

## DIARY FOR NEXT WEEK.

## MONDAY.

MEDICAL SOCIETY OF LONDON, 8.30 P.M.—Dr. Douglas Powell will open a discussion on the Diagnosis and Treatment of Aneurysm of the Aorta.

## TUESDAY.

ROYAL MEDICAL AND CHIRURGICAL SOCIETY, 20, Hanover Square, 8.30 P.M.—Arthur E. Nevins, F.R.C.S. Edin.: (1) On the Frequent Association of Heart Disease, especially Mitral Stenosis, with Diseases of the Pelvic Viscera in Women. Edward Roughton, F.R.C.S.: On Blood Tumours (angiomas and angiosarcomata) of Bone.

ANTHROPOLOGICAL INSTITUTE OF GREAT BRITAIN AND IRELAND, 3, Hanover Square, W., 8.30 P.M.—Mr. Edward Beardmore: The Natives of Mowat, Daudal, New Guinea (communicated by Professor A. C. Haddon). Mr. S. B. J. Skerchly, F.G.S.: Fire-Making in North Borneo. Dr. H. Rink: On the Origin of the Eskimo.

## WEDNESDAY.

ROYAL MICROSCOPICAL SOCIETY (King's College, W.C.), 8 P.M.—Mr. A. W. Bennett: On the Freshwater Algae and Schizophyceae of Hampshire and Devon.

THE SANITARY INSTITUTE (Parkes Museum, 74A, Margaret Street, Regent Street, W.), 8 P.M.—Mr. W. Santo Crimp: The Disposal of Sewage.

HOSPITAL FOR CONSUMPTION AND DISEASES OF THE CHEST, BROMPTON, 4 P.M.—Mr. R. J. Godlee: On Abscess of the Liver, and Notes of some Surgical Chest Cases. Lecture I.

HUNTERIAN SOCIETY, 8 P.M.—Pathological evening. Dr. Fowler: Papillomatous Growth of Uvula. Mr. Rivington: (1) Sarcoma of Foot; (2) Exostosis. Mr. Openshaw: Malformed Uterus. Dr. Davies: (1) Sarcoma of Lung; (2) Sarcoma of Kidney. Mr. Bidwell: (1) Acute Necrosis of the Atlas; (2) Abscess of Sternum and Liver, from a Case of Pyæmia. Mr. Poland: Carcinoma of the Sigmoid Flexure.

BRITISH GYNECOLOGICAL SOCIETY, 8.30 P.M. Council, 8 P.M.—Discussion on papers. Mr. Lawson Tait: A reply to Some Recent Observations on Ectopic Gestation. Dr. Benington: A Case of Lunacy Cured by the Use of a Pessary. Mr. Bowreman Jessett: The Surgical Treatment of Cancer of the Uterus. Specimens will be shown.

## THURSDAY.

CITY OF LONDON HOSPITAL FOR DISEASES OF THE CHEST (Victoria Park, E.), 4.30 P.M.—Dr. Clifford Beale: On Laryngeal Affections in Phthisical Persons.

OPHTHALMOLOGICAL SOCIETY OF THE UNITED KINGDOM, 8.30 P.M.—Patients and Card Specimens at 8 P.M. Mr. Treacher Collins: Microscopical Sections of Lens, with Epithelium on the Inner Surface of the Capsule, and showing other peculiar structural changes. Mr. Jessop: (1) Aniridia with Dislocation of Lens; (2) Punctate Appearance of Anterior Capsule of Lens; (3) Vacuoles in Lens. Mr. J. Tatham Thompson: Note on a Case of Hereditary Tendency to Cataract in Early Childhood. Mr. Tweedy: On the Operative Treatment (1) of Cicatricial Ectropion of the Lower Lid, (2) of Symblepharon. Mr. Hill Griffith: A Case of Primary Tuberculosis of the Iris. Mr. C. Wray (introduced): On a Form of Conjunctivitis. Mr. Spencer Watson: Osteoma of the Infra-superciliary Region.

