Henry D. Grindel, M.D. New York University, 1867, died at his home in San Diego, Cal., September 14, after a protracted illness, aged 75. He was a member of the San Diego County Medical Society.

Christopher M. Bell, M.D. College of Physicians and Surgeons, New York, 1865, a New York physician who retired from practice several years ago, died at Baden Baden, Germany, September 3.

Frederick G. Ibach, M.D. Jefferson Medical College, Philadelphia, 1879, died at his home in Mauch Chunk, Pa., September 11, from acute Bright's disease, aged 44.

John B. Du Kate, M.D. Louisville (Ky.) Medical College, 1871, died at his home in Vincennes, Ind., September 12, from Bright's disease, after a short illness, aged 60.

William B. Coburn, M.D. Medical School of Maine, Bowdoin College, Brunswick, 1901, died at his home in Waterford, Me., September 9, from appendicitis, aged 29.

Martin Brown, M.D. Medical College of Ohio, Cincinnati, 1880, died suddenly in his rooms in Anderson, Ind., supposedly from apoplexy, September 17, aged 50.

John M. Wert, M.D. Jefferson Medical College, Philadelphia, 1880, died at his home in Philadelphia, September 13, after a lingering illness, aged 51.

George Lisle, M.D., the first white resident of Labette County, Kan., and the founder of Chetopa, died at his home in that place recently, aged 88.

Frank Lindsey, M.D., an old resident of Big Stone Gap, Va., died at his home in that place, September 13, after an illness of six months, aged 61.

Elbert A. Banks, M.D. Tulane University, New Orleans, La., 1868, an old practitioner of Columbus, Ga., died in Wynnonton, Ga., September 9, aged 62.

Edmund H. Cook, M.D. Bellevue Hospital Medical College, New York, 1893, died at his home in Flushing, Long Island, N. Y., September 14, aged 39.

Mathias W. Mabry, M.D. University of Virginia, Charlottesville, 1842, died at his home in Augusta, Ga., September 9, aged 80.

William D. Eastland, M.D. Tulane University, New Orleans, La., 1892, of Vicksburg, Miss., died at Meridian, Miss., recently.

Miscellany.

Labyrinthitis After Administration of Salicylates.—Scheyer reports in *Wiener Med. Presse*, 1902, 22, the case of a laundress who was given .5 gm. sodium salicylate five times a day in treatment of a second attack of acute articular rheumatism three years after the first. After a week of this treatment symptoms of an affection of the middle ear developed and persisted notwithstanding suspension of the drug, resulting in permanent deafness, complete in one ear and partial in the other.

A Contortionist and His Medical Purchasers.—A man in Massachusetts, who was famous in his day as a contortionist of remarkable flexibility, several years ago sold his body (the goods to be deliverable after death) to a Detroit physician, who was anxious to study his skeletal formation; but after paying the money the physician died, and the heirs threw away that part of the estate as of no value to them. Another deal in futures was then made with a New York physician, but he also died. The contortionist, who is now nearly eighty years old and in excellent health, is said to be looking around for another purchaser.—*Med. Record*.

Diet in Smallpox.—According to N. S. Davis, Jr., anorexia, thirst and vomiting are noteworthy symptoms at the onset of this malady. Vomiting is usually not of frequent occurrence. Cool drinks should be given; indeed, water should be administered freely in all stages of the disease, both because it adds to the comfort of the patient, and because it will help to avert nephritis, which is an occasional complication. Febrile albuminuria is common. A liquid, non-albuminous diet will lessen or stop it. During the febrile stage a liquid diet, such as is usually prescribed in acute fevers, should be given—milk, broth, gruel, etc. Often the mouth and throat are so sore from the eruption that swallowing is difficult. Food must then be given in small portions at a time. Ice and ice cream

are often grateful to patients at this time. Sometimes swallowing is so painful that rectal alimentation must be resorted to. It should not be relied on longer than is absolutely necessary, for when suppuration takes place on the skin, prostration develops rapidly, and is often very great. It is, therefore, necessary to give food by the mouth as steadily and in as large quantities as possible. Rectal alimentation must occasionally be utilized in order to help maintain strength when the stomach will not tolerate or digest food enough. Milk should be the staple article of diet. Gruels, weak tea, Mellin's food, farina and similar articles may be employed for variety. If there is no albuminuria, or if it is only trifling and transitory, bouillon, broths, raw or soft-cooked eggs, custards, and such dishes may also be used. If digestion is fairly good, as it is in mild cases, milk toast, soft-boiled rice or oatmeal, corn-starch pudding, blanc mange, gelatin jellies, finely mashed potato with meat-juice squeezed on it, may be given and will be relished. In the severer cases these articles may be given only during convalescence.—From Cohen's "System of Physiologic Therapeutics," Vol. VI.

