poisonous alkali into a harmless acid and salt, or in what other specific way it acts, I am not prepared to say, but the above is strictly in accordance with facts.

I am, Sir, yours truly,

W. BROWN MOIR, M.D.

Belford Hospital, Fort William, N.B.

EDINBURGH MORTALITY RETURNS.

To the Editor of THE LANCET.

SIR,—Your intelligent criticism of these returns has already borne fruit. The Registrar-General has acknowledged the inaccuracy of the weekly statement issued from his office, and he explains that, *per incuriam*, the clerk in charge failed to recognise a certified case of diphtheria and one of whooping-cough. The discrepancy in the population return is accounted for by the fact that the annual increase is made by us in the first week of July; and further, that for registration purposes a portion of the extra urban population is included by the Registrar-General in the population of Edinburgh.

I differ from you as to your objection to our custom of eliminating the deaths of strangers in our infirmary, which, from its world-wide reputation, attracts all and sundry, and I submit that, in a small population like ours, it would be misleading to debit Edinburgh with these deaths, which have no connexion with the sanitary state of the town. As to the definition of diseases, which appears to you to be imperfect, it must be remembered that the statement is issued weekly, and that the only abdominal disease of interest to the sanitarian—viz., diarrhoea,—is specially noted.

Your space is too valuable to admit of a discussion of what to officers of health and the public is important—viz., the structure of these weekly reports, and the advisability of similar documents being issued on Monday mornings in all the large centres of population. It is, in my opinion, simply a question of time. I trust to live to see these returns as eagerly scanned by the ratepayers as the price of stocks and the state of the funds.—I am, Sir, yours truly,

HENRY D. LITTLEJOHN, M.D.

Edinburgh, July 11th, 1882.

PERSONATION AT MEDICAL EXAMINATIONS.

To the Editor of THE LANCET.

SIR,—I am sorry to be obliged to inform you that in a paragraph in your issue of July 8th, you have been misinformed as to the statement of facts. The real condition of affairs is as follows: A person wrote me from Dublin offering me the amounts mentioned if I would personate him at an examination. I thought it my duty to the profession and also to the public to communicate with the Secretary of the General Medical Council at Oxford-street; and, he having referred me to the Branch Council in Ireland, I wrote to them, and the Secretary requested me to continue the correspondence on behalf of the Council there, which led to an exposure of an individual assuming a false name (though I believe a registered medical student) in order to gull me into the belief that he was really the person so registered—e.g., Smyth is very like Smith, and if Smyth were registered as Albert Smyth in the students' register, an Albert Smith might easily pass himself off as the former.

My sole object in exposing this contemptible affair was to save some unfortunate and impecunious brother professional from disgracing himself by receiving a bonus for a contemplated fraud.

I venture to hope this may be a warning to others engaged in like practices.—I am, Sir, your obedient servant,

York, July 8th, 1882.

G. DE COURCY MORRIS, M.D.

EDINBURGH.

(From our own Correspondent.)

MORISON LECTURES ON INSANITY.

IN his fifth lecture Dr. Hamilton completed his exposition of the connexions between the several parts of the brain and between these and the spinal cord. He then proceeded to sum up, in the form of an elaborate diagram, the principal points to which he had directed attention. Passing then to

speak of the functions of the basal ganglia, so far as they are at present known from the results of experiments on the lower animals and pathological lesions in man, he said he could not help thinking that the functional importance of all these ganglia had been very much over-estimated. They were formed in exactly the same way as the convolutions were, simply by thickening of the walls of the various cerebral vesicles. In the lower animals they were very much more highly developed than in man, relatively to the extent of the cortical substance. Destruction of the caudate nucleus produced, so far as was known, very little effect, provided that the inner capsule was uninjured. In one case in which he made a post-mortem examination nearly the whole of the nucleus was destroyed, the inner capsule, however, remaining untouched. The person had no paralysis of motion. The symptoms were of the most obscure nature, and there was nothing in them to indicate that the lesion was situated in that particular part. He thought therefore that the statement which had often been made, that the corpus striatum, or the caudate nucleus, was the centre for motion, was incorrect. With respect to the lenticular nucleus there was a case under the care of the late Professor Sanders in which both lenticular nuclei were destroyed. The person suffered from partial paralysis of the lower extremities, but what was extremely curious was that there was very considerable atrophy of the optic nerve on both sides, and also of the olfactory. The explanation of that was the band connecting the optic nerve with the lenticular nucleus loop. With regard to the optic thalamus, there was a case in which the whole of the ganglion on one side was destroyed except the posterior part. There was no loss of sensation; nothing to indicate that the thalamus was the seat of disease. What, then, Dr. Hamilton asked, could be said of these ganglia? All that could be said was that certain functions, which, apparently, were situated in the basal ganglia, had been transferred to the cerebral cortex by a process of evolution. When it was considered that these ganglia were produced simply by thickening of the brain vesicles, it surely was not a very great stretch of imagination to say that in process of evolution a certain thickening would occur in the cortex, and that gradually functions, which primarily were situated in the basal ganglia, became transferred to that particular part of the brain. It had been found that if the motor centres of the cortex in the dog were excised the animal in the course of time recovered, if not the whole of its motor power, a considerable deal of it. Now, in the dog the basal ganglia were of enormous thickness; and he thought it was by no means unreasonable to suppose that in the lower animals the ganglia had a very much higher function than in man, that they had certain motor functions which in man were transferred to the cortex. He thought everything showed that in man the motor centres had been in great part transferred to the cortex of the cerebrum, whereas in the lower animals the basal ganglia have to be looked upon as discharging, if not the whole, at least a considerable part of that service. The higher we got the more evidence there was that the motor centres, which were seated in the basal ganglia in the lower animals, were transferred to the cortex in man, the monkey, and other animals high in the scale.

The sixth and concluding lecture consisted of a demonstration by means of the limelight of a series of preparations illustrative of the different points which had been described in the previous lectures. It is impossible to speak too highly of the beautiful preparations, and Dr. Hamilton deserves the greatest credit for having introduced a method which promises to clear up many obscure points in the coarse anatomy of the brain. I am glad to hear that Dr. Hamilton intends shortly to publish his method in full, and to lay the results of his researches before the profession in the form of a book.

GLASGOW.

(From our own Correspondent.)

DR. ANDREW BUCHANAN, late Professor of Physiology in Glasgow University, died on Sunday last, at the advanced age of eighty-four. One of the best known and most highly respected of the members of the medical profession in the city has thus passed away. He graduated in Glasgow University exactly sixty years ago, and thus may be said to belong to that past generation of surgeons