

the cases of small-pox to the Fever Hospital. It would, we think, be unwise to raise additional buildings at all, and especially for a disease of such fluctuating numbers as small-pox; and the public, looking at the matter in a practical light, will surely not object that in such exceptional cases admission to the Infirmary is denied, while the treatment is carried out as effectually elsewhere.

## ASSOCIATION INTELLIGENCE.

### METROPOLITAN COUNTIES BRANCH.

AN Ordinary Meeting of this Branch will be held at the rooms of the Medical Society of London, 32A, George Street, Hanover Square, on Wednesday, January 31st, at 8 P.M., when a paper will be read by ERNEST HART, Esq., on Recent Lessons for Sanitary Legislators.

A. P. STEWART, M.D.

ALEXANDER HENRY, M.D. } *Honorary Secretaries.*

London, January 17th, 1872.

### BIRMINGHAM AND MIDLAND COUNTIES BRANCH: PATHOLOGICAL AND CLINICAL SECTION.

THE next meeting of the Section will be held on Friday, January 26th, at the Midland Institute, Birmingham. The Chair will be taken at 3 P.M. precisely.

BALTHAZAR W. FOSTER, M.D., } *Honorary Secretaries.*

T. VINCENT JACKSON,

Birmingham, January 15th, 1871.

## REPORTS OF SOCIETIES.

### ROYAL MEDICAL AND CHIRURGICAL SOCIETY.

TUESDAY, JANUARY 9TH, 1872.

T. B. CURLING, Esq., F.R.S., President, in the Chair.

COMPLETE RECOVERY AFTER REMOVAL OF THE BODY OF A CERVICAL VERTEBRA. BY WILLIAM OGLE, M.D.

IN this paper a case was narrated, of which the following were the chief points. A man, after suffering for some months from sore throat, became an out-patient at St. George's Hospital. It was found on examination that some bone was exposed at the back of the pharynx; but the patient suffered so little inconvenience from this, that he could not be persuaded to become an in-patient. The man got into the habit of moving the exposed bone with his fingers, and at last loosened and removed it himself. On maceration, the piece thus removed was found to consist of the body of one of the cervical vertebræ and a small portion of the body of a second one. After remaining for some months as an out-patient, the man was persuaded to enter the hospital. He was placed on his back, and his head fixed; and remained in this position six months. During this time he expectorated numerous spicules of bone, and what appeared to be portions of fibro-cartilage. The lesion eventually healed completely; and the man at the present time—two years since the lesion—is able to occupy himself with the heaviest farm-labour, and to amuse himself with field sports. There is no visible deformity of the neck, nor any other sign of what has occurred except a slight stiffness in rotating the head. The piece of bone was exhibited.

MR. HENRY LEE said that the question whether or not the disease was of syphilitic origin was of great importance. In most cases caries of round or flat bones was strumous, and the disease was primarily seated in the bone; syphilis generally first attacked the periosteum. If the vertebræ in the case described had been destroyed by strumous disease, there would have been no repair; but syphilitic disease would probably lead to the deposit of new bone from the periosteum, which would act as a support.—MR. BRODHURST did not think that Mr. Lee's view explained the case. He had seen the patient, and had passed his finger into the space left by the removal of the bone; there was no trace of reproduction. It was remarkable that there was no deformity at the posterior part of the neck, such as one would expect. He thought that further inquiry into the history of the case might show that there had been injury of the part at some time; and that it would be interesting to know whether the patient's neck remained in the same state as when he left the hospital.—MR. BRYANT did not know whether it was necessary to have recourse to syphilis in order to explain the case. Exfoliation of the vertebræ and repair sometimes occurred without syphilis. He had met with two cases of necrosis of cervical vertebræ, followed by re-

covery, with little thickening. This took place in other parts of the vertebral column, and might be fairly expected to occur in the neck.—MR. SAVORY said that there were other causes of caries besides syphilis and struma. There was no evidence of destruction of the entire vertebræ in the case described.

