

13.9 per cent. of the other staff corps. Medical officers desire their responsibilities to be recognized and to be endowed with as much rank, power and position as officers of corresponding age and experience in the other staff corps. They desire especially that the organization of their corps should have that percentage of the two higher grades, outside of the Chief of the Corps, which would permit every one to look forward to retirement as a colonel after the honest and faithful service of a lifetime.

We, therefore, on behalf of the interests of the medical corps and their bearing on the efficiency of the Army, recommend that H. R. 11022 be amended so as to provide twenty instead of ten assistant surgeons-general, with the rank of colonel, and thirty (instead of twenty) deputy surgeons general, with the rank of lieutenant-colonel, and to reduce the number of assistant-surgeons, with the rank of captain and lieutenant, from 360 to 340.

These numbers are not chosen arbitrarily, nor for the mere purpose of reaching a desirable percentage in the higher ranks, for it is easily demonstrated, by a consideration of the duties and positions to which the colonels and lieutenant-colonels should be assigned, that even a large number of such officers would be fully and constantly employed. The assistant to the Surgeon-General, the chiefs of the large and active divisions in his office, the Chief Medical Inspector and his assistants, the Dean of the Army Medical School, the chief surgeons of the numerous home and colonial military departments, the officers commanding the general hospitals of from 500 to 1000 beds, the chief surgeons of the large garrisons and camps assimilating a brigade organization, and the medical supply officers should all be of these grades, as such duties require officers of trained experience and of rank commensurate with their service and the responsibility of their work.

We would further recommend that promotions be made by seniority, after passing the examination required by existing law.

In submitting these recommendations we have in view only the evident and urgent needs of the service, as reorganized on the basis of a total membership of 501. Were we to give full expression to our views of what is desirable and would be beneficial to the Medical Department and the Army generally, we would urge the consideration and adoption of those provisions of Senate Bill 4900 relating to the Medical Department, which bill is now before the Military Committee of that body. It provides for a corps of 596 officers, comprising 1 surgeon general with the rank of brigadier-general, 20 assistant surgeons-general with the rank of colonel, 30 assistant (deputy?) surgeons-general with the rank of lieutenant-colonel, 175 assistant surgeons-general (surgeons?) with the rank of major, 120 assistant surgeons general (assistant-surgeons?) with the rank of captain, and 250 assistant surgeons general (assistant-surgeons?) with the rank of lieutenant, mounted. This total of 596 medical officers for an army of 100,000 men is relatively not so large as the medical force now in the service of the United States. The present strength of the regular army is in round numbers 55,000, and of the volunteer army 73,000 men, a total of 128,000, for whom are provided 892 medical officers, regular, volunteer and contract, or at the rate of one medical man to 144 soldiers. The 596 medical officers of Senate Bill 4900 provides one medical officer to every 168 men of an army of 100,000.

We would indeed go further than the said Senate bill when we consider the importance of a Medical Department of an army of 100,000. Whether it is viewed in the light of medical supply, involving the expenditure of large sums of money, in the light of sanitation, involving the military efficiency of the whole command, in the light of military administration over so many officers, hospital-corps men, nurses and hospital establishments, or in the light of caring for 10,000 men, or 10 per cent. of the Army, which is an average percentage of sick, in times of active service, the importance of the work and the extent of the responsibilities appear to us to be more than equivalent to those of a division commander who has the rank of a major-general. The Chief of the Medical Department in most European armies has this rank. We, therefore, are of the opinion that in recognition of the great responsibilities attaching to the surgeon-generalcy of such an army the officer holding this position should have the rank of major-general and that the senior of the assistant surgeons-general should have the rank of brigadier-general.

Respectfully,

(Signed) DALLAS BACHE,

Colonel and Assistant Surgeon-General.

(Signed) CH. SMART,

Lieutenant-Colonel and Deputy Surgeon-General.

(Signed) LOUIS A. LAGARDE,
Major and Surgeon.

PUBLIC HEALTH.

Spain's Losses in Cuba.—An item in a New York daily of January 25, is to the effect that according to figures published in Madrid, "80,000 Spanish soldiers perished, chiefly from sickness, during the last campaign in Cuba."

