphail, University College, Liverpool; E. W. Matthews, King's College; F. W. Morgan, University College, Bristol; E. B. Miles, H. F. F. Mortimer, and W. G. O'Malley, London; A. O'Neill, St. Bartholomew's; H. F. Powell, University College; W. H. P. Parker, University College, Cardiff; H. E. Priestly, St. George's; L. Rawes, H. W. Read, St. Thomas's; F. J. Rees, Calcutta; W. Reeve, Guy's; F. M. P. Rice, St. Bartholomew's; T. M. Roberts, University College; E. W. Routley, Guy's; A. Salmon and E. L. Sandiland, London; G. M. Taylor and W. R. M. Turtle, London; T. R. Waitenberg, M.A., Oxford and Owens College, Manchester; F. Weber, St. Bartholomew's; W. J. Weston, St. George's; L. White, Westminster; T. H. Watkins and W. J. Wilkinson, St. Thomas's; E. D. Wolff, King's College.

In Anatomy only.—U. M. Asplen, King's College; W. R. Pagen, London.
In Physiology only.—J. W. W. Hogan, Madras; C. F. Stileman, St. George's.

ROYAL COLLEGE OF SURGEONS IN IRELAND.

Fellowship Examination.—Mr. F. J. C. Heffernan, Miss M. R. Kapadia, Mr. H. Pringle, and Mr. M. J. Russell have passed the examination for the Fellowship; and Mr. F. J. S. Heaney, Miss C. McCrea, and Mr. R. S. Ryce the Primary part of the same examination.

SOCIETY OF APOTHECARIES OF LONDON.

PASS LIST, February, 1902.—The following candidates passed in:
Surgery.—W. V. Braddon (Section I), Cambridge and Manchester; T. S. Davies, St. George's Hospital; E. N. de V. Dawson (Section II), St. Thomas's Hospital; J. C. S. Dunn, St. Bartholomew's Hospital; B. Gauld (Section II), London Hospital; S. F. Hickman (Sections I and II), Royal Free Hospital; H. Jacques (Sections I and II), London Hospital; C. C. Morgan (Section II), St. Bartholomew's Hospital; E. Osborne (Section I), Birmingham; P. G. Sheppard (Sections I and II), Cambridge and Liverpool; J. H. Williams, London Hospital.

Medicine.—J. E. Bolton (Section II), Leeds; R. Gillett (Sections I and II), Royal Free Hospital; C. E. A. Huddart (Sections I and II), London Hospital; M. E. S. Scharlieb (Sections I and II), Royal Free Hospital; C. Watson (Sections I and II), Dublin and Westminster Hospital.

Forensic Medicine.—D. Fletcher, St. Bartholomew's Hospital; M. E. S. Scharlieb, Royal Free Hospital; C. Watson, Dublin and Westminster Hospital.

Midwifery.—W. C. P. Bremner, University of Toronto; I. Griffith, London Hospital; M. E. S. Scharlieb, Royal Free Hospital; R. H. Terry, Guy's Hospital.

The diploma of the Society was granted to J. E. Bolton, E. N. de V. Dawson, D. Fletcher, R. Gillett, C. E. A. Huddart, P. G. Sheppard, and C. Watson.

PUBLIC HEALTH
AND
POOR-LAW MEDICAL SERVICES.

HEALTH OF ENGLISH TOWNS.

In seventy-six of the largest English towns, including London, 8,844 births and 6,059 deaths were registered during the week ending Saturday last, February 22nd. The annual rate of mortality in these towns, which had been 17.9, 20.6, and 22.6 per 1,000 in the three preceding weeks, further rose last week to 24.4 per 1,000. Among these large towns the death-rates ranged from 13.1 in Ipswich, 13.4 in Derby and in Barrow-in-Furness, 14.2 in West Bromwich, and 14.7 in Portsmouth, to 29.7 in Wigan, 29.8 in Rochdale and in Newcastle, 32.7 in Plymouth, and 36.2 in Merthyr Tydfil. In London the rate of mortality was 29.3 per 1,000, and exceeded by 7.0 the mean rate in the seventy-five other large towns, which was 22.3 per 1,000. The death-rate from the principal zymotic diseases in the seventy-six large towns averaged 2.0 per 1,000; in London this death-rate was equal to 2.5 per 1,000, while it averaged 1.8 in the seventy-five other large towns, among which the highest zymotic death-rates were 4.2 in Brighton, 4.4 in Bootle and in Merthyr Tydfil, 5.0 in Hanley and in Stockton-on-Tees, 5.3 in Burnley, and 5.6 in Rotherham. Measles caused a death-rate of 1.7 in Stockport, 1.8 in Preston, 2.8 in Rotherham, 3.0 in Merthyr Tydfil, and 5.3 in Burnley; scarlet fever of 1.0 in Tottenham, in South Shields, and in Newcastle; diphtheria of 1.7 in King's Norton, 2.0 in Burton-upon-Trent, 3.0 in Stockton-on-Tees, and 4.2 in Hanley; whooping-cough of 1.3 in Brighton, 1.4 in Birmingham and in Gatshead, 1.5 in

