

THE TEACHING OF HYGIENE IN SCHOOLS.

III.—HOW SHOULD HYGIENE BE TAUGHT.

It seems almost incredible that our Colonies should be so far in advance of the mother country in many matters of national import; yet this is true, and a striking example of it is found in the teaching of hygiene in schools. For instance, in Canada, Victoria, South Australia, New South Wales, and Natal, hygiene is systematically taught, and in most is made a compulsory subject in all public elementary schools. That foreign countries should always take the lead in progressive measures seems unfortunately to be taken as a matter of course and accepted without a blush. But it does seem ignominious that the British Colonies should set to Great Britain herself an example of wisdom and foresight. A brood of chickens would not be expected to teach their mother common sense, yet this is really very much the case with England.

It is taken for granted that America should, at the least hint of the wisdom of a new measure, immediately adopt it and give it a trial. What America does through wealth, enthusiasm and impulse, Sweden does from sound common sense. It is only natural, therefore, that in these two countries the teaching of hygiene is made compulsory—by education laws in America and by a decree of Parliament in Sweden. In Denmark, Holland, and Italy also hygiene is taught.

But there is teaching and teaching, and the question of how hygiene should be taught is one that requires the most careful consideration before the final adoption of any scheme. Attention has lately been drawn to "suggested courses of teaching in hygiene and temperance for boys and girls in the public elementary schools in the United Kingdom." This is based upon a scheme in use in the schools of the United States of America, and has been issued by the Committee of the Medical Profession in the United Kingdom constituted to promote the teaching of hygiene and temperance. Now, it must at once be admitted that in the minds of this committee the question paramount was the teaching of temperance to school children, and that hygiene was a secondary consideration.

The scheme which has been brought out is based upon that prepared by Mrs. Mary A. Hunt for use in the schools of the United States of America. There is much good in the scheme, but there is also room for criticism. We have lately had many occasions of discussing with teachers of exceptional ability and common sense the manner in which temperance teaching might best be conducted in schools. One and all are agreed that, while it is necessary to give teaching in temperance, it is unwise to commence this too early.

If a young child has dined into it for six or seven years that alcoholic drinks have an irritating effect on the stomach, that they are injurious to health, and "the danger that cider, beer, or wine drinking may create the desire for more," what is the result? We can imagine elementary classes repeating this lesson over and over again in their fine sing-song style until the words lost all meaning and importance. As with the everlasting "Don't" of a mother or nurse, the admonition at last produces about as much effect as the passing of water over a duck's back. Now, while in other questions of hygiene bearing on everyday life it is not only advisable but absolutely necessary that the teaching should begin as early as possible, a mistake will, we believe, be committed if the drink question is thrust upon little children, whom after all it does not concern during their early years. Personal hygiene intelligently taught will do more, we venture to think, than the most elaborate temperance teaching; a child well grounded in the moral and practical aspects of hygiene will be likely to have a horror afterwards of anything degrading, such as drink. It has been contended by some that the time to teach hygiene to children is after they leave school, when they arrive at years of discretion. We would urge strongly that while this is too late for personal hygiene, the time for lessons on temperance is during the last year or two of school life, to be continued if possible by good influences after the boy or girl leaves school. After school life they commence to earn money, some of which they can spend as they choose. During their last school year they have suddenly learnt the dangers of drink, the poisonous properties of alcohol and tobacco. Before this they have by sensible instruction in general hygiene learnt right from wrong; they have learnt to reason, and have acquired self-respect and self-control. If the teaching has been practical and clear the soil will have been prepared and the seeds there sown will take root and bear fruit. In looking

over the scheme containing a suggested programme for the teaching of hygiene and temperance, one is struck by the harping on alcohol. Out of the seven clauses contained in Section II, "Topics suitable for children of about 8 years of age," no less than five refer to alcohol, and this is much the same right through the scheme. But it is only when examining the series of books *Physiology and Health* used in American schools that the great proportion of matter devoted to temperance can be appreciated. We may be allowed to question the wisdom of teaching little children the dangers of chewing, smoking and snuffing tobacco, and of opium eating. We quote at random from Number One textbook (for primary classes): "If a person takes opium many times he soon begins to want to take more opium. In this way an appetite for it may be formed. If a person then yields to such an appetite and keeps on taking opium, it will soon do great injury to his health and to his mind," and so on.