Smallpox at Ponce, Porto Rico.—Dr. Monet, Health Officer of Ponce, reports that "so far, the smallpox as an epidemic is confined to the native population and is of the confluent variety. An isolated hospital camp is desirable, but both the government and municipality are unable to provide the tents required."

Smallpox Among Zuni Indians.—A Santa Fe, N. M., dispatch of January 25, says that according to late information from the Zuni Pueblo, in the western part of the territory, smallpox is epidemic. The statement is that since the disease broke out 217 deaths have occurred and 600 Indians are ill, of whom possibly one-half will recover. Accounts vary.

Health in Indiana.—Reports from observers in about forty counties, for the week ending January 21, indicate a decrease in diphtheria, typhoid fever and diarrheal diseases, and indicate a marked increase in la grippe and pneumonia. Fatalities from grip are few. Reports say that a great deal of acute catarrhal inflammation is called grip.

Health in Chicago.—The report of the Board of Health of Chicago for December, 1898, gives the total number of deaths as 1849, 348 of which were persons under one year of age, and 220 between one and five years. The death-rate per thousand was 1.14, as compared with 1.10 for December, 1897. The principal causes were: Pneumonia, 282; nervous diseases, 203; consumption, 200; heart disease, 133; bronchitis, 109; acute intestinal diseases, 78; diphtheria and membranous croup, 77; cancer, 63; typhoid fever, 55.

Circulars Warning Against the Use of Alcohol.—Legendre has had plainly worded circulars describing the dangers and ravages of alcoholism, hung around the walls of his service in the hospital, and others are imitating his example. He wishes to have popular lectures on the abuse of alcohol delivered before the inmates of the hospitals, and the plan is on the point of realization.—*Progres Méd.*, Dec. 24, 1898.

Guayaquil Not a Health Resort.—According to the *Semaine Méd.*, Guayaquil, Ecuador, has no quarantine service, as it is recognized that the ports from which the ships arrive can not possibly be unhealthier than Guayaquil itself. The European governments have found it impossible to keep consuls there, on account of the ravages of yellow fever, and are compelled to engage acclimated residents to serve in that capacity.

Tropon, the New, Cheap Albuminous Food.—Nearly ten pages in the *Munich Med. Woch.* of January 10 are devoted to a couple of articles describing tests with tropon (vide JOURNAL, xxxi, p. 941), confirming in every respect the value of this cheap, nourishing, tasteless preparation, to add to soups, etc. For arctic expeditions, military campaigns, etc., it is particularly valuable on account of its small bulk. It is able to substitute completely the albumin in other foods; causes no disturbances; can be taken for long periods without aversion, and costs only four marks a kilogram, much cheaper than meat.

Propagation of Bubonic Plague.—We note in Simond's comprehensive study of the plague (*Annales de l'Institut Pasteur*, October, 1898), that the flea is the means by which the plague is transmitted. The germ thrives in the alimentary canal of the flea and is then inoculated into the rat or man the flea alights on. A temperature of 70 degrees C., for several hours, suffices for disinfection, and protective measures against fleas and rats and persons arriving from infected localities, with prophylactic serum injections, he considers would reduce the number of cases to the minimum.

Regulation of the Sale of Thyroid Products.—The necessity of protecting the public by regulating the sale of the thyroid products, and restricting it to physicians' prescriptions, has been simultaneously proclaimed in France, Germany and England. Prof. W. Ebstein denounces the use of these products in obesity, as illogic, unreliable and unnecessary, "the remedy worse than the disease" (*Deutsche Med. Woch.*, January 12). Franck calls attention to the dangers of thyroid treatment when the normal thyroid gland is working properly, liable to produce somnolence, coma and even death from heart failure in persons with cardiac insufficiency. Lancereaux states that he always watches the pulse when administering it, and suspends it when the pulse is over a hundred.—*Bull. de l'Acad. de Méd.*, January 10.

