is called fast vibrations. Variations in adjustment will vary this rate within moderate limits.

It is important to know the number of windings on the coil—more so even than the number of feet of wire. The windings mean lines of force, and this means voltage.

DR. MASSEY moved that the discussion on this subject be adjourned until other papers of like import had been read. Seconded and carried.

(To be Continued.)

NECROLOGY.

Wm. B. Baker, M.D. of Bristol, Pa.

Edward S. Lawrence, M.D. of Philadelphia.

C. Refkowsky, M.D. of Chicago, January 23.

Dr. Harold Haas of Wabash, Ind., at Deland, Fla., February 4.

George W. Parvis, M.D. of Centerville, Md., died January 26, age 67 years.

Mathew T. Scott, M.D. of Lexington, Ky., died in Texas, January 26, age 38.

Erasmus M. Kent, M.D. of Bristol, Vt., January 26, age 57. He represented Bristol in the Legislature in 1890.

Willis O. Gilson, M.D., at Erie, Pa., January 25. He was graduated at the Western Reserve College, and was about 35 years of age.

Samuel Warde, D.D.S. of Cincinnati, January 24, age 71. He was an active member of the Mississippi Valley Dental Association and had received generous recognition of his skill in mechanical dentistry, by the presentation of medals from various societies and institutions.

Adolph Sauerherring, M.D. of Mayville, Wis., died January 24, at the advanced age of 73 years. He was a practicing physician for over half a century, and was buried under the auspices of the Masonic Lodge of Mayville on Friday, the 26th inst.

Benjamin S. Anderson, M.D., died near Media, Pa., suddenly, from heart disease age 71 years, January 24. He had been in Philadelphia at the meeting of a medical society the night before, and was on his way home when he became sick. He was a popular and successful practitioner.

Horatio N. Buckley, M.D. of Delhi, N. Y., January 24, age 74. He had lived at Delhi for the last fifty years. He was twice Treasurer of Delaware County, and sixteen years Postmaster, and for many years had been the President of the Trustees of the Delhi Academy.

Dr. Edward Griffin Crafts died at his home in East Maine, Otsego County, N. Y., January 26. He was born in Cherry Valley on July 4, 1821. Graduated in 1850 from Geneva Medical College, soon after was appointed by Cornelius Vanderbilt as Surgeon of the California steamship, *Northern Light*. In 1853 he was appointed Resident Surgeon and Agent for the Transit Company at Virginia Bay, Nicaragua, Isthmus of Panama. He later practiced in Binghamton and removed to East Maine in 1879.

Edmund Burke Haywood, M.D. of Raleigh, N. C. He was born in Raleigh in 1825; was graduated with the class of 1847 from the University of North Carolina, and received his medical degree from the University of Pennsylvania in 1849. He was Surgeon of the North Carolina State troops in 1861, and in 1862 appointed Surgeon in the Confederate Army, and placed in charge of the general hospitals at Raleigh. He was the founder of the Raleigh Academy of Medicine, and an ex-President of the State Medical Society. He was greatly beloved and esteemed by the community in which he lived.

Prof. August Hirsch, M.D., Privy Medical Councillor, died at Berlin on January 29. He lectured at the University on

pathology and the history of medicine, was celebrated for his researches into the geographic distribution of epidemic diseases, and was the most distinguished epidemiologist who ever lived. His chief work was published by the Sydenham Society, and the labor and care taken in its preparation was simply monumental. For forty years the writer has been familiar with the epidemics of this country, and can testify to the accuracy of the facts as stated by him in many instances. When we last saw him in Berlin he was engaged in revising his great work and bringing it up to date. Sanitary science owes him a great deal, and sanitarians will deeply regret his death.

John H. Murphy, M.D. of St. Paul, Minn., Jan. 31, of carbuncle. He was born at New Brunswick, N. J., Jan. 22, 1826. His father was an officer in the army of the United States in the war of 1812, but was by occupation a shipbuilder. He removed to Adams County, Illinois, in 1834, and established a farm near Quincy. Here young Murphy received his early education, and afterwards was a pupil of Abram Hull, M.D., of Lewiston, Ill. He was graduated at Rush Medical College with the class of 1850, and at the time of his death was President of the Alumni Association of that institution. After his graduation he practiced at St. Anthony, Minn., where he resided until 1864, when he removed to St. Paul. In 1861 he joined the volunteer service as Acting Surgeon of the First Minnesota Volunteers, and six months later was commissioned Surgeon of the Fourth Minnesota. While in the field near Vicksburg he suffered from sunstroke and returned home, but recovered and rejoined the service as surgeon of the Eighth Minnesota Infantry. At the close of the war he resumed practice in St. Paul, and for a long time was chief surgeon of the railroads passing through St. Paul. He was Surgeon General of Minnesota for twenty years, having been appointed to that office in 1874. During his long and eventful life he occupied many positions of honor in the building up of the new State, having been a member of the Legislature of 1852 and of 1855, and of the Constitutional Convention of 1857. He was a member of various Masonic bodies, and was held in high esteem by the old soldiers, no reunion being deemed quite complete without the presence of Dr. Murphy. He was married June 28, 1848, to Miss Mary A. Hoyt, and they have had seven children. He was a regular attendant at the meetings of the AMERICAN MEDICAL ASSOCIATION, where his genial presence and his sturdy common sense views on medical subjects made him a general favorite. He will be greatly missed by the older members, and as well by many who had only recently become members of our great medical organization.