### ESCAPE OF A TRACHEOTOMY-TUBE INTO THE TRACHEA: REMOVAL BY A SECOND OPERATION.

BY JOHN W. OGLE, M.D., F.R.C.P., AND HENRY LEE, F.R.C.S.

THE patient, a man aged 32, had typhus fever in 1865. He recovered, but never afterwards felt thoroughly well, and about a year subsequently had laryngitis and bronchitis. Tracheotomy was performed, and the patient continued to wear the tracheotomy-tube for three years, when the shield became detached. It was improperly reunited to the cannula, and in another year's time it was again detached, and on this occasion the cannula slipped into the trachea. A few weeks after this the patient was placed under Dr. OGLE's care in St. George's Hospital, suffering from great dyspnoea, and having the sensation as if the tube were situated on a level with the upper part of the sternum. Auscultation failed to help in deciding the position of the tube, and the patient refused to have chloroform administered with the view of search being made for it. He then left the hospital (September, 1870), and continued to go about, suffering from dyspnoea and irritation about the windpipe, until his symptoms became more urgent, and he was obliged to come to the hospital again on November 5th, 1871. He said "he had coughed the tube up into the throat, and could feel it there." The patient was at once placed under the influence of chloroform; and as he lay upon his back tracheotomy was a second time performed, and two eroded portions of metal were taken by means of curved forceps from the trachea. The pieces were almost the length of a tracheotomy-tube, and gave origin to the idea that the original tube had been bivalved. This, however, upon inquiry, turned out not to have been the case. The pieces of metal had been eroded into their present shape while in the trachea. The pieces were shown to the Society.—A second case, which some years ago had occurred under the observation of Mr. LEE, was related. In this instance a boy had swallowed a four-penny-piece. This was expelled without operation through the glottis during a fit of vomiting. In the observations made, attention was drawn to the different modes of treatment likely to be required in cases of smooth or round bodies in the trachea, as in the last-mentioned case, and cases in which pointed or rough bodies had to be removed, as in the instance first recorded.

MR. H. POWER referred to a case of an Irish labourer who swallowed a stone. Tracheotomy was proposed, but was objected to. The patient was placed on his stomach, and directed to take a full breath and make a forcible expiration: a smart slap on the back was given at the same time, and the stone was expelled.—MR. J. COUPER had seen a similar case at the London Hospital. The foreign body lay so far up that it could be felt. Tracheotomy was performed; but the patient, being a child, could not expel the body through the opening. By compressing the trachea, the foreign body (a bean) was brought to the edge of the wound, when a knife was plunged into it and it was removed. The child died of pneumonia.—MR. HOLTHOUSE thought that it was generally the safer plan to perform tracheotomy in cases of foreign bodies in the air-tubes. A round body, however, might escape through the glottis. He had seen a case in which a trachea-tube had broken off and passed into the air-passage. The opening in the trachea was very small; it was, therefore, enlarged downwards, by first cutting through the skin with a knife, and dividing the trachea (the rings of which were very hard) by means of scissors. By means of a bullet-probe, the tube was found lying above the left bronchus. A forceps was passed in, but excited spasmodic cough. The patient was then placed in the prone position, the lower part of his body was raised, and a tap on the back brought the foreign body to the aperture, through which it was removed by dressing-forceps.—MR. T. SMITH said that acidulated drops sometimes passed into the trachea in children. Articles of this kind would be dissolved. He had seen foreign bodies of various kinds blown out through the opening in the trachea. In a case which had come within his knowledge, a surgeon, on opening the trachea, found a hook of a woman's dress fastened on one of the vocal chords.—MR. CHARLES HAWKINS referred to the case of Mr. Brunel, which had been under the personal notice of Sir B. Brodie and himself. There was severe spasm: an opening was made, but an attempt to remove the coin by forceps brought on violent spasm. The patient was then turned on his stomach, and a slap on the back caused the foreign body to be at once expelled.—DR. O'CONNOR had seen the ferule of a parasol expelled from the trachea of a child.—MR. HENRY LEE said that, in making the *post mortem* examination of Mr. Brunel many years after his accident, he had found the rings of the trachea united by cartilage.—THE PRÆ-