Sewage as Affecting Food.—The trend of opinion seems now to be that if the soil be gorged to repletion with sewage, then the crops will be surcharged with sewage elements, and unfit for food—the meat and milk of animals derived from such crops will also be like the crops, alike unpleasant to the taste and dangerous to the health. These statements are proved by well-known facts; that is, if a cow is fed on turnips, her milk will within twenty-four hours taste like them, the intensity of the flavor being according to the quantity of turnips taken; in the case of hens and their eggs, a like result follows, for, if fed on decaying matter, which they always eat greedily, both their eggs and flesh will be disagreeable and unwholesome eating. Ducks, too, are still more objectionable in these respects.

Intermittency of Meningitis.—In a recent report on the cerebro-spinal meningitis epidemic, lately so marked in Massachusetts, it is officially stated that the whole number of deaths from that disease in that State in nearly twenty years, ending Oct. 1, 1897, was nearly 150 per year. The numbers for the years 1878-1896 were nearly uniform, but in the first nine months of 1897 the number reported was 405, those in Boston alone being 184, and it seems that more than 26 per cent. of this number occurred among young children under one year old. Strange as it may be, after the disease appeared in Geneva in 1805, its next appearance was in Medfield, Mass., and then, shortly after, in other towns in New England, Illinois, New York, New Jersey and Maryland. As a rule, the outbreaks of the disease have been seen as perfectly isolated epidemics in places which had been hitherto free from it, and in almost all cases the epidemics have appeared in the winter and spring.—*N. Y. Tribune*.

Isolation of Tuberculous Patients.—Two hospitals in Paris have set aside a special ward for this purpose, but the deaths still average nearly a third, and the necessity of a supplementary sanatorium outside the city, where the food and fresh air would combine to restore the curable patients to health, is earnestly advocated by Letulle and others. He has succeeded, after much effort, in having the tuberculous patients at the Boucicault supplied with an extra dish at their meals, although this "alimentary debauch" aroused much protest from the finance department at first. He considers that if sufficient reclining-chairs and warm clothing could be supplied, and a sheltered gallery provided, even the hospital tuberculous ward might serve as a semi-sanatorium.—*Presse Méd.*, Dec. 24, 1898.

Water Kefir: A Hygienic Drink for the Army.—Kefir made with milk is the constant beverage of the inhabitants of the Caucasus, and a modified kefir made with water, sugar and kefir grains, produces in six days a sparkling, refreshing drink containing 1.4 grams alcohol, 16 of sugar and 2.10 of carbonic acid to the liter, resembling cider in its appearance, with an acid, slightly wine taste. The expense is less than a sou a liter, and Surgeon-Major Carteret of the French Army has found it a most excellent and popular hygienic, tonic and appetizing drink for the soldiers in his regiment. He observes that the kefir is not a good culture-medium, and is therefore healthier than the water from which it is made. The formula is two liters

of water to one liter of kefir grains and fifty grams of brown sugar. Stir in an open pitcher. After three days, stir again, strain and bottle, fastening the corks as for champagne. Drink, after three days in the bottle. The kefir grains can be used again and again, and if well dried can be put away to keep for months.—*Presse Méd.*, January 7.

Insects and the Convection of Contagious Diseases.—P. R. Joly, in a monograph on this subject, quotes instances of malignant pustule, Egyptian ophthalmia, and Delhi boil conveyed by flies. He has also found as the result of careful observations that the legs of flies may be covered by staphylococci and many other forms of bacteria. Tubercle is particularly liable to be disseminated by flies; thus they come in contact with sputa and other means whereby tubercle bacilli discharged from the body of the patient become ingested. The insects then alight on food and deposit the tubercle bacilli, and thus easily contaminate milk, meat, and other substances. The author quotes Yersin as having noticed that the bodies of dead flies collected in his laboratory often contained numbers of the plague bacilli. The influence of various insects, more particularly mosquitoes, in carrying the filaria sanguinis is well known. The mosquito has also been suspected as the agent in the conveyance of malaria, and the writer suggests that the "sleeping sickness" is due to infection carried by insects. Ordinary inflammatory conditions may be produced by the common flea and bug, though the writer has been unable to find that the latter insect carries tuberculous infection, as is stated by some observers. The writer goes on to show the importance of warding off flies as far as possible, especially in cases of the disease mentioned. He suggests a solution of formol as of considerable use for this purpose, and particularly good in cases of phtheiriasis.—*British Med. Jour.*