In considering this question of hygiene the education authorities are confronted with a greater responsibility perhaps than any they have yet had to take upon themselves, and we trust that the gravest thought will be given to the matter, and that it may be considered from the broadest point of view, always bearing in mind the true aim of education. It was Kant who said, Act as a man, not as an animal or vegetable which is the creature of circumstances; treat brothers, sisters, relatives, in fact all people, as persons, not as things, not as instruments of your own convenience or pleasure. Were teaching animated by this spirit many a boy and girl would be saved from the stigma of the reformatory; it would no longer be necessary to sing paeons of joy over the few lambs saved, yet branded by such institutions as Borstal, which, if effective preventive teaching were given, should not exist.

NOVA ET VETERA.

THE ORIGIN OF CIRCUMCISION.

In the *Independent Review* for November Dr. J. G. Frazer, the well-known author of *The Golden Bough*, discusses the origin of circumcision with reference to certain ceremonies of the Australian aborigines. He takes as his text a number of totemic rites in which a remarkable use is made of the blood of the men of the totem. All the known totems, says Dr. Frazer, with the single exception of a gigantic, but mythical, water snake, are natural objects of one kind or another, and the great majority of them are edible animals or plants. Hence the general result supposed to be accomplished by the magical totemic ceremonies is that of supplying the tribe with food and other necessaries. Oddly enough, at the present day, the men of a totem clan for the most part reap little or no direct benefit from their exertions; for, when their totem is an edible animal or plant, they may not eat of it, or may eat of it but sparingly. For this abstinence they are compensated by being allowed to profit by the exertions of all the other clans. The system is, in fact, a co-operative supply association on a great scale; only, the means taken to ensure the supply are not rational but magical, and the various purveyors of food are, as a rule, forbidden to partake of their own wares.

As an example of ceremonies in which a special use is made of the blood of the men of the totem, Dr. Frazer states that, in order to multiply emus, which are an important article of food, the men of the emu totem in the Arunta tribe proceed as follows: They clear a small space of level ground, and, opening veins in their arms, they let the blood stream out until the surface of the ground, for a space of about 3 square yards, is soaked with it. When the blood has dried and caked it forms a hard and fairly impermeable surface, on which they paint the sacred design of the totem, especially the parts of the animal which they like best to eat—to wit, the fat and the eggs. Round the painting they sit and sing. That is supposed to multiply emus. Men of the Kangaroo totem perform similar ceremonies for the multiplication of kangaroos, and others use a like method to ensure a plentiful supply of carpet snakes and iguanas. Human blood is used for other purposes. Dr. Frazer says that it is a common custom among central Australians to give human blood to the sick and aged with the object of strengthening them. The blood need not be drunk; it is sufficient to sprinkle it on the body of the patient. The blood is drawn from a man or woman related to the infirm person either by blood or by marriage. The idea is always to give strength. Thus, before a punitive expedition sets out to hunt for an enemy, all the

men stand up, open veins in their genital organs and allow the blood to spurt over each other's thighs. This ceremony is supposed to strengthen them mutually, and to knit them so close together that treachery becomes impossible. Sometimes, for the same purpose, blood is drawn from the arm and drunk by the members of the avenging party.

The blood shed in the ceremonies of circumcision and subincision, which all lads of the central Australian tribes have to undergo before they are recognized as full-grown men, is caught in a hollow shield and taken to certain kinsmen or kinswomen, who drink it or have it smeared on their breasts and foreheads. Dr. Frazer conjectures that the object of this practice is to strengthen the relatives who partake of the blood. This interpretation, he thinks, is confirmed by an analogous use in Queensland of the blood drawn from a woman in the operation which in the female corresponds to subincision in the male; that blood, mixed with another ingredient, is kept and drunk as a medicine by any sick persons who may be in the camp at the time. It receives further confirmation from an analogous use of the foreskin removed at circumcision; among the southern Arunta this piece of skin is given to the younger brother of the circumcised lad, who swallows it in the belief that it will make him grow strong and tall. In some tribes, the blood shed at circumcision and subincision is collected in paper bark and buried in the bank of a pool where water lilies grow; this is supposed to promote the growth of these flowers, the stems and roots of which are used by the savages as food. A fertilizing virtue is attributed to the blood. The Anula tribe, who observe the same custom, obviously ascribe the same virtue to the severed foreskin, which they also bury by the side of a pool. The Warramunga place it in a hole, made by a witchety grub, in a tree, believing that it will cause a plentiful supply of these edible grubs. Among the Unmatjera, the boy puts his foreskin on a shield, covers it with a broad spear thrower, and deposits it secretly in a hollow tree. This custom is founded on a tradition that the early mythical ancestors of the tribe placed their foreskins in their Nanja trees; that is to say, the trees from which their spirits came forth at birth, and to which they would return at death. Dr. Frazer thinks the intention of such a custom could hardly have been any other than that of securing the future birth and reincarnation of the owner of the foreskin when he died and his soul returned to the tree which was its dwelling place between two incarnations. The idea apparently was that a man's new birth would be facilitated if in his lifetime he could lay up a stock of vital energy for the use of his disembodied spirit after death, and that this object could be accomplished by detaching a part of himself and depositing it in a suitable place.