## MEDICAL NEWS.

### LECTURES AT THE COLLEGE OF PHYSICIANS.

THE following are the lecture arrangements at the College for the present season. The lectures will be delivered on Wednesdays and Fridays; the Gulstonian, by Dr. Hensley, on the Mechanism of Respiration, Circulation, and Digestion, on Feb. 23, 28, and March 1; the Croonian, by Dr. Bristowe, on Disease and its Remedial Treatment, on March 6, 8, and 13; and Lumleian Lectures on Diseases of the Muscular Walls of the Heart, by Dr. Quain, F.R.S., on March 15, 20, and 22.

**APOTHECARIES' HALL.**—The following gentlemen passed their examination in the science and practice of medicine, and received certificates to practise, on Thursday, January 11th, 1872.

Salmon, Alfred Lidgey, Truro, Cornwall  
Sylvester, Kirwan Francis, Trowbridge, Wilts

As an Assistant in compounding and dispensing medicines.  
Houghton, Robert William, Waite Street, Old Kent Road

### MEDICAL VACANCIES.

THE following vacancies are announced:—

**BEVERLEY UNION**, Yorkshire—Medical Officer for District No. 5.  
**BLACKBURN AND EAST LANCASHIRE INFIRMARY**—House-Surgeon: £90 first year, £100 afterwards, board and lodging.  
**CALNE UNION**, Wilts—Medical Officer and Public Vaccinator for the entire Union: £200 per annum, and Vaccination Fees.  
**CANCER HOSPITAL**, Brompton—Resident House-Surgeon: £52:10 per annum, board and residence.  
**CHARING CROSS HOSPITAL**—Physician for the Treatment of Diseases of the Skin; Assistant-Physician.  
**CHELSEA**, Parish of—Medical Officer and Public Vaccinator for the North-Western District: £80 per annum.  
**CHESTER GENERAL INFIRMARY**—Visiting Surgeon: £80 per annum, board, apartments, and washing.  
**CHRISTCHURCH UNION**—Medical Officer and Public Vaccinator for the Eastern District: £70 per annum, and extra fees.  
**COOTEHILL UNION**, co. Cavan—Medical Officer, Public Vaccinator, and Registrar of Births, etc., for the Drum Dispensary District: £85 per ann., and fees.  
**DRIFFIELD UNION**, Yorkshire—Medical Officer for the Middleton District.  
**EAST SUSSEX, HASTINGS, and ST. LEONARD'S INFIRMARY**—Assistant-Surgeon.  
**ENNISCORTHY DISTRICT LUNATIC ASYLUM**—Visiting and Consulting Physician.  
**ENNISCORTHY UNION**, co. Wexford—Medical Officer for the Enniscorthy Dispensary District.  
**LISMORE UNION**, co. Waterford—Medical Officer, Public Vaccinator, and Registrar of Births, etc., for the Ballyduff Dispensary District: £100 per annum, and fees.  
**LIVERPOOL DISPENSARIES**—Honorary Medical Officer, North Dispensary.  
**MANCHESTER WORKHOUSE INFIRMARY**—Resident Medical Officer.  
**MIDDLESEX HOSPITAL**—Assistant-Physician.  
**MILE END OLD TOWN**—Medical Officer for the Western District: £250 per annum.  
**MULLINGAR UNION**, co. Westmeath—Medical Officer, Public Vaccinator, and Registrar of Births, etc., for the Multyfarnham Dispensary District: £100 per annum, and fees.  
**NAAS UNION**, co. Kildare—Medical Officer, Public Vaccinator, and Registrar of Births, etc., for the Kilcullen Dispensary District: £100 per ann., and fees.  
**NEWPORT (Monmouthshire) INFIRMARY AND DISPENSARY**—Out-door Dispenser.  
**NORTH MAVINE and DELTING**, Shetland—Parochial Medical Officer.  
**NORTH WALES COUNTIES LUNATIC ASYLUM**, Denbigh—Assistant Medical Officer.  
**NORWICH UNION**—Medical Officer and Public Vaccinator for District No. 3: £75 per annum, and extra fees.  
**PAISLEY INFIRMARY**—House-Surgeon.  
**POCKLINGTON UNION**, Yorkshire—Medical Officer for the Pocklington No. 2 District: £40 per annum, and extra fees.  
**QUEEN'S UNIVERSITY**, Ireland—Professor of Chemistry, Queen's College, Cork.  
**ROYAL FREE HOSPITAL**—Senior House-Surgeon: £104 per annum, board and residence.  
**ROYAL UNITED HOSPITAL**, Bath—Resident Medical Officer: £100 per annum, board and lodging.  
**ST. GEORGE DISPENSARY**, Mount Street, Grosvenor Square—Physician-Accoucheur.  
**ST. MARYLEBONE GENERAL DISPENSARY**, Welbeck Street—Surgeon.  
**STOCKWELL SMALL-POX HOSPITAL**—Assistant Medical Officer and Dispenser: £13 per month.  
**SUNDERLAND INFIRMARY**—Junior House-Surgeon: £60 per annum, board, lodging, and washing.  
**WEST HAM, STRATFORD, and SOUTH ESSEX DISPENSARY**—House-Surgeon: £100 per annum, furnished apartments, coal, gas, and attendance.  
**WESTMINSTER GENERAL DISPENSARY**—Surgeon.  
**WINCHESTER UNION**—Medical Officer for the Mitcheldever District.