The Crime of Substitution.—The New York City Board of Health has taken up the subject of drug substitution, a dangerous practice that is believed by that board to have assumed growing proportions. In the recent prevalence of influenza in that city, frequent instances were found where druggists were using commercial acetanilid for phenacetin in prescriptions. The former drug, it is said, can be purchased at fifty cents per pound, while phenacetin is about eighty-five cents per ounce. One of the health officials is reported as finding the legislation against substitution as needing amendment; "the law is wholly inadequate to reach the offenders. The fine for such work can not exceed \$50 in each instance, although the fine for adulterating milk is \$100. This great evil is felt more by the poor of the city than by anyone else, and they are the ones we are most interested in protecting. I do not mean to reflect on the worthy practitioners who have charge of this class of patients, but rather on the drug clerks, who, in making up prescriptions will stop at nothing to make an extra few cents. Adulteration is not attempted in filling the prescriptions of prominent physicians, for they have their prescriptions put up by reputable druggists, who, in turn, make their purchases from equally reputable chemists. As for the other class of dealers who resort to such practices as I have outlined, I know of no punishment severe enough for such rascals, who are a menace to the lives of the sick. The legislature should pass more stringent laws upon the subject. It is difficult at present to get evidence against the offenders, but once that evidence is obtained the offenders should be heavily punished."

Disposal of Excreta in Cuban Camps.—Surgeon-General Sternberg, in a letter dated Jan. 25, 1899, has invited the attention of the Adjutant-General to certain statements made by Lieut.-Col. O'Reilly, chief surgeon, volunteers, concerning the disposal of excreta at Up Park Camp, the principal military station in the Island of Jamaica. These statements are: "All garbage is removed by contract; is carried a distance of

six miles and burned. The excreta are provided for by the dry-earth system. Each barrack has one privy, which is furnished with a number of galvanized-iron buckets, and with dry earth and scoops, so that immediately after defecation a man can cover his excrement with earth. Last year lime was used with the dry earth to advantage. Dry-earth sheds are used to have always a supply of dry earth during the rainy season. A separate place is provided for urination. The receptacle is a wooden tub, which is tarred. These tubs, as well as the buckets in the dry-earth closets, are emptied once in every twenty-four hours, by a contractor, who carries the deposited matters to a point six miles to the leeward of the camp and there buries them." The Surgeon-General fully approves of this method of disposal of excreta when it is impracticable to have a complete system of sewers and water-closets connected with them. He does not, however, approve of Colonel Waring's proposition to use the same earth repeatedly in connection with such earth closets. During his recent visit to Havana he ascertained that neither of these approved methods, nor the method recommended by the board of medical officers, of which Major Walter Reed, surgeon, U. S. A., is president, and which also has his approval, has been carried out in our large camp at Marianao, Cuba. He, therefore again invites attention to this important subject, and recommends that prompt measures be taken to provide for the disposal of excreta at all camps and barracks garrisoned by our troops in Cuba, by one or other of the methods referred to. There is good reason, he says, for believing that yellow fever, as well as typhoid fever, cholera and various intestinal diseases, are propagated through germs contained in the excreta of infected individuals, and the proper disposal of excreta is the most essential factor in the prevention of these diseases. The Adjutant-General took prompt action on this communication, for on the day on which it was written he notified the Surgeon-General that the Secretary of War approved of the expenditure necessary to provide excavators, troughs, etc., for large camps and garrisons. Small commands not supplied with excavators will be required to use the earth-closet system on the lines indicated in the letter of the Surgeon-General of Jan. 25, 1899. The expense of providing the materials for closets and necessary labor for removal of excreta will be borne by the Quartermaster's Department.