In this belief and practice Dr. Frazer suggests that the long lost key to the meaning of circumcision and subincision may be found. It may be conjectured that the blood shed during each of these rites being credited with strengthening and fertilizing virtues was applied, like the foreskin, to lay up a store of energy in the dwelling place of the soul against the time when it would be needed. The intention of both ceremonies, therefore, would be to ensure the future reincarnation of the individual by quickening his local totem centre, the home of his disembodied spirit, with a vital portion of himself. That portion, whether blood or foreskin, was regarded as seed sown that it might grow up and provide the immortal spirit with a new body when the old one had mouldered into dust.

LITERARY NOTES.

We are informed that Her Majesty the Queen, whose interest in sick nursing is well known, has accepted from Mrs. Sarah A. Tooley a copy of her *Life of Florence Nightingale* (Bousfield and Co., London), recently reviewed in our columns.

A special centenary number of the *Edinburgh Medical Journal* will be issued early in January. It will consist of a series of papers on the progress of medicine as reflected in the pages of the journal during the past hundred years.

The *Pall Mall Magazine* now offers for sixpence what it has hitherto given for a shilling. The issue of December 15th shows no reduction in the quantity of its contents, literary and pictorial, and no deterioration in quality. In addition to an article on "London, Old and New," by Mr. John Burns, M.P.; a sketch of Mr. Austen Chamberlain, by Mr. Herbert Vivian, who was at Cambridge with him; an account of explorations in the land of King Solomon's Mines, by Mr. R. N. Hall; the opening chapters of a new story by Mr. H. G. Wells, and other interesting matter, there is an interview

with M. Marcelin Berthelot, in which the great chemist speaks in the character of a scientific prophet. He foresees a time not far distant when "chemistry will effect the economical manufacture of foods." There shall be no more chops or steaks. The diet of the human race is to be composed of substances "manufactured with carbon obtained from carbonic acid, with hydrogen extracted from water, and with oxygen extracted from the air." There will be no need either for corn or for cattle, and thus the fiscal question and the agricultural problem will find a solution unexpected either by Free Traders or Protectionists. We shall be warmed by tapping the central heat of the globe by means of shafts from two to three miles in depth. To another interviewer M. Metchnikoff discourses on the virtues of sour milk as the elixir of life. Altogether the *Pall Mall Magazine*, in its cheaper form, holds its place as one of the brightest and most stimulating of our "monthlies."

A committee of French medical men, with Professor Bouchard as Chairman and Dr. Paul Rodet as General Secretary, is engaged in drawing up a medical vocabulary in Esperanto. As we have said several times before, we have no faith in the future of Esperanto, or any artificial language, as a living speech. The arbitrary creation of a medical vocabulary seems to us to present difficulties of an especially formidable character, since the language of medicine, as it is now spoken among men, is in a state of chaos, and the values of terms differ so widely in different countries that it will be almost impossible to reduce them to a common denominator.

The book of Fa-hien, the earliest Chinese pilgrim (405-11 A.D.), translated and annotated by Dr. Legge, is among the publications of the Clarendon Press. Fa-hien spent three years at Pataliputra studying Sanskrit. The capital then possessed "an excellent free hospital endowed by benevolent and educated citizens." "Hither come," says the philosophic pilgrim, "all poor or helpless patients suffering from all kinds of infirmities. They are well taken care of, and a doctor attends them; food and medicine being supplied according to their wants. Thus they are made quite comfortable, and when they are well they may go away." No such foundation, says Mr. V. A. Smith in his *Early History of India*, recently issued from the Clarendon Press, was to be seen elsewhere in the world at that date; and its existence, anticipating the deeds of modern Christian charity, speaks well both for the character of the citizens who endowed it and for the genius of the great Asoka, whose teaching still bore such wholesome fruit many centuries after his decease. The earliest hospital in Europe is said to have been opened in the tenth century.