### MEDICAL APPOINTMENTS.

Names marked with an asterisk are those of Members of the Association.

\*MOORE, J. W., M.D., appointed Temporary Physician to the Fever Hospital and House of Recovery, Cork Street, Dublin.

\*ROBERTS, John D., Esq., appointed Surgeon for the Black Friars District of the Royal South London Dispensary, *vice* H. J. Thorp, Esq., resigned.

### OPERATION DAYS AT THE HOSPITALS.

**MONDAY** .....Metropolitan Free, 2 P.M.—St. Mark's, 1.30 P.M.—Royal London Ophthalmic, 11 A.M.—Royal Westminster Ophthalmic, 1.30 P.M.  
**TUESDAY** .....Guy's, 1.30 P.M.—Westminster, 2 P.M.—National Orthopaedic, 2 P.M.—Royal London Ophthalmic, 11 A.M.—Royal Free, 2 P.M.—Royal Westminster Ophthalmic, 1.30 P.M.  
**WEDNESDAY**..St. Bartholomew's, 1.30 P.M.—St. Mary's, 1.30 P.M.—Middlesex, 1 P.M.—University College, 2 P.M.—St. Thomas's, 1.30 P.M.—London, 2 P.M.—Royal London Ophthalmic, 11 A.M.—Great Northern, 2 P.M.—Samaritan Free Hospital for Women and Children, 2.30 P.M.—Cancer Hospital, Brompton, 3 P.M.—King's College, 2 P.M.—Royal Westminster Ophthalmic, 1.30 P.M.  
**THURSDAY**....St. George's, 1 P.M.—Central London Ophthalmic, 1 P.M.—Royal Orthopaedic, 2 P.M.—Royal London Ophthalmic, 11 A.M.—Hospital for Diseases of the Throat, 2 P.M.—Royal Westminster Ophthalmic, 1.30 P.M.  
**FRIDAY**.....Royal Westminster Ophthalmic, 1.30 P.M.—Royal London Ophthalmic, 11 A.M.—Central London Ophthalmic, 2 P.M.—Royal South London Ophthalmic Hospital, 2 P.M.  
**SATURDAY**....St. Bartholomew's, 1.30 P.M.—King's College, 1.30 P.M.—Charing Cross, 2 P.M.—Lock (Clinical Demonstrations and Operations), 1 P.M.—Royal London Ophthalmic, 11 A.M.—Royal Free, 2 P.M.—East London Hospital for Children, 2 P.M.—Hospital for Women, 9.30 A.M.—Royal Westminster Ophthalmic, 1.30 P.M.—St. Thomas's, 9.30 A.M.