England's State of Preparation for a Smallpox Epidemic.—Sir Richard Thorne, the chief medical officer of the English Local Government Board, has prepared a special report for the purpose of showing the receptive condition of the rising generation of his countrymen to epidemic variola. His observations on the increasing percentage of children who escape or evade vaccination are worthy of serious attention. He says that the summary he is able to give of the vaccination officers' returns is concerned with births during the calendar year 1895, the most recent period for which final information, based on repeated local inquiries concerning each child, is procurable. It shows that after deducting from a total of 921,512 births those children who are successfully vaccinated, those who died unvaccinated, those who were registered as "insusceptible" of vaccination, and those who had smallpox before vaccination, there still remained 20.5 per cent. who could not be traced or were otherwise not finally accounted for as regards vaccination. The proportion unaccounted for in the metropolis was 24.9 per cent., that for the rest of England was 19.8, both of which rates show a still further increase and a failure to comply with the provisions of the vaccination acts, which has been steadily growing for some fifteen years. Indeed, if allowance be made for the further falling off in this respect, which is believed to have occurred since 1895, the number of children now born in England and Wales who in one way or another escape vaccination, is probably not much less than one-third of the whole. In this way the country is being prepared for wide-

spread epidemics of smallpox such as have been unknown to the present generation, unless, indeed, the invariable rush and clamor for immediate vaccination on the part of those who have neglected or disclaimed against the operation during times of freedom from smallpox, should be capable of being so far met in the moment of emergency as largely to mitigate the impending disaster. It will be observed from the returns for 1895 that 2962 children were registered as insusceptible of vaccination. In this connection I would point out that the number of consecutive primary vaccinations by the Board's own officers without the occurrence of a single instance of so-called insusceptibility now reaches 107,180."

Health Report of Washington, D. C.—The report of the Committee on Public Health of the Board of Trade was read by the chairman, Dr. W. W. Johnston, at the public meeting held January 13. Dr. Johnston said: The death-rate and total number of deaths during the past year had been less than any year since 1875, when vital statistics had first been compiled in the District. There had been a decided reduction in the number of deaths from typhoid fever during the past year and he traced the result directly to the efforts made to lessen the sources of the disease, through the abolition of surface wells and pumps, the removal of sinks and outhouses, the improvement in drainage of the outlying parts of the city, the diffusion of knowledge among the people concerning the danger of contaminated water and impure milk-supply, and the milk analysis and inspection, now rigidly enforced. Referring to the prevalence of diphtheria and scarlet fever, he said "there were 494 cases of diphtheria among whites, with 67 deaths; and 206 cases among colored, with 64 deaths. There were two and one-third more cases among the whites, with about the same number of deaths as in the colored. He attributed the smaller death-rate among the whites to the fact that antitoxin is used more generally and at an earlier period than among the colored; he attributed the spread of the disease to the overcrowded and less healthful houses of the poor and less intelligent class, and urged the passage of more stringent laws governing contagious diseases and also a large appropriation from Congress to enable the Health Department to disinfect all premises where there have been cases of contagious disease." Referring to the water-supply and filtration, he said that the daily consumption of Potomac water averages 47,288,733 gallons, a per capita supply of 168 gallons for an estimated population of 283,782 and emphasized the fact that each year's experience showed an imperative demand for better purification of water-supply than is secured by the present method of reservoir sedimentation. He pointed out that the Potomac River above Washington, the source of the water-supply, drains an area of about 10,000 square miles and receives annually over 5,000,000 tons of sediment, the washings of that surface area. The river is a sewer for nine cities and towns along its banks which are increasing in population and sewage, all of which pollute the river; typhoid fever is prevalent in these towns and cities, and the policy and absurdity of using the same river as a sewer and drinking water-supply, is apparent. He pointed out the impossibility of self-purification of river water and that the removal of organic matter and disease-producing bacteria is possible only through modern filtration. In substantiation of the above he showed that rapid filtration did not satisfactorily remove germs, but that modern methods or filter-beds, when properly constructed, were highly satisfactory; he showed from statistics that typhoid fever was reduced to a minimum in the large cities where filtration was properly carried on. Munich, with filtered water, has a death-rate from typhoid fever of 3 in 100,000 population; before filtration, it was 210, in the same population; Vienna, had 181 before, 6 after; Berlin 100 before, 5 after; Breslau, 113 before, 9 after; Lawrence, Mass., 43 before, 7 after; Buffalo, with unfiltered water, 29; Washington, D. C., unfiltered, 69 per 100,000. He referred to the failure of Congress to make an appropriation for the maintenance of a chemic laboratory for the Health Department; formerly \$250 was appropriated annually for this purpose. At present the Health Officer employs an inspector, who is a chemist, to investigate adulterations of food, foodstuffs, milk, water, butter and drugs, and defrays the expenses out of a small appropriation, known as "contingent fund." He pointed out the necessity of a chemic and bacteriologic laboratory, with a suit

