4.—Power to add a number of years not exceeding ten in certain cases for peculiar professional qualifications or special circumstances. Sec. 5.

5.—Power to grant gratuities in certain cases. Sec. 8.

6.—Power of appeal to Local Government Board to decide questions as to the right to or the amount of superannuation allowance. Sec. 18.

7.—"Emoluments," including the money value of any apartments, rations, or other allowances, to be reckoned in calculating pension. This is compulsory as part of the superannuation and not permissive or discretionary.

The scale is one-sixtieth for every year of service, the maximum of two-thirds not being attainable till after forty years' service; and there is an annual contribution to the Pension Fund of 2, 2½, and 3 per cent. according to the length of service. Sec. 13.

From the asylum point of view of course this could not be considered liberal or satisfactory, as asylum officials devote their *whole time* to the service; but from the Poor Law Officers' point of view, it may be considered fairly good as ensuring a *certainty*, for the Act applies to Poor Law Officers who are not required to and who do not devote their whole time to Poor Law service (*e.g.* Medical Officers), and whose work is much less arduous and risky than the Asylum service.

NOTICES BY THE REGISTRAR

EXAMINATION FOR THE CERTIFICATE IN PSYCHOLOGICAL MEDICINE.

The following candidates were successful at the examination held on the 16th July, 1896:—

ENGLAND.

Examined at Bethlem Hospital, London.—Edward John Cross, Anthony Alexander Martin.

SCOTLAND.

Examined at the Royal Asylum, Edinburgh.—John Clarke Nixon, William Hector Mackenzie, Sreenagula Mallannah, Ian Lamont MacInnes, Harold Sherman Ballantyne.

Examined at the Royal Asylum, Aberdeen.—William Ainslie, Robert H. Clarke, William Deane Manson Donald, William Marshall Philip, Thomas Snowball, George Felix Thompson.

The following were the written questions:—

1.—Give the predisposing causes, symptoms, prognosis and treatment of Puerperal Mania. 2.—Describe briefly Primary Dementia, giving its course and prognosis. How does it resemble and differ from Melancholia with Stupor, and from Secondary Dementia? 3.—In what cases are hallucinations of sight and hearing most frequently met with? To what extent would they influence your treatment and prognosis of a case, and what precautions would you deem necessary in such cases? 4.—An act of outrage has been committed by a man known to have suffered from Epileptic "Fits": what circumstances would go to prove that the perpetrator was an irresponsible agent? 5.—Describe a case of Acute Delirious Mania, and state how you would distinguish it from a case of delirium tremens. 6.—State your views as to the causes of change in pupils observed in General Paralysis of the Insane.

The next examination will be held in December, 1896. Due notice of the date will be given in the *Lancet* and the *British Medical Journal*.

WINNER OF THE GASKELL PRIZE

William Richard Dawson, M.D.

The following were the written questions:—

1.—Give in detail the pathological changes found microscopically in the Cerebral Convolutions and Meninges in General Paralysis of the Insane. 2.—What are the mental symptoms which occur in Myxœdema? How do you explain them? What is the cerebral pathology of this disease? 3.—Define

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