and gave way. Men were obliged to work and take exercise, and so could keep in better health. But if they had to send their wives and relatives home, to maintain two houses at double expense, and had other worries and anxieties, they, too, might have nervous breakdowns, which were not fairly attributable to the tropical climate.

Men could manage to live almost as healthy a life as at home, and women must find interests for themselves, as unless the enervating influence were resisted they could not keep in good health.

The lecturer pointed out that tropical countries are not usually wealthy, and cannot spend the same amount on investigating the causes of disease as the Mother Country. If these were to be accurately discovered then more money must be spent on them than at present. He showed that the most common cause of convulsions and death in children in the tropics was the malarial parasite in the brain. The mortality in children in India was very great, and convulsions, even by medical men, were attributed to worms, indigestion, etc. The only hope when due, as most frequently, to malaria, was prompt treatment at the very first onset. Other tropical diseases described were ankylostoma and trypanosoma.

Dr. Woods Hutchinson, in a brilliant little speech, said it was always a great pleasure to address a popular audience. He welcomed the help of the better half of the community in the war on disease, and said that when forces at present locked up came to be liberated by civic and other means it was impossible to say what advances might be made.

It was essentially true in the case of malaria that a man's foes are they of his own household. After all, the mosquito was more sinned against than sinning, for until it was infected by man it could not convey the disease. Now this was recognised, and we screened infected patients in order to protect the mosquito.

The yellow fever mosquito was also a domestic animal, and the common house fly, which was a domestic pet, was an enormous carrier of disease. If we warred successfully against insects we should rid ourselves of serious infections.

Captain Craufurd Kennedy showed how Malta fever had been stamped out by the prohibition of infected goats' milk. At the Afternoon Session, when Sir William

At the Afternoon Session, when Sir William H. Bennett, K.C.V.O., F.R.C.P., presided, Dr. Kirkby Gomes spoke on "The Moral and Civic Training of the Oriental Child," and Miss Agnes Deans Cameron gave an interesting address, illustrated by lantern slides, on "Openair Life in Canada," while "Folk Dance in Connection with the Open-air Life" was the subject of Miss Mary Neal's paper.

JULY 7TH.

On the morning of the second day Muriel, Viscountess Helmsley, President of the Women's Imperial Health Association, presided, and said that in regard to maternity there was a great work to be done in regard to the dissemination of knowledge by laywomen, in teaching factory workers, laundry workers, and others unable to attend lectures.

WORK BY WOMEN FOR THE RELIEF OF DISEASE IN INDIA.

Lady Helmsley then read a short memorandum on "The work being accomplished by women for the relief of disease in India," contributed by Surgeon-Lieut.-Colonel Sir Warren Crooke-Lawless, M.D., C.I.E., late Surgeon to His Excellency the Viceroy.

Colonel Crooke - Lawless enumerated the organisations in India working solely for the relief of women as follows:---

(1) The National Association for Supplying Medical Aid to the Women of India (the Countess of Dufferin's Fund).

(2) The Victoria Memorial Scholarship Fund. Also amongst organisations working for both men and women—the St. John Ambulance Association, Lady Minto's Nursing Association, and the Lady Ampthill Nursing Institute.

The work of the Countess of Dufferin's Fund, founded in 1885, has yearly increased. Before its institution native women were mainly dependent on the "Dai," or native midwife, whose methods were entirely insanitary, not to say barbarous. The fund aimed at providing skilled medical women from our English schools to attend the Indian women in their own homes, to establish a system of scholarships to help Indian ladies to become duly qualified medical practitioners in Indian medical schools, and, in specially selected cases, to afford them an opportunity of completing their education in British schools. Sufficient funds were soon forthcoming to build and equip hospitals, and officer them with medical women.

The native Princes followed the example thus set, and now, in almost every native State well equipped and endowed hospitals, under female supervision, were doing a grand work with the cordial support and sympathy of the ruling chiefs.

The name of Lady Dufferin, the writer of the paper continued, will ever be revered in India for starting and establishing this splendid scheme, and it must be a source of sincere



