THE SERVICES.

THERE are thirteen votes in the Army Estimates among the effective services. The first, which is the largest item of all, is for pay of the Army. This amounts to £5,635,000, against £5,632,700, an increase of £2300. The vote for medical establishments amounts to £290,100, a decrease of £2700 on the current year—£292,800.

THE ROYAL WARRANT FOR THE INDIAN MEDICAL SERVICE.

The Royal Warrant for the above service published in the Indian journals is the outcome and consequence of what has been done in this country for the Medical Staff. It cancels former warrants, and lays down the substantive ranks and military titles of the medical officers of the Indian military forces on the lines adopted in the case of the Medical Staff, and it revises the rules for the promotion and precedence of the Indian Medical Service in accordance with the latest ruling on the subject, with such modifications and adaptations as are necessary for the purpose.

Surgeon-General Geo. Smith, M.D., late Indian Medical Department, Madras Presidency, died on the 23rd ult.

Dr. George J. Shaw, Deputy-Inspector-General, Bombay Army, and late Assay Master, Madras Mint, died at Ventnor on the 3rd inst., aged seventy-three.

Surgeon-Captain J. D. Moir, Army Medical Staff, has been appointed to the Brigade of Foot Guards in London.

The following Surgeon-Captains of the Medical Staff have now completed twelve years' service, and become entitled to promotion to the rank of Surgeon-Major:—F. R. Barker, M.B.; A. Keogh, M.D.; C. B. Hill; J. R. A. Clark, F.R.C.S. Edin.; H. J. Michael; T. Dorman, M.D.; A. W. P. Inman, M.B.; T. M. Corker, M.D.; E. H. Myles, M.B.; T. B. Moffitt; C. A. Webb; H. Martin, M.B.; A. E. J. Croly, F.R.C.S.I.; R. O. Cusack; E. F. Smith; W. D. A. Cowen; R. H. Forman, M.B.; S. J. Flood, F.R.C.S. Edin.; G. W. Robinson; J. Watson, M.D.; O. Todd, M.B.; A. O. Geoghegan, M.D.; J. D. Day, M.B., F.F.P.S. Glasg.; A. M. Kavanagh; J. G. Harwood, F.R.C.S. Edin.; R. D. Donaldson, M.D.; H. L. E. White; A. H. Burlton; E. North, F.R.C.S. Edin.; G. F. Poynder; G. F. A. Smythe, F.R.C.S. Edin.; H. L. Battersby; A. Hewett, F.R.C.S. Edin.; P. Mulvany; J. E. Nicholson; W. O. Wolseley; T. F. MacNeece; B. T. McCreery, M.B., F.R.C.S.I.; A. P. O'Connor, F.R.C.S.I.; J. G. M'M. Bolster, F.R.C.S.I.; D. Wardrop, M.B.; G. T. Goggin; J. M. Jones; F. M. Baker, M.B.; A. Asbury, F.R.C.S.I.; P. M. Carleton, M.D.; F. B. Maclean; R. W. Barnes; and P. H. Fox, F.R.C.S.I.

ARMY MEDICAL STAFF.—Surgeon-Captains T. R. Lucas and J. C. Connor have been posted to the Rangoon District, Madras command, for duty. Surgeon-Captain D. D. Shanahan has been transferred from the Madras District to the Rangoon District; the duties of Principal Medical Officer of the Woolwich District are performed by Surgeon-Lieutenant-Colonel M. M. Gallwey until Surgeon-Colonel P. Broke Smith joins for duty.

ARMY MEDICAL RESERVE OF OFFICERS.—Surgeon-Captain Richard T. Cæsar to be Surgeon-Major (dated March 9th, 1892).

NAVAL MEDICAL SERVICE.—The following appointments have been made at the Admiralty:—Fleet Surgeons: John K. Conway, M.D., to the *Liffey*; George Curtis to the *Victory*, additional; Richard J. Sweetman to the *Dædalus*; and Robt. H. More, M.D., to the Plymouth Division Royal Marines (all dated March 5th, 1892); Thomas C. Hickey to Haslar Hospital (dated March 8th, 1892). Staff Surgeons: Richard D. White, M.A., M.D., to the *Boadicea*, and Jas. A. Collot to the *Collingwood* (both dated March 5th, 1892); William A. Breton, M.D., to the *Superb* (dated March 19th, 1892); and Robert M'Iver to the *St. Vincent* (dated March 8th, 1892). Surgeons: Robert Hill to the *Surprise* (dated March 8th, 1892); Alfred T. Rimell to the *Alexandra* (dated March 24th, 1892); and John Ottley to the *Victory* (dated March 13th, 1892). Surgeons and Agents: James H. Bogan at Arthurstown, and William J. Shee at Fethard (dated March 4th, 1892).