able force, for the purpose of suppressing disease and detecting alterations; he showed, that, notwithstanding the limited funds and force at the command of the Health Officer, adulterated foodstuffs are being driven systematically from the shops. He also pointed out that while over 40,000 pupils yearly attend the public schools in the District of Columbia, no certificate of health or freedom from contagious disease, or of the ability of the child to begin formal school instruction, is required, except the certificate showing previous vaccination. Children are admitted to the schools who are unfit physically and mentally to begin school life, and cases of contagious skin disease, tuberculosis and other diseases, propagated by contact, are not excluded by the present system. To remedy this evil every child applying to enter school should be required to present a certificate from the family physician setting forth physical and mental fitness to begin school life, and freedom from contagious disease. As the State is responsible for the care of the body and mind of the child, such responsibility demands the appointment of school physicians to examine such certificates and, in doubtful cases, subject the child to further examination. Referring to the prevalence of malaria caused by the pestilential condition of the Anacostia River and flats, he stated that out of 200 patients in one of the many buildings of the Government Insane Asylum, 49.5 per cent. were ill with malaria between March and November of the past year. Of 229 employes at the same institution, 75 were ill from malaria during the same period, and the surgeon in charge states that the insane are made worse in their mental disorders by malaria. Malaria seriously interferes with the education of the children. From February to June of the past year, absences amounting to 4639.5 days were caused by malaria, while 16,221.05 days represented absences on account of all other diseases. 23.3 per cent. of absences being caused by malaria. During a period of 123 days, 25,694 days were lost, an average of loss to each pupil of about 1.05 days. The report of the surgeon, Maj. W. C. Boarden, U. S. A., in charge of the Washington Barracks, shows that from July, 1897, to July, 1899, with an average population of the post of about 400 men, 135 suffered from malaria. Dr. Johnston pointed out that the schools and institutions referred to were all adjacent to the Anacostia River, and the figures show the danger to the health of the city from the prevalence of the present conditions along that water-course. Among other matters of importance to the health of the community, he said, are the proper disposal of sewage and the removal of garbage, ashes and other waste. The plans proposed in this connection by the officials of the District Government, are approved and recommended by the Committee and the Board of Trade.

Health Reports.—The following cases of smallpox, yellow fever and cholera have been reported to the Supervising Surgeon-General of the U. S. Marine-Hospital Service for the week ended Jan. 28, 1899:

SMALLPOX—UNITED STATES.

Alabama: Calvert, December 10 to January 20, 10 cases; Clarke County, December 25 to January 1, 2 cases, disease generally prevalent; Mobile, January 20, 5 cases.

Connecticut: New Haven, January 16, 2 cases; origin of the disease, New Durham, N. J.

District of Columbia: Washington, January 21, 1 case; origin, Alexandria, Va.

Florida: Pensacola, January 15, 1 case.

Kansas: Marion County, January 18, 11 cases; origin, Oklahoma.

Missouri: St. Louis, November 1 to January 21, 15 cases, 2 deaths.

Nebraska: Nebraska City, January 9-16, 4 cases, 3 deaths.

New York: Dunkirk, January 7-14, 3 cases; New York, January 7-14, 1 death.

Pennsylvania: Altoona, December 31 to January 25, 1 case; Bedford, December 31 to January 25, 1 case; Brumbaugh, December 31 to January 25, 2 cases; Charlesville, December 31 to January 25, 15 cases; Claysburg, December 31 to January 25, 1 case; Philadelphia, December 31 to January 25, 9 cases.