### MEETINGS OF SOCIETIES DURING THE NEXT WEEK.

**MONDAY**.—Medical Society of London, 8 P.M. Second Lettsomian Lecture, by Dr. Habershon: "The Liver and its Blood-vessels."—Social Science Association, 8 P.M. Mr. G. W. Hastings, "On the Report of the Royal Sanitary Commission."  
**TUESDAY**.—Royal Medical and Chirurgical Society, 8.30 P.M. Dr. Rutherford, "On the Excitability of Different Parts of the Trunk of a Spinal Nerve"; Dr. C. A. Gordon, "On Forms of Surgical Returns and Reports to be used in War."  
**WEDNESDAY**.—Hunterian Society, 7 P.M.: Council Meeting, 8 P.M.: Dr. Morell Mackenzie, "On the Differential Treatment of Bronchocele."  
**FRIDAY**.—Clinical Society of London, 8.30 P.M. Mr. Cooper Forster, "On a Case of Popliteal Aneurism, with remarks on Treatment"; Mr. Hulke, "On the Therapeutic Value of Condurango as a reputed Remedy for Cancer"; Mr. T. Bryant, "On Two Cases of Recto-vesical Fistula treated by Colotomy."

### NOTICES TO CORRESPONDENTS.

ALL Letters and Communications for the JOURNAL, to be addressed to the EDITOR 37, Great Queen Street, Lincoln's Inn Fields, W.C.

CORRESPONDENTS not answered, are requested to look to the Notices to Correspondents of the following week.

TO PURCHASERS.—To insure attention, it is requested that all orders sent to the Office for extra copies of the JOURNAL, be accompanied with halfpenny stamps for the amount.

WE CANNOT UNDERTAKE TO RETURN MANUSCRIPTS NOT USED.

FOR replies to questions concerning Poor-law medical questions, see Poor law Medical Department, under charge of Mr. Benson Baker, London, and Dr. Maunsell, Dublin.

CORRESPONDENTS, who wish notice to be taken of their communications, should authenticate them with their names—of course, not necessarily for publication.

MR. SCATCHARD (Tadcaster).—At the office of the General Medical Council, 32, Soho Square, London, W.

DR. CURRIE RITCHIE (Manchester).—At the hour of going to press, the MS. had not arrived.

J. D.—The mistake is, we believe, an advertence for which Mr. Reeves is not responsible. We are not aware on what authority Dr. Marsden appeared in the Register and Directory as a Fellow of the London College.

DR. STRATTON will see that our attention has been drawn to the subject.

A PUPIL.—The result of the recent preliminary examination for Fellowship and Membership of the College of Surgeons has been sent to all the candidates whose addresses are known.

#### A NEWSPAPER PARAGRAPH.

SIR,—I totally repudiate any knowledge of a paragraph titled "Gratitude to Dr. Dunderdale", that appears in to-day's Warrington Examiner. It is simply disgracefully unprofessional, and I have called upon each medical man here to repudiate any knowledge or connexion with this paragraph. I have written to the editor of the paper, to the Honorary Secretary of the Institution, and to the Honorary Secretary of the Medical Committee. I knew nothing of its insertion, and totally repudiate it. I am, etc., W. DUNDERDALE.

Dispensary, Warrington, January 13th, 1872.

\* \* This is the right course of conduct under the circumstances.

RAHERE (Sheffield).—Herodotus tells us that the Babylonians and Chaldeans had no physicians; and in cases of sickness the patient was carried out and exposed on the highway, that any persons passing by, who had been affected in a similar manner, might give some information regarding the means that had afforded them relief.

**NOTICES of Births, Marriages, Deaths, and Appointments, intended for insertion in the JOURNAL, should arrive at the Office not later than 10 A.M. on Thursday.**

**T. S.**—The course of the *Lancet*, in propounding, editorially, statements as to its own circulation which are contrary to fact, and in accepting in silence the absolute denial with which we have met its statements, while it shuns the plain and usual test which we have offered to it, carries its own condemnation. It is a tacit avowal which is professionally discreditable, and will, no doubt, bring its own punishment. The correspondence of Mr. Christopher Heath with our publisher was referred to a Subcommittee of Council. We have not inquired who constitute the Committee; nor have we heard to what decision they have come, or whether they have yet been able to hold a meeting.