Mr. Benjamin Harrison, of Ightham, Kent, well-known to geologists and palaeolithologists and to many members of the medical profession who are interested in the records and relics of prehistoric man, as a very successful "flint-hunter," has given within the compass of a pamphlet of twenty pages an outline of the history of eolithic flint implements. Some of these implements seem to have been used for cleansing and rubbing the body and the feet. Similar body stones are in use at the present day among the primitive peoples of Australia and the East Indies, who employ them for the purpose of rubbing down the thickened and indurated skin which on the feet gives rise to callosities and corns and thus cause lameness. Mr. Harrison holds that the evidence is convincing that many of the eolithic implements were made and used by man on the now vanished Wealden hills, either as they originally existed or, as he thinks more probable, in their partially denuded condition; that after being discarded by man they were transported by natural agencies far down the ancient slope of what is now the highest land of the district; and that the former high land whence they were derived has been denuded to the extent of at least many hundreds, and perhaps thousands of feet, since such transportation took place. These conclusions point to an antiquity for the implements which Mr. Harrison says he will not venture to measure in years. The pamphlet is illustrated with drawings of typical specimens of implements and geological sections of the district in which they have been found.

The rat, if never exactly looked upon as a friend of man, was for a long time tolerated as a useful scavenger. Now he is regarded as a nuisance, with a highly-developed talent for self-multiplication which makes him formidable, and he is further known to be a potential disseminator of deadly disease. Therefore we no longer, like the eighteenth-century poet, invokes the Muse to inspire us to sing of him, but we ask the aid of science to rid ourselves of his hated and baleful presence. The problem is not an easy one, for his procreative

capacity has hitherto made him more than a match for the most destructive agencies of the laboratory. A method of dealing with the rat problem is described in the January number of the *World's Work and Play* by Mr. A. Pitcairn-Knowles. In Paris there is a "Ratodrome," or school of rat-catching, where dogs are trained to hunt and kill rats. The Ville-Lumière, according to a recent estimate, has 4,000,000 rats within its walls. Last year 1,735,000 of these rodents were destroyed, a result largely due to the skill of dogs trained in the "Ratodrome." From all parts of the rat-haunted capital enthusiastic adherents flock to the school with its quaint arena and huge rat-cage, where "Monsieur le Professeur" awaits his pupils, whatever breed they may represent—poodles, fox-terriers, borzois, greyhounds, pointers, pugs, or bulldogs. It is all the same to him; sooner or later they will all acquire the useful art of despatching their fur-coated antagonists, and thus assist in freeing Paris of its millions of rats. The training involves no cruelty to the dogs.

KING EDWARD'S HOSPITAL FUND FOR LONDON

A MEETING of the General Council of King Edward's Hospital Fund for London was held on December 19th, at Marlborough House, for the purpose of awarding grants to the hospitals and convalescent homes for the present year, H.R.H. THE PRINCE OF WALES being in the chair.

ACCOUNTS FOR THE YEAR.

The minutes of the last meeting having been read and confirmed, Lord ROTHSCHILD, the honorary treasurer, stated that the funds received for general purposes up to December 13th amounted, after payment of expenses, to £67,000 18s. 11d.; in addition the League of Mercy would provide £14,000. On the last corresponding occasion the Council had thought it right to trench on its reserves so as to increase the contributions to the hospitals for the year to £100,000, but this year it proposed to distribute only the money which it had in hand, and not to trespass further upon capital. He regretted that the regular contributions to the Fund showed very little difference, but the League of Mercy had been very active, and was able to supply more than before.

REPORT OF THE EXECUTIVE COMMITTEE.

