

Annotation.

QUEEN ALEXANDRA'S COURT.

During and after the South African War the officers' branch of the Soldiers' and Sailors' Families' Association very gracefully and tactfully gave valuable assistance to ladies who had lost husband or father in the service of Sovereign and country, and Queen Alexandra took a keen interest in the movement. Presiding at a meeting on the eve of her Coronation, she announced that a gift of £10,000 from Mr. Lucas Tooth would be devoted by her to the extension of the homes connected with the officers' branch, which was then supporting in Elm Park Gardens twelve ladies. Later on her Majesty gave a further £5,000 from funds entrusted to her for the relief of sufferers through the war, and more money was provided from the Lord Mayor's discretionary fund. On Saturday, Queen Alexandra afforded further proof of her sympathy with the movement by visiting and formally opening the new homes, situated near Wimbledon Station, and henceforward to be called Queen Alexandra's Court.

At this opening ceremony, the Queen gave a further £3,000, half the legacy left to her by Mr. Charles Lear, of Liverpool.

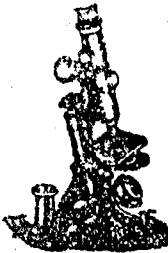
The buildings of Queen Alexandra's Court are beautiful—the exterior forming three sides of a quadrangle—and have cost £60,000. The grounds are extensive, and charmingly laid out in lawns, terraces, walks, and drives. The apartments, which are self-contained, each consist of an entrance hall, sitting-room, two bedrooms, kitchen, and offices; they are free of rent, rates, taxes, and water, the residents supplying their own furniture and paying only for the gas and electric light consumed. Each resident is allowed to have two relatives to live with her. The age at election must be between fifty and eighty, and the residents must have an assured income of not less than £40 nor more than £100 a year. The following is the present "state" of the lady residents elected:—Eighteen from the Royal Navy and Marines, and forty-two from the Army, consisting of thirty-three widows and twenty-seven daughters.

What a haven of rest for poor gentlewomen who have lost their nearest and dearest in the support of the Empire.

We knew at one time the widow of a distinguished officer who fought through the Crimean War and Indian Mutiny—who lived on five shillings a week!

Medical Matters.

THE ANTI-CANCER SERUM IN PARIS.



The report of the committee of experts appointed to investigate Dr. Doyen's anti-cancer serum was presented to the Surgical Society on the 12th inst. The result of the examination, which has lasted five months, is distinctly unfavourable. The committee came to the conclusion that although the serum might have caused a temporary improvement or reduced cancerous tumours so as to make subsequent operation less dangerous, it did not constitute a cure. In twenty cases out of the twenty-six under examination the patients became worse instead of better. The report concluded by expressing the opinion that Dr. Doyen, like other inventors, had mistaken his desires for facts.

EYE-STRAIN AND REFLEX DISTURBANCES.

It is not individuals with imperfect sight that suffer with headaches, vertigo, confusion of ideas, nausea, and many allied symptoms as well as functional disturbances of remote organs, as the result of eye-strain, says Dr. Payson Morrow (*Cleveland Med. Jour.*). They do not strain their eyes in the sense in which eye-strain sets up its train of symptoms. Excluding diseases of the eyes, imperfect sight is usually due to myopia, near-sightedness, and individuals with myopia do not have eye-strain.

The accommodation in myopia is not called into action. If it is not myopia, it is one of the high grades of hypermetropia, far-sightedness, or astigmatism, defective formation, that is producing imperfect sight, an error so great that the accommodation makes no effort to maintain a correction; hence there is no eye-strain, except in rare instances. The field then in which we find our sufferers is in that class of individuals who have low grades of hypermetropia and astigmatism, those who can and do maintain constant accommodative control of their error and therefore have normal vision. This rule holds good as well for muscle insufficiencies. Any insufficiency so great that the muscles refuse a constant tonic correction seldom, if ever, produces reflex disturbances. One can readily see that if these are facts, in order to say how much the eye has to do with reflex disturbances complained of, the testimony of the patient regarding sight is of absolutely no value whatever in arriving at the cause.

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