New Instrument.

A STONE PHONENDOSCOPE TUBE.

HOWARD J. WILLIAMS, M.D.

MACON, GA.

Recently while examining a patient for stone in the bladder I wished to test the conductivity of the sounds by the phonendoscope placed over the suprapubic space while the searcher

Figure 1.

Figure 2.

was being moved about in the bladder. The results were unsatisfactory, but the idea was suggested by the experiment of attaching the phonendoscope to the searcher.

A medium-sized screw was procured, the head and point of which being removed the shank fitted in the handle of a Thompson stone searcher, while the thread end caught snugly in the opening in the cardiac diaphragm of the phonendoscope. The connection being made, I repeated the examination and was rewarded by finding that the sounds were easily carried to the ear, intensified by the vibrations of the middle diaphragm of the phonendoscope.

I was so well pleased with this rough combination of the two instruments that I at once drew a design of a tube for attaching the phonendoscope to a Thompson searcher and had made the instrument illustrated in Figure 1. Figure 2 illustrates the two instruments attached by the tube ready for use.

Since the receipt of this tube, I have repeatedly tested the value of this manner of examination, both in the human bladder and by placing various foreign bodies of different characters in a rubber bag filled with water. In experimenting with foreign bodies in a bag full of water under cover, I find

that not only the sounds reproduced by touching the bodies with the searcher are transmitted to the ear, but that the accentuation of the sound by the phonendoscope will reveal distinctly the physical characteristic note of each of the various bodies as the end of the searcher comes in contact with it, and further, that its size may be estimated by the duration of the sound produced as the searcher passes over it. In the human being, the rugæ of the bladder walls and the sizes of each, depending on the degree of distension of the viscus, can be noted, as the end of the searcher passes lightly over their surfaces while it is being turned about in the bladder, by a distinct muffled sound characteristic of the soft yielding mucous membrane. In the only other case of stone examined since the tube was made the characteristic click usually felt and heard in sounding was decidedly intensified by the phonendoscope and its size estimated.

I do not claim any originality in the principles on which the above instrument, if such it may be called, is made. Andrew's searcher and Billroth's sounding board attachment have long been known to the profession as acoustic aids in sounding the bladder for stone. Neither of these instruments will, however, as I know from personal experience, give the accentuated sound that the phonendoscope produces; while with either, the sound of the instrument, passing over the rugæ of a partially filled bladder, will often be mistaken for the muffled click of a soft stone. Both the phonendoscope and the Thompson searcher form part of every physician's armamentarium, while the little device above illustrated will be a material aid in the early accurate diagnosis of stone in the bladder by combining the use of two excellent instruments.

Societies.

COMING MEETINGS.

American Academy of Railway Surgeons, Kansas City, Mo., Oct. 2-3, 1902.

Medical Association of District of Columbia, Washington, Oct. 7, 1902.

Tri-State Medical Society of Alabama, Georgia and Tennessee, Birmingham, Ala., Oct. 7-9, 1902.

Idaho State Medical Society, Moscow, Oct. 9-10, 1902.

Vermont State Medical Society, Burlington, Oct. 9-10, 1902.

Mississippi Valley Medical Association, Kansas City, Mo., Oct. 15, 1902.

Conference State and Provincial Boards of Health of North America, New Haven, Conn., Oct. 28-29, 1902.

Missouri State Anatomical Society.—This body met at St. Joseph, September 12, and elected Dr. Wallace B. Deffenbaugh president and Dr. Harry S. Forgrave secretary, both of St. Joseph.

American Public Health Association.—The thirteenth annual meeting of this association will be held in New Orleans, December 8 to 12, under the presidency of Dr. Henry D. Holton, Brattleboro, Vt.

Mecosta County (Mich.) Medical Society.—The physicians of the county have met at Big Rapids and organized this society with Dr. Joseph McNeece, Morley, as president, and Dr. Franklin C. Terrill, Big Rapids, secretary.

McLeod County (Minn.) Medical Society.—Medical men of the county met in Hutchinson, September 10, and organized a county medical society with the following temporary officers: Dr. Kee Wakefield, Hutchinson, president, and Dr. Frank E. Burch, Glencoe, secretary.

Livingston County (Mich.) Medical Society.—The physicians of the county met at Howell, September 16, and organized this society, with Dr. William J. McHench, president; Dr. Abel S. Austin, Fowlerville, vice-president; and Dr. R. H. Baird, Howell, secretary and treasurer.

New Hampshire Surgical Club.—The annual meeting of this organization was held in Centre Harbor, September 6. Dr. Arthur C. Heffenger, Portsmouth, was elected president; Dr. Charles R. Walker, Concord, vice-president, and Dr. Nelson W. McMurphy, Concord, secretary-treasurer.