Roswell G. Bogue, M.D.—The following is the report of the Committee of the Illinois Commandery of the Loyal Legion, on the death of Dr. Bogue of Chicago:

Major Roswell Griswold Bogue was born in Louisville, St. Lawrence County, New York, May 2, 1832, and died in Chicago Dec. 8, 1893. He was educated at the Castleton Academy, Vermont, and spent the earlier years of his young manhood in teaching. From the East he came to Columbus, Ohio, where he read medicine with a distinguished surgeon of that time, Dr. Norman Gay. He then attended the College of Physicians and Surgeons of New York City, from which he received his degree in the winter of 1856 and '57, and in the spring of 1857 located in Chicago and began his successful career in the practice of medicine. He found friends at the outset of his career, fitted as he was for the healing art, both by nature and education.

Upon Aug. 5, 1861, he was commissioned Major and Surgeon, and assigned to duty as Surgeon of the Nineteenth Illinois Infantry, and continued constantly in this service, until mustered out on July 9, 1864.

The Regimental Surgeon of the United States Army enters upon his duty with no expectation of increased rank or pay. He can hope for increased honors and responsibilities—and these came to Dr. Bogue. He served with his regiment through the Missouri, Kentucky, Tennessee and Alabama campaigns up to March, 1863, when he was appointed Medical Director of the second division of the Fourteenth Army Corps, commanded by General Negley. When the Army of the Cumberland was reorganized in October, 1863, Dr. Bogue was transferred to the third division of the Fourteenth Army Corps commanded by General Baird, and

again honored by the appointment as Medical Director. He was with this command in all the battles in which it participated, notably those of Chickamauga, Chattanooga, Mission Ridge, Buzzard's Roost and Resaca. In all of these posts of duty there is one continuous record of faithfulness and efficiency.

Dr. Bogue was a man of deep sympathy and he did not know what it was to spare himself when a wounded soldier was begging for help. After a battle it was no unusual experience of the faithful surgeon, to work all night, sometimes leaning over the operating table until he found it impossible to straighten himself into an erect attitude, without the aid of his assistants. It was there amid such surroundings, performing the most difficult operations of surgery by the flaring light of torches and tallow candles, with body and mind taxed to their utmost, that he doubtless laid the foundation for the disease that later on destroyed the nerves of his eyes, and then ended his life by attacking the brain.

At the close of the war, Dr Bogue returned to Chicago, and again entered upon the practice of his profession. He had a natural aptitude and love for surgery and sought as much as possible to give up his general practice, and devote himself exclusively to it. This he found it difficult to do, honored and loved as man and physician, in a multitude of homes. In addition to his skill as an operator, he was masterly in diagnosis, and his opinions were widely sought by his professional brethren.

He was one of the organizers of the Cook County Hospital, and was for thirteen years one of the Attending Surgeons. He was the first Professor of Surgery in the Woman's College, and was for many years the Attending Surgeon for the Hospital of Women and Children. He was Consulting Surgeon for both the Presbyterian and St. Joseph's Hospitals from their organizations until his death. Major Bogue joined this Commandery Dec. 5, 1883, and it is safe to say no member more keenly enjoyed its privileges. After he became entirely blind the members of the North Side made it their pleasing duty, to take turns in escorting him to the meetings, whenever the weather and his failing health permitted; and he frequently expressed his gratitude, and spoke of the meetings as the enjoyable events of the month. Blind and shut off in a large measure from later events, he loved to live over again the old army life in the papers, the old songs and the reminiscences of life in camp. Both socially and professionally the old soldier always found a sympathizing friend in Dr. Bogue, and as a citizen he was a man among men.