## FRIDAY.

CLINICAL SOCIETY, 20, Hanover Square, 8 P.M.—Living Specimens:—Dr. Percy Fleming: Acromegaly. Mr. Silcock: Acromegaly. Mr. Kenneth Campbell: Acromegaly. Mr. C. Symonds: Two Cases in which the Thyroid Glands have been Removed, one of them showing Ocular Sympathetic Paralysis. Mr. W. G. Spencer: Charcot's Disease of Shoulder-Joint attended by Suppuration. Mr. J. H. Morgan: (1) Inflamed Nevus of Leg, with Subcutaneous Hemorrhages. (2) Tumour of the Frontal Bone in a Boy. Papers, at 9 P.M.: Mr. C. Symonds: Nine Cases of Thyroid Cysts and Adenomata Treated by Excision. Mr. W. H. Battle: Case in which a Diffuse Aneurysm developed in the Calf of the Leg, Simulating Abscess; recovery after removal of parts of the Popliteal and Tibial Arteries. Mr. W. G. Spencer: Case of Traumatic Aneurysm following a Fracture, Dislocation of the Spine in the Dorsolumbar Region, and presumably connected with the Lumbar Arteries.

## BIRTHS, MARRIAGES, AND DEATHS.

The charge for inserting announcements of Births, Marriages, and Deaths is 2s. 6d., which should be forwarded in stamps with the announcement. The first post on Thursday mornings is the latest by which advertisements can be received.

## MARRIAGE.

ORD—MERCE.—On November 26th, at Holy Trinity, Bournemouth, by the Rev. Canon Eliot, William Theophilus Ord, M.R.C.S. Eng., L.R.C.P. Lond., of Halesowen, Worcester, to Elizabeth Louisa, daughter of Major A. H. H. Mercer, formerly of the 60th Rifles, of Lee, Blackheath.

## DEATH.

TEIXEIRA.—On November 29th, 1889, at Georgetown, Demerara, Nell, the beloved wife of Dr. Joas Teixeira, and second daughter of John Hudson, of The Green, Stratford, Essex.

## HOURS OF ATTENDANCE AT THE LONDON HOSPITALS.

CHARING CROSS.—Medical and Surgical, daily, 1.30; Obstetric, Tu. F., 1.30; Skin, M. 1.30; Dental, M. W. F., 9.

CHELSEA HOSPITAL FOR WOMEN.—M. Tu. W. and F., 1.30.

GREAT NORTHERN CENTRAL.—Medical and Surgical, M. Tu. Th. F., 2.30; Obstetric, W., 2.30; Eye, Tu. F., 10; Ear, M. F., 2.30; Diseases of the Skin, W., 2.30; Diseases of the Throat, Th., 2.30; Dental Cases, W., 2.

GUY'S.—Medical and Surgical, daily, 1.30; Obstetric, M. Tu. F., 1.30; Eye, M. Tu. Th. F., 1.30; Ear, Tu. 1; Skin, Tu., 1; Dental, Tu. Th. F., 1.30.

KING'S COLLEGE.—Medical, daily, 2; Surgical, daily, 1.30; Obstetric, Tu. Th. F., 1.30; o.p., W. F., 1.30; Eye, M. Th., 1.30; Ophthalmic Department, W., 2; Ear, Th., 2; Skin, F., 1.30; Throat, F., 1.30; Dental, M. Th., 9.30.

LONDON.—Medical, daily, exc. S., 2; Surgical, daily, 1.30 and 2; Obstetric, M. Th., 1.30; o.p. W. S., 1.30; Eye, Tu. S., 9; Ear, S., 9.30; Skin, Th., 9; Dental, Tu., 9.

MIDDLESEX.—Medical and Surgical, daily, 1.30; Obstetric, Tu. F., 9.30; o.p., M. F., 9.30; Eye, W. S., 9; Ear and Throat, Tu., 9; Skin, Tu., 4, Th. 9.30; Dental, M. W. F., 9.30.

NATIONAL ORTHOPÆDIC.—M. Tu. Th. F., 2.

NORTH-WEST LONDON.—Medical and Surgical, daily, 2; Obstetric, W., 2; Eye, W., 9; Skin, Tu., 2; Dental, F. 9.

ROYAL ORTHOPÆDIC.—Daily, 1.

ROYAL FREE.—Medical and Surgical, daily, 2; Diseases of Women, Tu. S., 9; Eye, M. F., 9; Dental, Th. 9.

ST. BARTHOLOMEW'S.—Medical and Surgical daily, 1.30; Obstetric, Tu. Th. S., 2; o.p., W. S., 9; Eye, W. Th. S., 2.30; Ear, Tu. F., 2; Skin, F., 1.30; Larynx, F., 2.30; Orthopædic, M., 2.30; Dental, Tu. F., 9.