After Sir H. BURDETT had given an account of the working of the League of Mercy, and of the way in which its shilling subscriptions—contributed at the rate of a penny a month—were resulting in a steadily-increasing collection, Mr. H. C. SMITH presented the report of the Executive Committee. It recommended the distribution of £79,000 to the London hospitals, making, with the £1,000 entrusted to the Fund by the London Parochial Charities for the convalescent homes, a total distribution of £80,000. Regret was expressed that the Committee had been unable to meet the conditions imposed by the anonymous person who, through H.R.H. the Prince of Wales, had made a munificent offer designed to raise the permanent income of the Fund to £50,000 a year. Doing so would have entailed the raising of a sum of at least £300,000, and for various reasons the Committee had thought it inadvisable to attempt to collect this sum from the general public; no opportunity, however, had been lost of bringing the matter to the notice of persons commonly in contact with the Fund, and three appeals had also been made by means of letters to the newspapers. Reference was also made to the appointment of a special Committee, consisting of Lord Welby, Sir Edward Fry, and the Bishop of Stepney, to inquire into the financial relations of hospitals and their medical schools. The publication of its report might be expected by the end of the year.

REPORT OF THE DISTRIBUTION COMMITTEE.

Sir WILLIAM CHURCH, Chairman of the Hospitals Distribution Committee, then read its report. This year it had placed in its hands £79,000, and in considering the grants which were recommended it was to be remembered that this sum was £20,000 less than last year, when some £18,751 were withdrawn from the capital account of the Fund, and placed at the Distribution Committee's disposal.

Special Hospitals.—In 1903 the Committee had set aside £10,000 to be drawn on as required, for the expenses incidental to the amalgamation of certain orthopaedic hospitals. The National Orthopaedic and the Royal Orthopaedic Hospitals had fallen in with this most desirable scheme, but, much to the regret of the Committee, the City Orthopaedic Hospital still stood out against it. In consequence, the Com-

mittee felt bound to recommend the withdrawal from this hospital of the annual grant of £250; inasmuch, however, as that sum had been given for the maintenance of the beds originally reopened by the Fund, it felt bound to cover the cost of those beds up to the end of the current year by a donation of £250, but reserved entire freedom of action as to the course which it would recommend next year. The Committee also stated that the opening of new special hospitals was undesirable, and that it would feel it to be its duty to discourage any efforts in this direction.

Hospitals and Medical Schools.—It was suggested that attention should be directed to the demands made on hospital accommodation by affording instruction in the Medical Schools in certain preliminary subjects; provision for it could be better made elsewhere.

St. Bartholomew's Hospital.—Application had been received from St. Bartholomew's Hospital for a grant towards its rebuilding fund, accompanied by an intimation that when the necessary money to reconstruct the hospital had been collected no further appeal would be made for assistance. The Committee having no precedent to guide it and being in doubt as to its powers to make a grant under such circumstances, referred the matter to the Executive Committee, which replied that in its opinion the King's Fund could not properly be devoted to capital expenditure on behalf of hospitals possessed of endowments substantially adequate to their maintenance, since such a departure would preclude the regular practice of the fund of associating contributions with annual inspection. In view of this instruction the Distribution Committee regretted that it had no power to consider the application from this ancient foundation, the work of which had for so long a period been of the greatest value to the sick poor of London. It desired to add that the hospital had been inspected by the Fund and the report received by its Visitors was favourable.

Sundry Observations.—The number of beds reopened by the Fund since the commencement of its work was 443. The Committee had again done its utmost to show appreciation of the scheme for the removal of King's College Hospital to South London. The utility of the Visitors' reports continued to be great, and in addition to its published remarks the Committee had followed the practice of making private suggestions to some of the hospitals, the expenditure of which appeared to be excessive. The list of proposed awards was then read.

CONVALESCENT HOMES.

The report of the Convalescent Homes Committee was read by Mr. F. M. FRY. It stated that the plan of making fairly substantial grants to a limited number of institutions had been continued, and expressed the opinion that the expenses of convalescent homes should be kept separate from those of the hospitals in connexion with which they worked. Grants were made to fifteen homes, and varied in amount from £25 to £200.

ADOPTION OF THE REPORT.