Coventry, 1.7 in Bournemouth, and 2.6 in Bootle; and diarrhoea of 1.8 in St. Helens. The mortality from "fever" showed no marked excess in any of the large towns. Of the 69 fatal cases of small-pox registered last week 64 belonged to London, 2 to Tottenham, 2 to West Ham, and 1 to East Ham. There were 1,321 cases of small-pox under treatment in the Metropolitan Asylums Hospitals on Saturday last, February 22nd, against 1,102 and 1,185 at the end of the two preceding weeks; 502 new cases were admitted during the week, against 499, 287, and 390 in the three preceding weeks. The number of scarlet fever cases in these hospitals and in the London Fever Hospital, which had declined from 3,137 to 2,455 at the end of the eight preceding weeks, had further decreased to 2,406 on Saturday last; 219 new cases were admitted during the week, against 226, 277, and 260 in the three preceding weeks.

HEALTH OF SCOTCH TOWNS.

DURING the week ending Saturday last, February 22nd, 889 births and 817 deaths were registered in eight of the principal Scotch towns. The annual rate of mortality in these towns, which had been 21.8, 23.9, and 23.6 per 1,000 in the three preceding weeks, rose again to 25.3 per 1,000 last week, and was 0.9 per 1,000 above the mean rate during the same period in the seventy-six large English towns. The rates in the eight Scotch towns ranged from 22.1 in Edinburgh and 23.7 in Paisley, to 28.4 in Leith and 37.1 in Greenock. The zymotic death-rate in these towns averaged 2.5 per 1,000, the highest rates being recorded in Dundee and Greenock. The 386 deaths registered in Glasgow included 6 from small-pox, 7 from measles, 15 from whooping-cough, 4 from "fever," and 12 from diarrhoea. Three fatal cases of diarrhoea were recorded in Edinburgh; 3 of measles and 5 of diarrhoea in Dundee; 4 of whooping-cough in Aberdeen; 2 of measles in Paisley; 4 of measles and 3 of diphtheria in Greenock; and 1 of small-pox in Perth.

BOARDS OF GUARDIANS AND THEIR MEDICAL OFFICERS.

From a long article which appears in the *Yarmouth Mercury* bearing date February 22nd, we gather that the Poor-law guardians of Yarmouth were at their last meeting engaged for a long time in discussing the question as to the remuneration to be paid to their workhouse medical officer, Dr. H. Collier. We gather that he has held this appointment for the last eight years, and it appears that the Board has during this period proved himself to be an efficient and reliable medical officer.

A recent application from Dr. Collier for an increase of salary led to the appointment of a Committee, which, after an interview with Dr. Collier, considered that he had established a fair claim for the request he had made, and recommended the Board to increase his stipend by an additional £25, thus raising it to £165 per annum. This report of the Committee was not adopted by the Board, as the majority of the guardians present voted against it.

So far as we are able to understand the merits of this question from the report referred to, we can only come to the conclusion that Dr. Collier's claims have not met with the attention which he might fairly have expected from a Board which had so readily acknowledged the value of his past services.

An irregularity in connexion with his appointment as medical officer appears to have existed from the very first, and a second one, not less grave, to have cropped up since. In consequence apparently of the regulations under which Dr. Collier was appointed to office not having been strictly complied with by the guardians or enforced by the Local Government Board, it would seem that he is now likely to be a sufferer. It is stated that previous to Dr. Collier's appointment the guardians passed a special resolution to the effect that the Board would, in addition to the salary paid to the medical officer, provide him with all instruments and appliances required for the treatment of the patients in the workhouse, and it was on these terms that Dr. Collier accepted office; they were subsequently strictly adhered to for several years by both parties. There came a time, however, when on Dr. Collier applying for some dental instruments, this request and his right to make it were referred to the Local Government Board, whose decision was against Dr. Collier.

The question will naturally be asked: How can this be correct after the resolution which the guardians had passed previous to Dr. Collier's appointment, and the explanation would appear to be the following: When the written contract which the guardians made with him was subsequently framed and submitted for confirmation to the Local Government Board, no mention of this special resolution of the guardians was inserted, nor was any allusion made in it to the proposed supply of instruments by the guardians. The consequence was that the Local Government Board, on considering the contract which the guardians had entered into, did not sanction the proposed supply of instruments, and probably never knew that this plan had ever been contemplated. Dr. Collier himself was no doubt technically negligent when he signed this contract, which he probably assumed was strictly in accordance with the terms agreed upon.