ST. GEORGE'S.—Medical and Surgical, M. T. F. S., 12; Obstetric, Th. 2; o.p., Eye, W. S., 2; Ear, Tu., 2; Skin, W., 2; Throat, Th., 2; Orthopædic, W., 2; Dental, Tu., S., 9.

ST. MARK'S HOSPITAL.—Fistula and Diseases of Rectum, males, W., 8.45; females, Th., 8.45.

ST. MARY'S.—Medical and Surgical, daily, 1.45, o.p., 1.30; Obstetric, Tu. F., 1.45; Eye, Tu. F. S., 9; Ear, M. Th., 3; Orthopædic, W., 10; Throat, Tu. F., 1.30; Skin, M. Th., 9.30; Electro-therapeutics, Tu. F., 2; Dental, W. S., 9.30; Consultations, Tu., 2.30; Operations, Tu., 1.30; Ophthalmic Operations, F., 9.

ST. THOMAS'S.—Medical and Surgical, daily, except Sat., 2; Obstetric, Tu. F., 2; o.p., W., 1.30; Eye, M. Tu. W. Th. F., 1.30; o.p., daily, except Sat., 1.30; Ear, M., 1.30; Skin, F., 1.30; Throat, Tu. F., 1.30; Children, S., 1.30; Dental, Tu. F., 10.

UNIVERSITY COLLEGE.—Medical and Surgical, daily, 1.30; Obstetrics, M. Th., 1.30; Tu., W. F., 2; Eye, Tu. F., 2; Ear, M. F., 9; Skin, W., 1.45, S., 9.15; Throat, Th., 1.30; Dental, W., 9.30.

WESTMINSTER.—Medical and Surgical, daily, 1; Obstetric, Tu. F., 1; Eye, M. Th., 2.30; Ear, M., 9; Skin, W., 1; Dental, W. S., 9.15.

## LETTERS, NOTES, AND ANSWERS TO CORRESPONDENTS.

COMMUNICATIONS FOR THE CURRENT WEEK'S JOURNAL SHOULD REACH THE OFFICE NOT LATER THAN MIDDAY POST ON WEDNESDAY. TELEGRAMS CAN BE RECEIVED ON THURSDAY MORNING.

COMMUNICATIONS respecting editorial matters should be addressed to the Editor, 429, Strand, W.C. London; those concerning business matters, non-delivery of the JOURNAL, etc., should be addressed to the Manager, at the Office, 429, Strand, W.C., London.

In order to avoid delay, it is particularly requested that all letters on the editorial business of the JOURNAL be addressed to the Editor at the office of the JOURNAL, and not to his private house.

AUTHORS desiring reprints of their articles published in the BRITISH MEDICAL JOURNAL are requested to communicate beforehand with the Manager, 429, Strand, W.C.

CORRESPONDENTS who wish notice to be taken of their communications should authenticate them with their names—of course not necessarily for publication. CORRESPONDENTS not answered are requested to look to the Notices to Correspondents of the following week.

MANUSCRIPTS FORWARDED TO THE OFFICE OF THIS JOURNAL CANNOT UNDER ANY CIRCUMSTANCES BE RETURNED.

PUBLIC HEALTH DEPARTMENT.—We shall be much obliged to Medical Officers of Health if they will, on forwarding their Annual and other Reports, favour us with Duplicate Copies.

## QUERIES.

## CANARIES OR MADEIRA?

A MEMBER, who is giving up practice in consequence of ill-health, would be glad to hear particulars as to the best means of getting to the Madeira or Canary Islands, and the average cost of living; also which of the two groups is preferable. What would be the probable cost for six months with wife, child, and servant? Are small private houses easily attainable?

## ANSWERS.

PERPLEXED might refer to any good text-book of medicine, as, for instance, Dr. Bristowe's.



## TREATMENT OF MASTURBATION.

M.R.C.P.LOND. writes: There is a plan of treatment apparently little known, but completely successful, in cases like that referred to—namely, those in which the habit is a nocturnal one. A "cage" is carefully fitted over the genitalia by an instrument maker, and kept in place by straps, which are secured by small locks. In the case of children the parent keeps the key, and, if needful, unfastens the apparatus for micturition late at night. There is no practical inconvenience except that the apparatus is somewhat expensive. Its use should not be discontinued too soon, for the bad habit is a find themselves overpowered at night. Such persons must, at bedtime, place the key in a drawer or other place away from the bedside; then, before it can be used, the temptation will have passed. I have for many years advised this apparatus in suitable cases with entire success.