VOLUNTEER CORPS.—*Rifle*: 2nd Volunteer Battalion, the Welsh Regiment: Surgeon-Captain J. H. Davies to be Surgeon-Major (dated March 5th, 1892).—3rd (Renfrewshire) Volunteer Battalion, Princess Louise's (Argyll and Sutherland Highlanders): James Mason, Gent, to be Surgeon-Lieutenant (dated March 5th, 1892).

Correspondence.

"Audi alteram partem."

"THE LARYNGOSCOPE IN ENGLAND."

To the Editors of THE LANCET.

SIRS,—In your annotation on the first use of the laryngoscope in England you have forgotten to mention the name of Dr. Walker of Peterborough. He is the author of "Larynx" in Quain's Dictionary, and was amongst the first, I believe, to bring the instrument into practical use. I well remember seeing Czermak at the London Exhibition, and how he displayed his larynx to the multitude as he ran up and down the musical scale, declaring that providence had given him a special mouth and throat for the demonstration. It was at this period that the laryngoscope came into practical use; but as you allude to previous inventors of the instrument, I may remind you that you have omitted to mention the name of our countryman, Dr. Benjamin Babington. In the *Medical Gazette* the following may be found referring to a meeting of the Hunterian Society in March, 1829: "Dr. Babington submitted to the Society an ingenious instrument for the examination of parts within the fauces, not admitting of inspection by unaided sight. It consisted of an oblong piece of looking-glass set in silver wire, with a long shank. The reflecting portion is placed against the palate, whilst the tongue is held down by a spatula, when the epiglottis and upper part of the larynx become visible in the glass. A strong light is required, and the instrument should be dipped in water so as to have a film of fluid upon it when used, or the halitus of the breath renders it cloudy. The doctor proposed to call it "glottiscope." Dr. Hodgkin refers to the instrument in his lectures as "the speculum laryngis, or laryngoscope invented by my friend Dr. Babington in 1829."

I am, Sirs, yours faithfully,

Grosvenor-street, March 5th, 1892.

SAMUEL WILKS.

ROYAL COLLEGE OF SURGEONS, IRELAND:

To the Editors of THE LANCET.

SIRS,—As the election of a President and Vice-President of the Royal College of Surgeons in Ireland must be held annually (June) according to the present Charter, it is most desirable that the Council of the College should bestir themselves to obtain the necessary alterations to enable a President and Vice-President to be elected biennially only, and thus prevent unseemly contests, as occurred in the time of the President just preceding, and which must from time to time again occur; this would be the only correct settlement of a question of biennial presidency, which does not now and cannot exist until the necessary alteration of the Charter is made. At present there must be not only a yearly election for the President, but a re-election should the outgoing President seek to be re-elected, and who may or may not be opposed. True, many have held the office of President for two, three, and four years, such as Crampton, Cusack, and others. Croker-King was the first who held the office for two years consecutively, but he had to be re-elected, and the present President was elected without opposition for a second term. Some of the younger and less experienced members of the corporation of the Irish College have erroneously formed the opinion that being re-elected to the office of President for a second year signifies a "biennial presidency." But, as required by Charter, a new election has to be held at the expiration of each year. I cannot but agree with those senior men of the College that not any such office as biennial presidency exists, and could not, as it would be contrary to the words of the Charter—viz., "The Fellows shall elect yearly by ballot out of their own body one person President and one other person to be Vice-President, and which persons shall serve during one whole year." It would just be as rational to call the present Lord Mayor of Dublin a biennial Lord Mayor because he has been re-elected to the mayoralty for two years consecutively. I have written at length with the endeavour to persuade Fellows of the College that a biennial presidency of the College of Surgeons does not exist, and cannot until the Charter is altered, and express a hope that the necessary