Now comes a further question which we should like to see satisfactorily answered: As the Local Government Board had, in consequence of this defect in the contract, never sanctioned the supply of instruments at the expense of the ratepayers of Yarmouth, how did it happen that this expense was for several years incurred by the Board without any objection to it being raised? It appears to have altogether escaped the notice of the auditors of the Local Government Board as well as that of its other officials.

A further irregularity appears to have crept in when an increase of salary was made some time back on the understanding that it should include medical attendance on some of the paid officials of the Yarmouth guardians. We are surprised to find that the Local Government Board should have sanctioned, either tacitly or indirectly, any such arrangement. Without such sanction this cannot be binding on Dr. Collier, and we have, moreover, grave doubts whether it is within the power of any public body to make any such terms with a workhouse medical officer. We shall not therefore be surprised to hear that the Yarmouth guardians have no power to compel their medical officer to give medical attendance to their paid officials, though this part of the agreement they appear to

be specially desirous to enforce; but how they can do so and at the same time refuse to find the instruments for Dr. Collier's use, which they specially engaged to do, is altogether beyond our comprehension.

REMUNERATION OF MEDICAL OFFICERS OF INFECTIOUS HOSPITALS.

W. R. writes: In reply to "G. P. E." I am medical officer to a small-pox temporary hospital of 8 beds for a combined rural and urban districts committee. I receive five guineas a year retaining fee, and three guineas a week during the occupation of the building by a patient or patients.

H. T. S. writes: The basis on which I would suggest payment is at the rate of 10s. per head per week, with a minimum salary of £3 (or 3 guineas) per week, and a maximum according to the number of beds. If the hospital is not occupied perhaps a retaining fee of 1 guinea per week would be reasonable. I have had a little experience in this matter, as I have recently been appointed medical officer to our temporary hospital for small-pox here.

OBITUARY.

SEYMOUR GRAVES TOLLER, M.D. LOND., M.R.C.P.

WE regret to report the death of Dr. Seymour Toller of Cairo on Wednesday, February 19th, after an illness of about ten days' duration, the details of which have not yet arrived.

Dr. Toller was 35 years of age. He was educated at Malvern College, where he obtained an exhibition. He entered the Medical School at St. Thomas's Hospital as a first year's student in 1885, obtaining the Entrance Science Scholarship. From that time his career shows an uninterrupted list of distinctions obtained not only in his own medical school, but in the wider sphere of the London University. At St. Thomas's, amongst his other prizes, he gained the Mead Medal for Practical Medicine. In 1886 he was awarded the Gold Medal in *Materia Medica* at the Apothecaries' Hall. At the M.B. examination of the London University he secured the University Scholarship and Gold Medal in Medicine and in Obstetric Medicine. In the M.D. examination also he won the Gold Medal. In 1896 he took the M.R.C.P.

In the meantime, that is from the year 1889, he had been actively engaged in various hospital appointments, culminating in that of Resident Assistant Physician to St. Thomas's Hospital for the years 1894 to 1897. At the termination of his three years' office his dearest hopes were gratified by his election as Assistant Physician to the Hospital Staff. But the clouds were already lowering over his head. Almost immediately after his appointment he was compelled to resign it on account of the breakdown of his health. He had a severe attack of what at first appeared to be influenza, but in the course of his illness the sputum was found to be teeming with tubercle bacilli. In a few months' time his health to outward seeming was fully re-established, but it was clearly too dangerous for him to attempt to remain in this country; he accordingly applied for and obtained the posts of Physician to the Kas-el-Aini Hospital, Cairo, and Professor of Clinical Medicine in the Medical School. There, with the exception of summer visits to this country, the remaining years of his life were passed. He threw himself with all his energy into both the hospital and teaching work, and in addition had to satisfy the demands of a rapidly increasing practice. His health could not bear the strain, and a few months ago he resigned his hospital appointments.

Dr. Toller was known to many outside his profession as a brilliant musician. For many years he played the violin in the orchestra of the Royal Amateur Orchestral Society, and also had the honour of a seat on the Council. At St. Thomas's, for ten years or more, no function was complete without one of his violin solos.

Dr. Toller was possessed of a very remarkable personal charm, the outcome of his affectionate impulsive nature. Everything he did was done with an enthusiasm which seemed the keynote of his character. He was perhaps inclined to be oversensitive, and at times took offence where no offence was meant, but the artistic temperament will exact its toll, and none of Toller's friends loved him the less for these little ebullitions. He had contributed little to medical literature, but the exactions of hospital appointments rendered this impossible, and his untimely death has robbed the future of its fruit. The wonder is, not that he did so little, but that in his short span of life he achieved so much. Few professional