the Prince of Wales, Lord Derby, and Lord Beauchamp walked out without voting. The Archbishop of Canterbury and Lord Basing voted in the minority.

MISS AGNES MAITLAND has been elected by the council to the post of Principal of Somerville Hall, vacated by the resignation of Miss Shaw-Lefevre. Miss Maitland has resided hitherto in Liverpool, where she has taken an active part in several movements of an educational and a philanthropic character. She is well versed in the details of domestic management, and has shown a practical interest in the success of the Liverpool School of Cookery. She is also known as the author of several books, and is a lady of considerable intellectual attainments.

THE Daily Telegraph gives the following interest-ing account of Lady Dufferin's Fund :---"A branch has been organised in England of the fund established by the Marchioness of Dufferin for supplying female Medical aid to the women of India. Her Majesty the Queen is patron of the association in India, and of the United Kingdom branch the patron is Her Royal Highness the Princess of Wales, while the committee is an extremely influential one. The association owes its existence to the direct initiative of Her Majesty the Queen-Empress, who, in 1884, personally commended the matter to the Countess of Dufferin. After her arrival in India, Lady Dufferin lost no opportunity of studying the direction in which effective action could most readily be undertaken, the result being to convince her that if any material improvement was to be effected in the Medical treatment of native women throughout India, a large and sustained effort of an unsectarian and national character was imperatively called for. The response which her appeal elicited was at once encouraging and gratifying, showing that there was in all parts of India a deep-seated sense of the urgent need of such a movement, and a readiness to co-operate in any practical measures that it might be determined to set on foot. The foundation of the work lies in the assumption that, as a rule, Indian women will not see Medical men, that many of them would rather die than do so, and that the only way of bringing professional aid to them in sickness and suffering is to create a supply of *female* Doctors, and to establish Hospitals and Dispensaries for them, officered by women. The suffering of Indian women, due to the customs of the country and the ignorance of the existing class of native midwives, can better be imagined than described. The following extracts will convey some idea of the customs

doors of the zenana to the visits of qualified Medical men: '. . In a Mohammedan house the Physician cannot himself study the symptoms of the disease he has to treat; he cannot be permitted to behold the appearance of his patient, or even to feel her pulse; he has to depend almost entirely upon the information communicated to him by the stupid maid servant, whose language and ideas are generally anything but precise.' 'In Hindu houses, permission is always granted to feel the pulse, but in such cases the patient remains enveloped in a thick sheet or quilt, and only thrusts out her left hand as far as the wrist, and the Physician can know nothing of her appearance. The face is rarely exposed, and when it is, the eyes are kept firmly closed.'"

Few people know the dreadful cruelties perpetrated by the ordinary Dhais (native midwives) under the guise of professional aid, while those who suffer at their hands are too ignorant of any better treatment to resent their malpractices. There is no doubt whatever that the lives of thousands of women and of infants in India are yearly sacrificed, which in many cases might be saved by the supply of competent Medical advice and attendance. The National Association has been in existence nearly four years, and every day shows more clearly how great the need is of extending to the inmates of the zenana the benefits of modern medicine and surgery through female agency. The Association has been registered under Indian Act XXI. of 1860. Two circumstances at present retard the Medical relief work of the Association. The first is the want of funds for building and equipping Hospitals and Dispensaries; the second is the lack of Trained Female Doctors. In spite of both these hindrances, however, the progress is steady and marked. There are at present twelve female Hospitals and fifteen Dispensaries, most of which are officered by women. Every effort has been, and is being, made to supply female Doctors and Trained Nurses from Indian sources, but the local supply can never meet the demand for those highly trained ladies whose moral and physical qualities enable them alone to fill the superior positions in the large Hospitals and Training Schools of India. Two hundred girls were studying in the various Indian Medical Schools last autumn, and the number of Nurses under training throughout India was only limited by the amount of bedside practice available for their instruction.

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