OUR New Year's correspondence has brought very many kindly expressed and warmly worded congratulations on the satisfactory conduct of the JOURNAL during the year, and the high position of usefulness and esteem to which it has attained. We need not say that these communications have afforded us sincere pleasure; and, if we have omitted to respond individually to these letters, we trust it will be ascribed to the great recent pressure of correspondence and other pressing occupations. We beg our correspondents to receive our warm thanks, and have especially to thank Mr. Ceely of Aylesbury, Dr. Bradbury of Cambridge, Dr. Stanley Haynes, Dr. Steele of Liverpool, and Mr. Osman Vincent, for the tenor of their communications. The great increase in the constituency of the JOURNAL, the bulk of correspondence, the multiform character of the subjects to be discussed, and many other circumstances, have made the conduct of the JOURNAL increasingly onerous of late, and these appreciative expressions are among the most agreeable rewards of the labour involved.

#### THE MEDICAL DIRECTORY AND FOREIGN DEGREES.

We have before us a correspondence between Mr. Thomas Cooke and the Editors of the *Medical Directory*, on the subject of the insertion or omission of foreign degrees. Mr. Cooke states that he was informed by the Editors that no foreign degrees would be inserted in the *Directory*—no mention being made of any distinction between those obtained previously to 1858, which by a decision of the Medical Council prior to that date became registrable, and those obtained subsequently to 1858, which are not now allowed to be registered. Hence he is surprised at finding other foreign degrees registered, while his diploma of M.D. Paris is not. Appreciating the honourable desire of the editors not to encourage the sale of worthless diplomas, Mr. Cooke considers that they ought to follow one and the same rule—of admission or of rejection—towards all foreign qualifications; and that, in preparing the *Directory*, they have nothing to do with "private" lists (as he may call them), such as the *Medical Register*, or the lists prepared by the Society of Apothecaries and the Royal College of Surgeons. He suggests that the ends of the Editors of the *Directory* might have been met by stating in a few introductory pages the requirements of the various foreign universities, and the examinations to be passed by those intending to graduate.

In reply to Mr. Cooke, the Editors of the *Medical Directory* state that the information given to him at the office was a general statement applicable to his particular case; and that if he had made further inquiry, he would have learned that all registered qualifications, English and foreign, would appear in the *Directory*. They are bound to recognise as legal qualifications all those which the Medical Council has registered; and, as long as the Medical Act remains unamended, they must regard all foreign degrees obtained since 1858 as giving no legal status in this country. They assert that they have acted impartially, excluding those degrees only which could not be registered. The statement that the *Medical Register* is a *private* list is, they observe, one with which they cannot agree; it is published by authority under Act of Parliament. Mr. Cooke's suggestion regarding the publication of the regulations of the foreign universities would, they think, be impracticable, as it would be necessary in justice to give the regulations of all.

#### MEDICAL LOGIC.

MR. JAMES SHAW, of Salisbury, has discovered that the particles of "dust" floating in the air, which Professor Tyndall described as disease-germs, are much maligned: "They are the Reflecting Media of the Atmosphere and a Natural Law." He is satisfied they are transparent as well as reflecting; because, when we look at any object in a room during daylight, we see it distinctly. He has conducted a number of beautiful experiments with a hot poker, which make the demonstration complete. He believes this "revelation" will be accepted with thanksgiving, joy, and gladness. From it, however, he passes to another, yet more important, that of a treatment of small-pox, scarlet fever, and measles, which "immediately checks the disease, leads to a speedy cure, and prevents fatality," as the title-page of his pamphlet informs us. All this is effected by a warm bath, in which the patient is to be immersed for a quarter of an hour daily until the eruption has appeared and subsided. If there be no bath in the house, the patient must sit in the hot water, which, however, does not answer so well. He is disposed to think (from observing some persons who took warm baths, and did not catch the small-pox) that warm baths might replace revaccination. It may afford matter for reflection, that this gentleman writes L.R.C.P. after his name, and must therefore be supposed to have received an education which includes the elements of physics, and implies a rudimentary development of reasoning power.