MR. C. ROBERTS, F.R.C.S. (London) writes: I cannot answer "M.D.'s" question on this subject, but I should like to call attention to the fact that circumcision does not prevent this vice in children as is generally supposed, especially outside the profession. I have frequently had occasion to refuse to perform circumcision for this purpose, as I believe it is more likely to prompt than to prevent the evil complained of by exposing the delicate glands to irritation of the dress from which the prepuce, in its natural state, protects it. I have had two cases like "M.D.'s" in which circumcision was performed for long contracted prepuces; and it would be well for surgeons to be quite sure they are on safe ground before proceeding to mutilate healthily formed children for so problematical a result. Surely a structure which is so persistent, and whose development is always on the side of excess rather than deficiency, has some useful function to perform, and should not be sacrificed without good cause.

It is usual to attribute the ceremony of circumcision among the Jews to a sanitary origin, but I think it is much more probable it was of the nature of a sacrifice, the prepuce being the easiest, and, indeed, the only part of the body of an infant which could be removed with safety. It is quite possible it is remotely connected with phallic worship, which is common enough at the present day in India and other parts of Asia. Of course, it is practised by other races than the Jews—some African tribes—who are not far advanced in sanitary knowledge.

## ALBUMINOUS URINE NOT COAGULABLE IN PRESENCE OF ACETIC ACID.

NOVUS writes: The existence of this form of urine appears to have been first brought to notice by M. Marsault,<sup>1</sup> who states that, having to examine urine which was faintly acid, and which gave, with nitric acid, an abundant precipitate, and also the ordinary characters of an albuminous urine with other reagents, it, however, presented a remarkable singularity, for when it was heated without the previous addition of acetic acid, it formed a voluminous coagulum insoluble in nitric acid, which was evidently albumen, but on warming after the addition of a small quantity of acetic acid, there was not the slightest appearance of precipitate. The next observer to give a note of this peculiarity was M. Languepin,<sup>2</sup> who says that he had occasion to examine a urine which presented the anomaly noticed by M. Marsault. This urine was of a pale colour, slightly acid, and frothed when shaken; heat alone produced an abundant coagulum soluble in acetic acid. If the urine was acidified with a small quantity of acetic acid before warming no precipitate was formed. Nitric acid and ferrocyanide of potassium also gave precipitates in this urine, and sugar was present.

M. Patein<sup>3</sup> attributes this fact, or this anomaly, if it can be so called, to the presence of a particular albumen other than that of serum-albumen and globulin; he also states that it is less rare than is generally supposed. The following is the method he gives for the separation of it. The urine is boiled with a few drops of acetic acid, after that it is filtered, and in the filtered liquid, which contains only this particular variety of albumen, nitric acid is added, and the coagulation is completed by boiling. M. Boymond, in his article upon Trichloroacetic Acid as a Test for Albumen in Urine,<sup>4</sup> states that he has had occasion several times to examine urine presenting the same phenomenon, and that trichloroacetic acid can replace nitric acid in the separation process indicated by M. Patein.

## PRISON MEDICAL SERVICE.

GENERAL PRACTITIONER.—1. Medical officers to prisons in England and Wales are practically appointed by Sir Edmund du Cane, the Chairman of the Prisons Board, in Ireland by the Hon. Charles F. Bourke, and in Scotland by Andrew B. Bell, Esq., the last two being Chairmen of the respective Boards. It is usual, in the larger prisons, for the medical officer to have gained special experience as assistant surgeon in a prison, but this is not absolutely necessary. 2. A man may be married or single, and age is not specified. A registered double qualification is required, but practically no importance attaches to the special college or university whence such is obtained. 3. Any further details may be obtained from Mr. Joseph, private secretary to Chairman of Prisons Board, Home Office, Whitehall, or from similar officials in Scotland and Ireland.

## NOTES, LETTERS, ETC.

WE are requested by the Medical Defence Union to acknowledge the receipt of ten guineas from Sir Andrew Clark towards the funds of the Union.

## THE CARRIAGE OF INFECTION.

DR. A. D. MACDONALD (Liverpool) writes: In November, 1888, I was attending a considerable number of cases of scarlet fever, and also those of midwifery as usual. Particularly, on the evening of November 13th, I confined a lady who had not previously suffered from the disease. On starting I felt a little sore throat, and to this were added chills and malaise while with the patient and sitting for three-quarters of an hour at her bedside. Next morning I showed the rash distinctly, and subsequently desquamated freely. Mother and child remained free from infection, as did also the other cases of confinement. Here, then, was a finger, in which scarlatinal germs were developing, inserted into a parturient's vagina, and breathing going on through an

infected throat in close proximity, without successful fresh cultivation of the disease germs. My hands were disinfected with solution of iodine.