He was a profoundly religious man who exemplified its teachings by his every-day practical life of "doing good." Called from us before his three-score years and ten, yet his was a beautiful, well-rounded life, and one whose memory this Commandery will cherish. While we enter upon our records our high appreciation of our departed brother and express our own sorrow, we desire to tender to the loved ones in his stricken home our profound sympathy.

OLIVER W. NIXON, EVERETT B. PRESTON, ALBERT L. COE,
Committee.

BOOK NOTICES.

Addresses, Papers and Discussions in the Section of Ophthalmology at the Forty-fourth Annual Meeting of the AMERICAN MEDICAL ASSOCIATION at Milwaukee, June, 1893.

It was a happy innovation inaugurated three years ago by the Section on Ophthalmology to collect all papers read at its meetings and to republish them, after they were published in the JOURNAL OF THE ASSOCIATION, as the "Transactions of the Section."

In the present volume we miss the familiar names of some members who in the past had been among the most active workers, and who always had something interesting and instructive to present to the meetings; but on the other hand it is gratifying to note the number of new contributors; for this is a hopeful sign of the growing interest taken by the ophthalmologists all over the land in the work of the Ophthalmological Section of the Association.

There were thirty-three papers read in this Section at Milwaukee, and although they are not all of the highest grade of excellence, every one interested in ophthalmology will find much valuable information in this book, which he can obtain at the small expense of \$1.00 by applying at the office of this JOURNAL.

SELECTIONS.

A Case of Intussusception, Operation, Recovery.—An eleven-year-old boy was attacked suddenly with persistent vomiting and bloody stools. A sausage-shaped tumor was discovered in the left hypogastric region. The lower end of the tumor appeared to be near the ileo-cecal valve; the upper end disappeared under the circle of the lower rib. There was tenderness on pressure. Laparotomy was performed and the invagination, which consisted only of the colon, was reduced with great difficulty. A gangrenous spot was discovered, about the size of a 5 cent piece, under which a tumor the size of a hazel-nut was found. An artificial anus was made, and closed in eleven to twelve weeks. The boy made a good recovery and was discharged five weeks after operation.—G. LINDEMANN in the *Centralblatt für Chirurgie*, January, 1894. [Abstracted for the JOURNAL].

Academie de Medicine de Paris.—Session of Jan. 10, 1894, M. Proust called attention to the fact of an outbreak of malignant pustule having occurred, which was traced to an importation of Chinese goatskins.

M. A. Voisin reported a case of a female attacked with melancholic mania following a right facial neuralgia dating from 1870, which had resisted all treatment, and the woman died in his service from a uterine cancer, which was found at the necropsy. There was also compression of the frontal and parietal right ascending convolution by a sort of pool formed by the cerebro-spinal fluid. In a case of this kind, craniotomy was evidently the only efficacious treatment.

M. Galeowski read a paper showing that glaucoma is due to a lymphangitis of the eye obstructing the lymphatic channels and, notably, the canal of Schlemm. Repeated external sclerotomy is the best means of relieving the obstruction.—*Progrès Médical*, Jan. 13, 1894. [Abstracted for the JOURNAL].

E. Bassini's New Operative Method for the Radical Cure of Femoral Hernia.—This method of operating for the radical cure of femoral hernia is designed on an anatomical basis and besides being very simple has the advantage of showing many lasting results. It is evident that it will soon become as popular as Bassini's method for the cure of inguinal hernia.

Bassini shows that the femoral canal which is a funnel-shaped or triangular opening with its apex downward, is closed normally by the cribriform fascia which is directly connected with the fascia lata, Poupart's ligament and the fascia pectinea, and that neither the falciform process or Gimbernat's ligament exist as such, but are formed by the tearing and giving way of the cribriform fascia, thus forming the rupture. This occurs at the narrowest part of the canal in the femoral or crural ring.

Bassini here illustrates from a plaster cast, made by injecting plaster-of-paris into a femoral hernia, which shows plainly the position of this ring whose lower boundary is marked by the close underlying great saphenous vein at its junction with the femoral vein.

This position, as well as the normal tension of the femoral sheath, explains the fact that in a stricture or compression of a femoral hernia these veins are not affected. Normally, the tension of Poupart's ligament with the fascia lata and the cribriform fascia form a sufficient barrier against the descent of a hernia. The relaxation of these parts, as well as the separation of the fibers of the cribriform fascia, is accountable for the formation of a femoral hernia. This is also the cause of its greater frequency in women, who besides this have a broader pelvis than a male, and in whom the abdominal walls give way more easily.

The object of the operation is to bring the prolapsed and crowded parts back to their normal position and tension.

Bassini lays bare the sac, the fascia lata and fascia pectinea