In moving the adoption of the reports read, H.R.H. THE PRINCE OF WALES said that he noted with pleasure that, as they were receiving a larger sum than had been anticipated from the League of Mercy, it would not be necessary to draw on the reserves in order to distribute £80,000 this year. It had been feared that this might have been required, but actually there would be a small surplus which would go toward replacing the sum withdrawn last year. The League of Mercy was growing in strength and popularity, and he would like to congratulate those whose labours had produced this result. The Fund could easily distribute £150,000 to hospitals which needed and would make good use of the money, but they had not got it; nevertheless, he thought means might be found of increasing the amount at the disposal of the hospitals for carrying on their ever-increasing work. If the expenditure of the hospitals could be decreased without impairing their efficiency, the result would be even more satisfactory than an increase in the money subscribed. Some of the hospitals certainly failed in point of economy. This was a matter of the utmost importance, and one with which the Fund very properly concerned itself. A statistical report had been prepared showing the expenditure of sixteen of the largest general hospitals, those which together received more than half the sums distributed by the Fund last year. This report gave the average expenditures of these hospitals on certain branches of expenditure over which control existed. The aggregate value of the sums paid in excess of these averages amounted to no less than £39,000 in the year 1903. All that sum could not be

saved at once, but every hospital should make sure that no other institution was doing the same work as itself, in similar circumstances, and equally well, but at a lower cost. The discrepancies in some of the prices paid for things commonly bought was remarkable. For instance, there was a difference of 3½d. per lb. between the highest and lowest prices paid for the same description of beef, of 3½d. as regards mutton, of 1s. 1d. in the price of fowls, of 2½d. per gallon of milk, of 7d. per lb. as regards tea. In drugs and household articles there were similar discrepancies; there might be a reason for them, but inquiry should be made. Many of the smaller hospitals might also with great advantage combine together to make large contracts for supplies, and in such combination the Executive committee would give its assistance. As for the question of hospitals and medical schools, it had been raised by the anonymous donor to whom reference had been made, and some doubt upon the subject also existed elsewhere. There were proper considerations which might be urged both for, and against, a contribution from the general funds of a hospital to those of its medical school, and a decision on the point could not be given offhand. A committee had therefore been appointed which was receiving every assistance from those able to set before it every side of the question. He thought, therefore, that they had shown their subscribers that they were endeavouring to lay out the money entrusted to them economically and properly, and that they were ready to endeavour to assist in the solution of any vexed questions which might arise, whether in respect of administration, reconstruction, removal, or amalgamation. The question of how to increase their income, and with it the incomes of the hospitals, still remained, but would be answered if the working of the Fund were appreciated by the public at its proper value. As for the offer of the anonymous donor, he did not know if it would be kept open for another year, but, if it were, he hoped that those who desired to see gifts wisely and economically distributed would help them to accept the offer. In conclusion he desired to express the obligations of the Fund towards the members of the various committees, to the honorary secretaries, and especially to one of them, Mr. Danvers Power, for his able statistical report on hospital expenditure. Before resuming his seat, the Prince of Wales added that the King desired him to express his unabated interest in the work of the Fund which he had started, and that as regards the satisfactory increase in the collections of the League of Mercy, he noted with pleasure that one of the largest increases was in a district the lady president of which was a member of his own family.

The motion for the adoption of the report having been seconded by the LORD MAYOR and supported by Mr. EDGAR SPEYER, the application from St. Bartholomew's Hospital was mentioned by Sir JOSEPH DIMSDALE. There were other well-endowed hospitals which received grants, and he could not see in what way it would have been inconsistent to make one to St. Bartholomew's. He was answered by the Chairman of the Executive Committee, who said that it was understood that, once the present needs of St. Bartholomew's had been met, the hospital would require no further assistance from the fund. If, therefore, a substantial grant from the Fund had been made it would not have carried with it the right of future inspection, and the latter was an indispensable condition of grants from the Fund.

The report having been adopted, the Bishop of ROCHESTER moved a vote of thanks to His Royal Highness for presiding. An assurance, he said, of economy and efficiency on the part of the charitable agencies which the public was asked to assist was a great help towards the collection of funds, and what their President had said showed that the King's Fund was doing everything possible to provide that assurance.

HIS ROYAL HIGHNESS having briefly acknowledged the vote of thanks, the proceedings terminated.

GRANTS TO HOSPITALS.

It is impossible to spare space for a complete list of the hospitals to which grants have been made, but the following selection will convey a conception of the principles upon which grants have been awarded or withheld. The Distribution Committee noted in its report that the absence of a grant did not necessarily imply dissatisfaction with the institution affected:

Central London Throat and Ear Hospital.—Donation, £300. Note: The Committee would view with satisfaction an amalgamation of the Throat and Ear Hospitals.

City of London Hospital for Diseases of the Chest.—Annual grant, £1,500; donation, £750. Note: £1,500 annual to support beds reopened by this Fund.

City of London Lying-in Hospital.—No grant. Note: An institution doing excellent work.