I would not reason from the particular to the general; but I think the above life-incident shows how exaggerated the fear of, and precautions against, our lowly enemies' attack on a puerpera may frequently be. The pestilence walketh in our darkness just yet; necessary ignorance of microbial habits at one time led to too few, but now possibly to too many precautions. Each germ breeds true, and time will come when the habits and tricks of the micro-organismal race will be equally well known and acted on as if they were as high in the life scale as the deadly cobra or stealthy fierce jaguar. We are still largely in a state of theory.

## MALINGERERS' FEVER.

MR. T. UNICUM, M.R.C.S., L.R.C.P. (Headcorn) writes: I had thought the "increase of temperature" was due to a condensation of the breath moisture in the interstices of the blanket, when the heat, latent before, of necessity becomes sensible, and declares itself by a rise in the thermometer. I thought, too, this had been pointed out ever so many years ago by a leader in our profession at that time resident in Manchester. If, however, I am mistaken in all this, I shall much regret to have troubled you.

## NATURAL AND ARTIFICIAL SALICYLATES OF SODIUM.

MR. WM. MARTINDALE (London) writes: I beg to make a correction regarding the use of the above as mentioned by Drs. Charteris and MacLennan in the JOURNAL of November 30th, p. 1209. They state "prescriptions of the salicylate of sodium are invariably made up, unless otherwise indicated, from the artificial and not the natural salt." The reverse is the rule with all good dispensing establishments in London. Nevertheless, I may mention that of late the better qualities of the so-called artificial product have very much improved, so as to be hardly distinguished from the salt of the natural acid.

MESSRS. SQUIRE AND SONS (London) write: In the article "Experimental Research as to the Comparative Action of Natural and Artificial Salicylic Acids and their Salts," by Professor Charteris and Mr. MacLennan, p. 1209 of the JOURNAL of November 30th, it is stated "that prescriptions of the salicylate of sodium are invariably made up, unless otherwise indicated, from the artificial and not the natural salt." We beg to state that the reverse is the custom in our house; the natural salicylic acid and its sodium salt are always used in dispensing prescriptions unless the artificial is specially ordered.

## THE LATE MR. HAYNES WALTON.

DR. W. CHOLMELEY (London) writes: In your somewhat brief obituary of Mr. Haynes Walton there are, it seems to me, one or two mistakes. By his first wife Mr. Haynes Walton had ten children, and of these four died from diphtheria, and only two sons and one daughter survived their father. By his second wife there was no issue. You say that Mr. Haynes Walton edited "Operative Surgery in Dr. Druitt's well-known work." That is, I think, a mistake; no part of that work is called "Operative Surgery," but more than 100 pages are devoted to the operations of surgery, and I believe that part of the book was, like the rest, written by Dr. Druitt himself. In the preface to the tenth edition of his book, in 1870, he says: "The chapters on the surgical operations were most carefully rewritten about fifteen years ago, and new engravings made, from a series of operations on the dead body, under the superintendence of that dextrous surgeon, my staunch friend, Haynes Walton. These have been subjected anew to the most searching revision by my friend, John Wood." No doubt Mr. Walton carefully revised the article in question in the ninth edition of the book, and would have gladly helped his friend again could he have spared the time; but Dr. Druitt was very ill in 1870, and Professor John Wood carefully revised the whole work; and, again, when Dr. Druitt was bringing out his eleventh edition in 1877, after expressing his thanks to many of those who helped him, he said "the labour and responsibility of revising the later two-thirds of the work were undertaken by my old and tried friend, Professor John Wood, of King's College Hospital."

## FALSE TEETH AND NEURALGIA.

MR. T. CARLYLE BEATTY, JUN., F.R.C.S. and L.R.C.P. (Edin., L.S.A. (Seaham) writes: I have seen no reply to Mr. N. Stephenson's letter on "False Teeth and Neuralgia," which appeared in the JOURNAL of November 3rd, and I feel I cannot let his remarks on the modern system of dentistry pass altogether unnoticed. If after the crown of a tooth is removed the remains of the pulp left in the stump are allowed gradually to decay, a minute abscess is formed at the apex of the dental canal, which may continue to discharge through the canal into the mouth as long as the stump exists. This discharge, at the same time, causes more or less rapid decay of the stump, and is one of the chief causes of the offensive breath of those who wear false teeth, and is without doubt a fruitful source of neuralgia. An irritable or inflammatory state of the gums, which is usually attributed to pressure of the plate, is also frequently due to this cause. This condition may exist without pain and without consciousness of the discharge, and may therefore be unsuspected as a cause of dental troubles or dyspepsia.