Virginia: Alexandria, January 20, 1 case; Norfolk, January 16, 90 cases.

SMALLPOX—FOREIGN.

Belgium: Antwerp, December 24-31, 10 cases, 2 deaths; Pretoria, December 24, epidemic suppressed.

Brazil: Rio de Janeiro, December 3-16, 21 cases, 9 deaths.

France: Paris, December 24-31, 1 death.

India: Calcutta, December 3-10, 1 death.

Mexico: Chihuahua, January 7-14, 1 death; Mexico, December 31 to January 8, 4 deaths; Vera Cruz, January 5-12, 1 death.

Russia: Moscow, December 17-24, 14 cases, 8 deaths; Odessa, December 24-31, 1 death; St. Petersburg, December 24-31, 1 case, 1 death; Warsaw, December 17-31, 4 deaths.

Turkey: Bagdad, October 22 to November 27, 96 cases, 20 deaths; Constantinople, December 26 to January 2, 11 deaths; Smyrna, December 18-25, 4 deaths.

YELLOW FEVER.

Brazil: Rio de Janeiro, December 3-16, 10 cases, 10 deaths.

Columbia: Barranquilla, December 17-24, 1 case, 1 death.

India: Calcutta, December 3-10, 1 death.

Mexico: Vera Cruz, January 5-12, 4 deaths.

CHOLERA.

India: Calcutta, December 3-10, 6 deaths.

ASSOCIATION NEWS.

Section on Diseases of Children.—It is desired that titles of papers to be read in this Section be sent the secretary, Dr. J. Leland Boogher, St. Louis, Mo., not later than March 30. The program is already quite full, and members are urged to attend to the matter at once. A preliminary program will be mailed early in April.

SOCIETY NEWS.

Jasper County Medical Society.—The semi-annual meeting and banquet of this Society was held January 17, at Newton, Iowa.

Scandinavian Medical Society.—The eleventh anniversary of this Society was celebrated with a banquet and ball at Chicago, January 21. The toast-master was Dr. A. H. Wimermark.

Bay County Medical Society.—At the recent session of this Society, the following officers were elected: President, J. McLurg; vice-president, W. C. Bishop; secretary, Wm. Kerr; treasurer, C. H. Baker.

Toledo (Ohio) Medical Association.—At the annual meeting, January 13, officers were elected as follows: President, Walter H. Snyder; vice-president, W. D. Stewart; recording secretary, Nelson H. Young; treasurer, James H. Duncan.

Hospital Medical Society.—The physicians of Rochester, N. Y., have organized a new society to be known as the Hospital Medical Society. S. W. Little is president, C. A. Greenleaf, secretary.

Alumni Association.—At the annual election of the Alumni Association of the Medico-Chirurgical College, Philadelphia, the following officers were elected: President, Henry Fisher; secretary, George W. Pfromm; treasurer, E. S. Gans.

Des Moines County Medical Society.—This Society recently held a banquet at Burlington, Iowa, at which Dr. H. A. Leipziger presided as toast-master. Special toasts were given by Drs. G. B. Little, Carl Stutsman, Barnes and Campbell.

White County Medical Society.—At the recent meeting, Carmi, Ill., the following officers were elected: W. W. Apple, president; L. C. Burdick and Chas Wakeford, first and second vice-presidents; W. A. Steele, secretary, ex officio treasurer.

Los Angeles (Cal.) County Medical Association.—At the regular meeting of this Association, January 20, the address of the retiring president, Dr. W. W. Miller, was delivered. Dr. Wesley W. Becket addressed the Association on "Typhoid Fever."

Beaver County Medical Association.—This Association, Pittsburg, Pa., has elected as officers: President, J. Burt Armstrong, Beaver; secretary, A. S. Moon, Beaver Falls; treasurer, T. P. Simpson, Beaver Falls.

Somerset County Medical Association.—At a recent meeting of this Association, Johnstown, Pa., these officers were elected: R. E. Pollard, Garrett, president; A. J. Welfley, Confluence, vice-president; H. C. McKinley, Meyersdale, secretary; David Gildner, Rockwood, corresponding secretary; W. S. Mountain, Confluence, treasurer.