proved all that could be desired. By degrees the neuralgia has quite passed away, all invalid habits have been cast off, and my young friend has for the last twelve months been as bright and active a girl as you could wish to see. I am persuaded that the plan of recommending young ladies, when they complain of headache and depression (most likely resulting from dyspepsia dependent on errors in diet), to discontinue mental exertion, and to become idle, is a great mistake. Supposing the absence of organic disease, sufficient out-door exercise in good air, simple, nutritious, regular food, and early sleep, with a fair supply of oxygen at night, no harm can come of hard work by body or mind. I have been a toiler for thirty-five years, and enjoy perfect health, although it has never been my habit to rest except when asleep.

I am, Sir, yours, &c.,

M.D.

June 28th, 1875.

CATHETER STAFFS.

To the Editor of THE LANCET.

SIR,—Allow me to inform Mr. Teevan that the first surgeon who employed a staff with a sliding catheter for perineal section was the late Dr. Mackenzie, of the Royal Infirmary, Edinburgh, who used it in the year 1854 (*vide THE LANCET*, vol. i. 1857, page 282).

I remain, Sir, your obedient servant,

Surrey-street, July, 5th, 1875.

R. WILLIAM DUNN.

BIRMINGHAM.

(From our own Correspondent.)

A SPECIAL Committee of Investigation has been deliberating for some months on the general system of administration of the Queen's Hospital with a view of ascertaining the means by which a balance between income and expenditure may be effected. A report has just been issued by the committee, which will be submitted to the governors on the 11th inst. This report contains the following recommendations: "The abolition of the privileged system, the cessation of notes, and the working of the hospital on the basis of free admission, regulated solely by the needs and fitness of the applicants and by the means at the disposal of the charity." In conjunction with this scheme they propose, except for accidents and urgent cases, a registration fee of one shilling for each patient, such fee to be renewed at the expiration of a month. Much excitement has arisen, and not a little opposition is being shown to the adoption of the free system by some of the subscribers and by the working classes, while the registration fee is also condemned by a majority of the staff of the hospital. The free system is justly allowed to possess the merit of giving absolute freedom to the medical staff in deciding as to the medical fitness of applicants for relief, and is no doubt the simplest and most effectual way of working this or any other hospital. The registration fee, however, had better be given up; it is no integral part of the free system, but, on the contrary, it will be looked upon by many of the artisan class as a direct payment for medical attendance, and will therefore render the hospital unpopular with them, and it will also alienate a large number of the medical profession, who already believe that the hospital attends to many patients who could well afford to pay them a fair sum for their advice. The ticket system cannot be with propriety continued, for it is evidently not effective, and is not appreciated by the governors. During 1874, out of 1863 in-patients who were admitted, only 345 were admitted by ticket, and 1338 were admitted free, while of the out-patients nearly one-half were attended to without tickets. The registration fees on the number of patients treated in 1874 would produce £847, a sum quite inadequate to cover the estimated deficit for the ensuing year, which is set down at £1718. As, however, some of the artisans and middle-class subscribers will very likely withdraw their subscriptions should this plan be adopted, there will ultimately be rather a loss than a gain to the hospital from its adoption.

Four applications have been sent in for the office of coroner, two by members of the medical and two by mem-

bers of the legal profession. One of the latter, Mr. Alderman Hawkes, a sexagenarian who is known as the Nestor of the so-called Liberal party in Birmingham, will no doubt be elected, as a majority of the corporation absolutely invited Mr. Hawkes to become a candidate directly the office was declared vacant, and promised him their support even before they knew who had or even who were likely to come forward for the appointment. Several medical practitioners of good standing, among them the present medical officer of health for Birmingham, would have become candidates, but they very wisely and properly withdrew when they found that the invitation to send in applications and testimonials was all a farce, and that the appointment of Mr. Hawkes, as a reward for political services to the Liberal party, was already a *fait accompli*.

Wolverhampton is not to have a park after all. The Mayor has done his best to promote the interest of his fellow-townsmen, but the parsimony and narrow-mindedness of the great majority of the Town Council have prevented the proposed purchase of the park out of the rates.

Dr. Ballard thought that Sedgley was the most unwholesome town in the Black Country, when he examined it, but the palm is now awarded by him to Oldbury. He describes the place as utterly devoid of drainage, the solids and sewage lying about on all sides, impregnating the water-supply, and filtering in many places into the houses. He finds that only 1172 out of 3475 houses receive the company's water, and that the rest depend on surface wells, all of which are more or less polluted; as a natural result the death-rate has risen from 22 to 28 per 1000, and out of the total deaths in some parts of the town during the last five years, more than 50 per 1000 have arisen from zymotic diseases. The Local Board, although censured by Dr. Thorne for a similar condition of things four years ago, did nothing but appoint an officer of health at the munificent salary of £30 per annum, and channel a few of the streets. Dr. Ballard has informed the Local Board that if steps are not at once taken to remedy the present insanitary state of the town, the Government will compulsorily carry out the necessary reforms.

Birmingham, July 4th, 1875.

Obituary.

M. DEMARQUAY.

DEMARQUAY, whose death we announced with regret in our last issue, was one of the most active, laborious, and inventive French surgeons of the day. Through his elaborate productions, as well as his valuable additions to practical surgery, he had won for himself a distinguished and enviable name in surgery, not only in his own country, but wherever surgery is studied and practised.

He was of most humble origin. He literally rose from the ranks, and by dint of strong will, unflinching purpose, and hard work, after having been compelled to take various occupations for a livelihood, he attained one of the highest scientific and professional positions in Paris. About forty years ago he left his father's house at Longueval, in Somme, with the intention of following some manual trade, and two weeks before his death he quitted Paris, where he had become rich, popular, and esteemed, to go and die in his native place, on a large estate which he had bought when wealth had come with reputation and honour.

His scientific titles, his various additions to practical surgery, his numerous inventions and modification of modes of operating, or of surgical contrivances, would be too long to mention in this short necrological notice. The most widely known of his elaborate works of surgery are those on Glycerine, Surgical Pneumatose, Renovation of Tissue, and his complete and interesting relation of the working of the Ambulances of the Press during the Paris siege. But these are only a few of his literary productions. Demarquay was an incessant writer. His communications to the Paris medical press, to the Academy of Sciences and that of Medicine, were most frequent; and they all bore the stamp of great quickness of intellect, keenness of inquiry, and an inventive and practical turn of mind.