SIR.—The following book has been brought under my notice, and I have communicated the particulars to the Secretary of the South Wales Branch of our Association:—"Health and Disease in England and Wales, by Dr. John Lewis Prichard, M.D., Dr. of Med., etc., 65, High Street, Merthyr Tydfil, Glamorganshire, 1872. Price One Shilling. 60 pages." Its chief contents are letters from patients cured by him, arranged under the heads of the several diseases.

The following remarks by the author appear on nearly every page. "I have cured hundreds of this disease. 'I have cured many in a week.' 'I have never failed to cure them.' And so on after each disease.

"Consultations.—Dr. J. L. P. may be consulted at home every week-day; Sundays (morning only). 65, High Street, etc.

"The greater number of patients need not make more than one visit to me to be cured. Patients under my treatment and advice can follow their employment as usual. Dr. P.'s treatment is recommended as a cure for the uncured. Persons who have failed to have a cure by other treatments, are advised to come or send, without delay, to Dr. P., because he has cured thousands of people, and is curing people daily, after every other treatment had failed. Persons come hundreds of miles to me to be cured by my treatment." And much more in the same way. This name is on the *Register*.—J. E. S.

**NOTICE TO ADVERTISERS.**—Advertisements should be forwarded direct to the Printing-Office, 37, Great Queen Street, W.C., addressed to Mr. F. H. HEATHCOTE, not later than *Thursday*, twelve o'clock.

#### SUBCUTANEOUS INJECTIONS IN MIDWIFERY.

SIR.—Having only just commenced my fourth winter session at Guy's Hospital, I address you on professional subjects with great diffidence; but lately I have been engaged with midwifery, and have been surprised, in reading the standard works on the subject, to find that subcutaneous injections are not occasionally mentioned as likely to be of great use in treating some of the diseased actions that often occur during the process of parturition. In many other diseases, I see this mode of treatment carried out with the most beneficial results. The relief produced is almost instantaneous; and in no branch of the profession do we so often require remedies of rapid action as in midwifery. There is only the slight prick of the instrument; and what is that momentary pain in comparison with the agonies suffered in many of the distressing symptoms of labour that too frequently appear.

The intense pain of an uterus in continuous action, where fears are entertained of rupture of the organ on the death of the child, might be relieved; the rigid os uteri of the primipara be easily induced to relax; puerperal mania and convulsions be moderated; the laceration of the perineum prevented where uterine action is vigorous and time is required for its relaxation, by subcutaneous injections of morphia or antimony.

Chloroform would be equally efficacious, no doubt; but you require a second person to administer it; and in country practice this is often not possible. Many patients cannot be induced to take it; its action is not immediate; some medical men are afraid to give it; its after-effects might be injurious in some cases; there may be heart or lung disease contraindicating it; the expense might be a consideration; and you cannot regulate the dose so exactly as with subcutaneous injections. Again, in many cases the stomach is so irritable that pills and draughts containing opium cannot be retained. If you inject quinine to cut short or prevent an ague-fit, why not give a young mother as ready a means of easing some of the miseries of her first labour of three or four days' duration, or probably of obviating some of the most dangerous symptoms?

I am, etc., NEMO.

Guy's Hospital.