Paducah (Ky.) Medical and Surgical Society.—This society had its final meeting, September 10, wound up its affairs and disbanded. As soon as this had been done the members organized the McCracken County Medical Society,

which will be in affiliation with the Kentucky State Medical Society.

Central Michigan Medical Society.—This society, at its meeting, held at Lansing, September 11, voted to effect a reorganization under the name of the Ingham County Medical Society. This is in accord with plan proposed by the American Medical Association for the uniform organization of county societies.

McCracken County (Ky.) Medical Society.—The reorganization of this society was completed September 10, at its meeting in Paducah, when Dr. Shandy Z. Holland, Grahamsville, was elected president; Dr. R. Holt, Ragland, vice-president; Dr. Horace T. Rivers, Paducah, secretary, and Dr. Thomas E. Moss, Jr., Woodville, treasurer.

St. Louis Medical Society of Missouri.—A special meeting was held, September 13, at which appropriate resolutions were adopted on the death of Prof. Rudolph Virchow, who was an honorary member of the society. Short addresses were delivered by Dr. Hugo Summa, on "Virchow as a Pathologist," and by Dr. Frank J. Lutz, on "Virchow in Public Life."

Caledonia County (Vt.) Medical Society.—The physicians of the county met at St. Johnsbury, September 8, and organized a society to affiliate with the Vermont State Medical Society. Dr. Lorenzo W. Hubbard, Lyndon, was elected president; Dr. Oscar E. Carter, Danville, vice-president; Dr. Walter J. Aldrich, St. Johnsbury, secretary, and Dr. J. M. Gibson, McIndoe Falls, treasurer.

Hillsdale County (Mich.) Medical Society.—Twenty-five physicians of the county met at Hillsdale, August 28, and organized this society, which will be in affiliation with the Michigan State Medical Society. Dr. Bion Whelan, Hillsdale, was elected president; Dr. Daniel W. Fenton, Reading, vice-president; Dr. Herbert H. Frazier, Moscow, secretary, and Dr. William R. Dittmars, North Adams, treasurer.

Wyoming State Medical Society.—This society held its annual meeting at Cheyenne, September 9 and 10. The following officers were elected: President, Dr. Samuel B. Miller, Laramie; vice-presidents, Drs. John H. Conway, Cheyenne, and Mortimer Jesurun, Douglas; secretary, Dr. Harry S. Finney, Rawlins, and treasurer, Dr. Joseph L. Wicks, Evanston. Rock Springs was selected as the meeting place for 1903.

Northern Tri-State Medical Association.—The annual convention of this body was held in Coldwater, Mich., September 16. Dr. William F. Shumaker, Butler, Ind., was elected president; Dr. Howard M. Byall, Montpelier, Ohio, vice-president; Dr. John R. Williams, White Pigeon, Mich., secretary, and Dr. Arthur G. Holbrook, Coldwater, Mich., treasurer. The association will next meet at Butler, Ind., in 1903.

Oakland County (Mich.) Medical Society.—The physicians of this county met at Pontiac, September 10, and organized a county society to be in affiliation with the Michigan State Medical Society. The following officers were elected: President, Dr. Franklin B. Galbraith, Pontiac; vice-president, Dr. De Witt C. Wade, Holly, and secretary, Dr. William McCarroll, Pontiac. The society has an initial membership of thirty.

Oregon State Medical Society.—At the annual meeting of this society held in Portland, September 10, 11 and 12, the proposed new constitution was passed and the following officers were elected: President, Dr. Henry W. Coe, Portland; vice-presidents, Drs. F. W. Van Dyke, Grant's Pass; J. A. Geisendorffer, The Dalles, and James P. Tamiesie, Hillsboro; secretary, Dr. Alexander D. Mackenzie, Portland, and treasurer, Dr. Mae H. Cardwell, Portland.

Wayne County (Mich.) Medical Society.—This society held a public memorial meeting in honor of Prof. Rudolph Virchow. After introductory remarks by the president, Dr. Samuel Bell, addresses were delivered on "Gross Pathologic Work Pertaining to Tumors," by Dr. Theodore A. McGraw; "Benefits Resulting to Science as a Result of His Microscopic Research Work," by Dr. Heneage Gibbs; "Virchow as a Teacher," by Dr. Max Ballin; "Benefits Accruing to Internal Medicine," by Dr. Johann Flinterman, and "Virchow as a Public Benefactor," by Dr. John J. Mulheron.

Conference of State and Provincial Boards of Health of North America.—The next meeting of the conference will be held at New Haven, Conn., October 28 and 29, under the presidency of Dr. Henry M. Bracken, St. Paul. The following are the topics for discussion: "Presentation of a List of Diseases which are Considered as Communicable"; "Resolutions