work to photograph the joint. All know how hard it is to get a readable skiagraph of the hip. As yet I have seen only one picture of the ordinary intracapsular fracture which showed the characters of the injury. I believe the picture I now show is the first ever made by X-rays from the impacted intracapsular fracture, nor was it obtained without many trials and failures. I had hoped to show a second picture taken just now three months after the admission of the patient to hospital. His great bulk and fatness made it a very troublesome job, and we have learned only that the fragments remain *in situ*.

The condition now is, I have but little doubt, that of osseous union of the fracture. In both pictures we can see that the form of the fracture is the same as in the cases recorded by Professor R. W. Smith—the same as in the seven specimens that our Museum holds—the lower fragment impacted into the upper.

I note that in measuring the limb on December 11th a shortening of about one-quarter of an inch was appreciable.

The rarity of the form of fracture, the rarity of the knowledge of its presence furnished by the audible crack I have recorded, the rarity of its exact diagnosis in the living subject, the rarity of its skiagraph—all, I think, justify my detaining the Academy with this brief note.

ART. X.—*Remarks on Mortality in England and Wales from Pulmonary Phthisis, and other Diseases of the Respiratory System.* By JOHN TATHAM, M.A., M.D. Univ. Dubl.; Fellow of the Royal College of Physicians of London; of the General Register Office, Somerset House, London.

OF the half-million or so of deaths, from all causes, which occur annually in England and Wales, about one-fifth part are caused either by Pulmonary Phthisis or by some other affection of the respiratory system. No apology, therefore, is needed for regarding the mortality from these diseases as a matter of serious public importance.

During the years 1896-1900, 208,623 persons have died

in England and Wales from Phthisis, or Pulmonary Consumption. It is customary to state the mortality from any disease as so many deaths in each million *persons* living; but in the case of diseases like those under present consideration which affect males and females unequally, it is desirable that the mortality should be separately given for *each sex*.

Within the five years ending A.D. 1900, there have been registered 116,646 deaths of males, and 91,977 deaths of females, from Pulmonary Consumption. These deaths give an annual rate of mortality equal to 1,527 per million living for males, and to 1,129 per million living for females. It thus appears that, at the present time, males, in the aggregate, die of Phthisis much more rapidly than do females. This has not always been the case. In my evidence before the last Royal Commission on Tuberculosis, I showed that in the ten years, 1851-60, Phthisis had been more fatal, at all ages, to females than to males, by 20 per million living; and that females, between the ages of five years and forty, had died of Phthisis more rapidly than males at corresponding ages. In the five years ending with 1900, on the contrary, the mortality of males considerably exceeded that of females at all ages, except the period between the fifth year and the twentieth. It will thus be seen that the sex incidence of Phthisis has materially changed since the period 1861-70.

The following tables show (*A.*) the mortality from Phthisis, and (*B.*) the mortality from other diseases of the respiratory system among males and females separately in England and Wales in the years 1896-1900, and also, for comparison, the corresponding figures for the years 1861-70.

Although the mortality from Pulmonary Consumption is still terribly high, it is satisfactory to find, from the national records, that it has been considerably reduced within the last few years. The relatively slight reduction which has taken place in the mortality from other diseases of the respiratory system is far less satisfactory. (See Table *B.*)

Comparing, by the help of Table *A.*, the more recent

quinquennial period with the ten years ended in 1870, we find that, among persons at all ages and of both sexes, the mortality from Phthisis has decreased very considerably; but that among females the decrease has been much more rapid than among males. Among the former, the aggregate Phthisis mortality in 1896-1900 was considerably less than half of what it had been in 1861-70; whilst among the latter the decrease amounted to 38 per cent. The

(A.) MORTALITY FROM PHTHISIS, PER MILLION LIVING.

Age Groups	Males		Females		Reduction per cent. in 1896-1900	
	1861-70	1896 to 1900	1861-70	1896 to 1900	Males	Females
All ages ..	2467	1527	2483	1129	38·1	54·5
Under 5 years	990	390	947	325	60·6	65·7
5 to 10 ..	431	138	477	199	68·0	58·3
10 to 15 ..	605	192	1045	409	68·3	60·9
15 to 20 ..	2190	898	3112	1137	59·0	63·5
20 to 25 ..	3883	1849	3967	1522	52·4	61·6
25 to 35 ..	4094	2338	4378	1843	42·9	57·9
35 to 45 ..	4166	3135	3900	2084	24·7	46·6
45 to 55 ..	3861	3220	2850	1589	16·6	44·2
55 to 65 ..	3297	2681	2065	1231	18·7	40·4
65 to 75 ..	2024	1533	1239	794	24·3	35·9
Above 75 years	659	557	447	366	15·5	18·1

table further shows that it is in the earlier stages of life, more especially, that the reduction has taken place. For example, among males, the reduction at the several age groups from infancy to the twenty-fifth year has ranged between 52 and 68 per cent., and among females from infancy to the thirty-fifth year, it has ranged from 58 and 66 per cent. At ages beyond the thirty-fifth year, the reduction of mortality from this disease has been less marked, but it has been much greater among females than

among males, the difference being noticeable even up to the more advanced ages.