Eltham and Motttingham Cottage Hospital.—Donation, £25. Note: An institution deserving of support.

Free Home for the Dying, Clapham Common.—No grant. Note: The Committee are pleased to see that this useful institution is well supported.

French Hospital, 172, Shaftesbury Avenue, W.C.—Donation, £100.

German Hospital, Dalston Lane, N.E.—Donation, £150. Note: Towards new mortuary and post-mortem room.

Great Northern Central Hospital.—Annual grant, £750; donation, £1,000. Note: £750 annual to maintain beds reopened by this Fund, £250 for improvements now in hand.

Home and Infirmary for Sick Children, Sydenham Road, Lower Sydenham, S.E.—Donation, £25. Note: Towards cost of balcony.

Hospital for Consumption, Brompton, S.W.—Donation, £350. Note: Towards ward furniture.

Hospital for Diseases of the Throat, Golden Square, W.—Donation, £100. Note: The Committee would view with satisfaction an amalgamation of the Throat and Ear Hospitals.

Hospital for Women, Soho Square, W.—Donation, £1,100. Note: To maintain beds reopened by this Fund. The Committee draw attention to the desirability of removing this hospital to another site.

King's College Hospital, Portugal Street, Lincoln's Inn, W.C.—Annual grant, £1,000; donation, £3,500. Note: £2,500 to the Fund for removal of the hospital to South London, which the Committee view with great satisfaction.

London Throat Hospital, W.—Donation, £50. Note: The Committee would view with satisfaction an amalgamation of the Throat and Ear Hospitals.

Metropolitan Ear, Nose, and Throat Hospital.—No grant. Note: The Committee are unable to make a grant to this institution as a hospital, but would be prepared to consider a grant in the event of an amalgamation with the other Throat and Ear Hospitals.

National Hospital for Diseases of the Heart.—Donation, £15. Note: To complete cost of x-ray apparatus.

National Orthopaedic Hospital.—Donation, £400. Note: This grant is given pending the amalgamation with the Royal Orthopaedic Hospital, which the Committee view with great satisfaction, and for which a special sum is set aside.

North-West London Hospital.—Donation, £500. Note: The Committee again urge that immediate steps be taken to provide funds, not only to maintain but to rebuild this hospital.

Passmore Edwards' Acton Cottage Hospital, Gunnersbury Lane, Acton, W.—No grant. Note: The Committee are glad to say that it does not require help from the Fund this year.

Royal Ear Hospital, Frith Street, Soho Square, W.—Donation, £500. Note: To building. The Committee would view with satisfaction an amalgamation of the Throat and Ear Hospitals.

Royal Free Hospital, W.C.—Annual grant, £750; donation, £1,500. Note: The Committee are glad that the improvements previously referred to have been carried out.

Royal London Ophthalmic Hospital.—Annual grant, £2,000; donation, £2,000. Note: The Committee consider this hospital should receive more support from the public.

St. Barnabas Hospital, 9, Lloyd Street, W.C.—No grant. Note: This institution does not appear to come within the scope of the King's Fund, not being managed by a duly appointed Committee.

Salvation Army Maternity Hospital, Ivy House, 271, Mare Street, Hackney, N.E.—No grant. Note: The Committee cannot continue to support this institution in its present condition.

University College Hospital.—Annual grant, £1,000; donation, £2,000. Note: The Committee trust that this hospital will now be able to reopen the remaining 19 closed beds.

Victoria Hospital for Sick Children.—Donation, £1,400. Note: The Committee trust that the vacant wards will shortly be opened for free patients.

West End Hospital for Diseases of the Nervous System.—Donation, £125. Note: Towards balcony.

OPEN SPACES.—The Metropolitan Public Gardens Association has recently issued a report which contains an interesting record of the work done by it during the twenty-one years of its useful existence. In addition to promoting steps to secure large parks and other open ground in the suburbs and elsewhere, it has contributed largely towards the supply of trees and seats in public places; it has also constantly to be on the watch against attempts to absorb air spaces into building ground. The work which it has helped to do is of marked value from a hygienic point of view, and the possibilities of valuable work are by no means exhausted. Financially it would seem to be fairly well off, but since legal proceedings in defence of the public rights have occasionally to be taken the Association would be greatly strengthened by additions to its reserve fund. It transacts its business at 83, Lancaster Gate, W.