#### HYSTERIA AND ITS MISINTERPRETERS.

SIR.—Allow me to say that Dr. Tilt does not rightly understand my views of hysteria if he considers the disease to be "a form of insanity independent of ovario-uterine irritation" (*BRITISH MEDICAL JOURNAL*, page 690). The common acceptance of the word insanity does not correctly represent the condition of neurosis, or loss of nerve-power, both physical and moral, which in my opinion constitutes the disease of which we meet with many and varied manifestations. No extended knowledge or investigation of ovarian or uterine disease can ever make out either of these to be the cause of the condition miscalled hysteria; they are not cause and effect. For instance: a member of the Association told me at Plymouth that, since a severe accident some years ago, he himself had been liable to become hysterical after undue fatigue. Here, then, is an instance of the condition in question occurring not only in the absence of uterus or ovary, but also of all sexual complication. I repeat, the word hysteria does not represent the condition which it is used to describe; and so long as a condition of the nervous system, *per se*, is constantly mixed up with diseases and disorders of the sexual system, so long will the improved knowledge and treatment of both be retarded instead of being promoted. It is so obvious that disorders which may be frequently, but which are by no means invariably associated, cannot be regarded by any rational mind as identical.

I am, etc., D. DE BRUÏT HOVELL.

We are indebted to correspondents for the following periodicals, containing news, reports, and other matters of medical interest:—The *Lincoln Gazette*, Jan. 6th; *Saunders's Dublin News-Letter* and *Daily Advertiser*, Jan. 10th; The *Scarborough Express*, Jan. 13th; The *Liverpool Albion*, Jan. 13th; The *Lincoln, Rutland, and Stamford Mercury*, Jan. 12th; The *Cambrian*, Jan. 12th; etc.

COMMUNICATIONS, LETTERS, ETC., have been received from:—

Dr. Murchison, London; Dr. Sibson, London; Mr. Callender, London; Our Vienna Correspondent; Dr. A. P. Stewart, London; Mr. W. F. Jebb, London; Mr. Fussell, Brighton; Dr. Moore, Dublin; Mr. C. Hunter, London; Dr. Greenhill, Hastings; Mr. Prince, Uckfield; Mr. Vincent Jackson, Wolverhampton; Our Leeds Correspondent; Dr. Jagielski, London; Dr. Wolfe, Glasgow; Mr. William Adams, London; Mr. G. G. Gascoven, London; Dr. Clouston, Carlisle; Our Glasgow Correspondent; Dr. Coales, London; Mr. Dale, Scarborough; The Secretary of the Royal Medical and Chirurgical Society; Dr. D. T. T. Maunsell, Dublin; Dr. Maudsley, London; Mr. T. H. Bartleet, Birmingham; Dr. Joseph Rogers, London; Mr. Lawson Tait, Birmingham; The Secretary of the Hunterian Society; Dr. George Johnson, London; The Secretary of the Clinical Society; The Registrar-General of England; The Secretary of Apothecaries' Hall; The Registrar-General of Ireland; Mr. F. M. Stone, London; The Registrar of the Medical Society of London; Dr. G. F. Elliott, Hull; The Secretary of the Social Science Association; Dr. Maclaren, Carlisle; Dr. Felce, London; The Secretary of the Pathological Society; Dr. Priestley, London; Dr. Goyder, Bradford; Dr. Stratton; Mr. Thomas Cooke, London; Mr. Lownds, Liverpool; Dr. Brunton, London; Rev. Dr. Haughton, Dublin; Mr. Scatchard, Tadcaster; Dr. Currie Ritchie, Manchester; Dr. Sidey, Edinburgh; Dr. Dunderdale, Warrington; Dr. Styrap, Shrewsbury; Dr. Miller, Dundee; Dr. B. W. Foster, Birmingham; Dr. MacLagan, Berwick-on-Tweed; Mr. Lidbetter, London; Sir Francis Hicks, London; Dr. Howsin, Newton-le-Willows; Dr. Hill, Hooton; Mr. Waterson Birmingham; Dr. Padley, Swansea; Mr. Dyke, Merthyr Tydfil; Mr. Evans, Northampton; H. F. P.; Mr. Ryley, Woolwich; Mr. H. Wood, Birmingham; etc.

#### BOOKS, ETC., RECEIVED.

Report on the Sanitary Condition and Public Health of Mile End Old Town for the year ending March 1871. By Matthew Corner, M.D. London: 1871.  
Transactions of the Eighth Annual Meeting of the American Ophthalmological Society. New York: 1871.