The mortality from Phthisis is very seriously affected by occupation. Unfortunately, statistics are not at present available with reference to the occupations in which *women* are engaged, but I have carefully investigated the Phthisis mortality of *men* engaged in the more common occupations during the years 1890-92, and the results will

(B.) MORTALITY FROM DISEASES OF THE RESPIRATORY SYSTEM, PER MILLION LIVING.

Age Groups	Males		Females		Difference per cent. in 1896-1900	
	1861-70	1896 to 1900	1861-70	1896 to 1900	Males	Females
All ages ..	3938	3418	3262	2788	— 13·2	— 14·5
Under 5 years	13554	12002	11478	9875	— 11·5	— 14·0
5 to 10 ..	811	495	779	472	— 39·0	— 39·4
10 to 15 ..	212	150	230	149	— 29·2	— 35·2
15 to 20 ..	313	304	306	202	— 2·9	— 34·0
20 to 25 ..	520	495	382	252	— 4·8	— 34·0
25 to 35 ..	859	786	611	450	— 8·5	— 26·4
35 to 45 ..	1720	1745	1129	985	+ 1·5	— 12·8
45 to 55 ..	3496	3407	2325	1968	— 2·5	— 15·4
55 to 65 ..	7581	7258	5871	5093	— 4·3	— 13·3
65 to 75 ..	15175	13635	13103	11824	— 10·1	— 9·8
Above 75 years	26148	27907	22950	27609	+ 6·7	+ 20·3

be found in Volume II. of my Supplement to the Registrar-General's Fifty-fifth Annual Report. The Phthisis mortality of men aged from twenty-five to sixty-five years, without distinction of occupation, may be expressed by the comparative mortality figure, 192. At one end of the scale come the lowest rates, those of coal miners and brick-makers, which range from 69 to 84, whilst at the opposite end of the scale come costermongers, with a figure of 443, inn-servants, with a figure of 476, and tin miners, with a figure of 508.

Phthisis mortality is also very considerably affected by locality. Taking, for example, the Phthisis mortality in the several counties of England and Wales, as published in the reports of the Registrar-General, in comparison with the average rate in the provinces (*i.e.*, England and Wales less London), Phthisis showed in 1891-97 excessive mortality among both males and females in London and in the Counties of Hampshire, Devonshire, Lancashire, the West Riding of Yorkshire and Northumberland; and also in North and South Wales. In addition to these there was excess in the Phthisis rate among males only in Sussex, Cornwall and Warwickshire; and among females only in Suffolk, Lincolnshire, Cheshire, Durham and Cumberland. Of the above-mentioned counties showing Phthisis mortality in excess of the average amongst both sexes in 1891-97, London and Lancashire had also experienced mortality from Phthisis in excess of the average, in each of the decennial periods ending with the years 1880 and 1890.

ART. XI.—*Clinical Report of the Rotunda Lying-in Hospital, for Year ending November 1, 1901.*^a By R. D. PUREFOY, M.D. T.C.D. F.R.C.S.I. (Master); and PAUL CARTON (Assistant).

DURING this year 1,905 women were admitted to the Maternity Department, of whom 1,610 were confined, and nearly 300 were discharged not in labour. Amongst those treated will be found examples of some of the rarest concomitants of pregnancy and childbed, such as emphysema, puerperal aphasia, and pulmonary embolism. During the year three deaths occurred. No. 1.—Patient moribund on admission; in acute phthisis. No. 2.—An emaciated, cachectic patient, some days in labour before admission, who succumbed after Cæsarean section, rendered necessary by uterine fibroids. No. 3.—An elderly patient with contracted pelvis, in whom the induction of premature labour was unusually protracted and difficult owing to uterine inertia and morbid adhesion of placenta.

^a Read before the Section of Obstetrics of the Royal Academy of Medicine in Ireland, on Friday, March 14, 1902.