If, on the other hand, after the removal of the crown the contents of the dental canal remaining in the root are destroyed, and the canal is fitted with gold, further decay is prevented, and the sanitary condition of the mouth remains unaffected. A hole may then be drilled in the gold fitting, and a pivoted tooth adjusted, which is removable at will, the pivot consisting of a piece of strong wire split down the centre, the two halves of which when pressed together fit the socket, and their tendency to expand keeps the tooth fixed when placed in position. There is no plate to cause various troubles from pressure, and which is, moreover, a common source of dyspepsia, from its tendency to retain particles of decomposed food. To a few disinfected stumps a whole set of teeth may by this method be fixed without a plate, or with the smallest plate possible, for two stumps at some distance apart may be made to carry the intervening false teeth. It is unpardonable in these days to nip off the crown of a tooth and then to leave the root without proper treatment. If this is not done at once it will afterwards require at least six weeks for its accomplishment, for if the root is filled before the dental abscess is healed, a more extensive abscess will supervene, with toothache or neuralgia, requiring probably extraction of the stump for its cure.

<sup>1</sup> Bulletin du Syndicat des Pharmaciens de Loir-et-Cher, 1887.

<sup>2</sup> Bulletin de la Société de Pharmacie de Bordeaux, October, 1888.

<sup>3</sup> Comptes Rendus Acad. Sc. et Répertoire de Pharmacie, September, 1889.

<sup>4</sup> Répertoire de Pharmacie, October 10th, 1889.



I hope Mr. Stephenson is mistaken in considering it to be the custom of English dentists to immovably fix false teeth into roots. Such a method is unnecessary, and cannot be too strongly condemned.

#### THE MOON DEFENCE FUND.

The following further subscriptions have been received:

|  |     |   |   |   |
|--|-----|---|---|---|
| Dr. Porter   | ... | 1 | 1 | 0 |
| James F. Goodhart, M.D., 25, Weymouth Street                   | ... | 2 | 2 | 0 |
| W. Cook, M.R.C.S., 108, Queen's Road                           | ... | 1 | 1 | 0 |
| Dr. R. Denison Pedley, 18, Railway Approach, London Brdg.      | ... | 1 | 1 | 0 |
| H. W. Roberts, Secretary, Wickham Terrace, Lewisham High Road. | ... |   |   |   |

**ERRATA.**—The Secretary, Chairman of Museum Committee, and Editor of *Transactions of the Edinburgh Royal Medical Society*, are Messrs. Rudolf, Huie, and Horsley respectively, and not as stated in the *JOURNAL* of November 30th. —The title of Dr. Charles Warden's paper, read at a meeting of the Midland Society, should be "On Parosphresia and Parageusia," and not as reported in the *JOURNAL* of November 23rd, p. 1160.

**COMMUNICATIONS, LETTERS, etc.,** have been received from:

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#### BOOKS, ETC., RECEIVED.

Clinical Lectures on the Diseases of Women. By J. Matthews Duncan, A.M., M.D. Fourth edition. London: J. and A. Churchill, 1889.  
A Practical Treatise on Diseases in Children. By Eustace Smith, M.D. Second edition. London: J. and A. Churchill, 1889.  
The Evil that has been said of Doctors. By S. J. Wilkoski. R. Clarke and Co.  
Medicine in the Middle Ages. By T. C. Minor, M.D., Cincinnati. R. Clarke and Co.  
Clinical Lectures on Some Obscure Diseases of the Abdomen. By Samuel Fenwick, M.D. London: J. and A. Churchill, 1889.  
A Wave of Brain-Power. By Sir Gilbert Campbell. London: Ward, Lock, and Co. 1889.  
Physiology of Bodily Exercise. By Fernand Lagrange, M.D. London: Kegan Paul, Trench, and Co. 1889.  
Skeffington and Son, London:—  
Stories Jolly, Stories New, Stories Strange, and Stories True.  
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Cassell and Co., London:—  
The Magazine of Art for 1889.  
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Griffith, Farran, and Co., London:—  
Some Other People. By Alice Weber.  
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