

much too frequently. He had known many pelvic pains referred to displacement when the uterus was in normal position. He had found Hodge's pessary and intra-uterine stems of great value. He had seen no ill effects arise from the stem pessary, and he had always been able to introduce them without dividing the os uteri, as Smee had advocated, both to allow of its passage into the uterus, and to assist in curing the displacement.—Dr. WYNNE WILLIAMS did not recommend stems in retroflexion, but chiefly in antelexion. Thinning occurred on the concave side of flexion. He recommended reposition of the uterus by the sound, and the introduction of a Hodge while the sound was in the uterus.—Dr. WILTSHIRE thought the Hodge efficient if properly used. Stems were sufficient, but dangerous. He recommended the use of the sound and the prone position.—Dr. BEIGEL lamented the want of pathological knowledge. He had examined 500 uteri post mortem, and found flexion only ten or twelve times, and no change whatever in the uterine wall, no thinning or microscopical change. The sound could not be introduced in some cases because the canal was closed. Inflammation of uterus did not favour the cure of flexion. Irritation of uterus set up inflammation. The only means of cure was a stem.—The PRESIDENT said it was remarkable in what different lights the uterus was regarded. By some it was looked upon as universally sympathetic, while others looked upon it as an organ which would stand any amount of maltreatment. He could not reconcile these views. Sydenham said it was the duty of those who practised medicine to find out indications for treatment rather than special remedies for this or that condition. The great point to aim at with regard to flexions of the uterus was to distinguish the different classes of these displacements, and lay down rules when treatment should not be adopted, because unnecessary or not beneficial. Great ingenuity had been shown in devising mechanical contrivances, but this may lead to mischievous practice. It should be remembered that the Society should lead the medical profession in a particular branch. The result of Dr. Braithwaite's work was hardly such as to be encouraging. There are some cases which are found out accidentally, and do not require treatment; in others the suffering is connected with congestion. Others, again, do not bear mechanical treatment because of the presence of adhesion. Virchow showed that thinning of the uterine wall took place on the concave side of the flexion, and brief treatment could not cure such a condition. Then a condition found so rarely post mortem as flexion is, according to Dr. Beigel's observation, cannot be of very great importance. Stems are objectionable because of the risk of inflammation. The great principle of treatment should be not to do harm if good cannot be done.—Dr. BRAITHWAITE stated that the treatment described by him should be followed in exceptional cases only. Hodge's pessary is usually efficient, but in some cases it fails, and recourse must be had to stems. Care was not effected in four days, but the uterus was placed in position for recovery.

#### OWENS COLLEGE.

*To the Editor of THE LANCET.*

SIR,—Whilst thanking you for your article on "Owens College as a University," in your last number, I beg to say, in the name of my colleagues and myself, that we cordially support your wish that the Conjoint Scheme for medical examinations may soon be firmly established, and that we desire only to be placed on a footing for granting medical degrees identical with that of the English universities.

Yours truly,

HENRY E. ROSCOE.

Owens College, Manchester, May 28th, 1877.

BEQUESTS &c. TO MEDICAL CHARITIES.—Mr. Baron Cleasby and "A Governor of the Hospital" have each given £100 to the Repairs and Improvement Fund of the Westminster Hospital. Mrs. S. F. Harvey has given £100 to the London Hospital. Mrs. Higgin, of Quarry Bank, West Derby, bequeathed £2000 each to the Infirmary for Children, the Royal Infirmary, the Royal Southern Hospital, and the Dispensaries; £1000 each to the Northern Hospital, the Eye and Ear Infirmary, and the Medical Missionary Society; and £500 to the Convalescent Institution, all at Liverpool.

## THE GENERAL COUNCIL OF MEDICAL EDUCATION & REGISTRATION.

Session 1877.

TUESDAY, MAY 22ND.

THE Council resolved itself into committee for the adjourned consideration of the reports of the Committee on Recommendations. The first recommendation (No. 22) considered was that with reference to the subjects without a knowledge of which no candidate should be allowed to obtain a qualification entitling him to be registered.

Mr. SIMON proposed to add to the optional subjects in Recommendation No. 4, "Physics, meaning thereby heat, light, and electricity."

Dr. ROLLESTON seconded the motion, which was agreed to.

Mr. SIMON also proposed to add "Elements of Chemistry, including the laws of combination and decomposition," but this was negatived.

Dr. ANDREW WOOD moved, and Dr. ROLLESTON seconded, that Section 1 of Recommendation 22 should read: "Chemistry, including chemical physics, meaning thereby heat, light, and electricity."

Mr. LISTER moved as an amendment, which was seconded by Sir D. CORRIGAN, that the section should be, "Natural Philosophy, meaning thereby mechanics, hydrostatics, hydraulics, and pneumatics, unless an examination in those subjects shall have been previously passed."

Dr. ROLLESTON suggested that if such subjects were included the rejections would be greatly increased, and men would be kept out of the profession.

Mr. LISTER maintained that they were subjects of great importance, and as essential as chemistry, but it often happened that candidates were profoundly ignorant of them.

Dr. PITMAN wished to remind the Council that if such matters were decided by small majorities it could hardly expect the recommendations to be accepted by the licensing bodies. It would be unfortunate if the Council placed itself in the position of having its recommendations ignored by those whom it desired to guide.

After a long discussion, the amendment was negatived, and the original motion was carried.

The Council then resumed and balloted for the Executive Committee, when the following members were found to be elected: Sir Jas. Paget, Dr. Humphry, Dr. Andrew Wood, Dr. Aquilla Smith, Dr. Quain, and Mr. Simon.

The Council again resolved itself into a committee of the whole Council for the adjourned consideration of the Reports of the Committee on Recommendations.

Dr. WOOD moved that Section 2 of Recommendation 22 be "Anatomy."

Mr. SIMON suggested that the explanatory words "topographical and structural" be added; but this met with no second, and it accordingly fell to the ground.

The motion was carried, as were also motions for the adoption of Sections 3, "Physiology," and 4, "Materia Medica and Pharmacy."

Dr. WOOD then moved the adoption of Section 5, "Morbid Anatomy."

Mr. SIMON moved as an amendment that the section should read, "Pathology, including Morbid Anatomy."

The wording of this section was discussed for some time, and at length Mr. Simon's amendment was adopted.

Dr. WOOD moved, and Dr. ROLLESTON seconded, the adoption of Section 6, "Medicine, with Medical Anatomy, Clinical Medicine, and Therapeutics."

Mr. SIMON objected to the words proposed, and suggested that it was unnecessary to have Therapeutics as a separate head under Medicine. He proposed the omission of the subject from the section.