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## Association Intelligence.

### BRANCH MEETINGS TO BE HELD.

NAME OF BRANCH.	PLACE OF MEETING.	DATE.
BATH AND BRISTOL. [Ordinary.]	White Lion, Bristol.	Thurs., Nov. 28, 7 P.M.

## Reports of Societies.

### OBSTETRICAL SOCIETY OF LONDON.

WEDNESDAY, NOVEMBER 6TH, 1861.

W. TYLER SMITH, M.D., President, in the Chair.

TWENTY-EIGHT gentlemen were balloted for and duly elected as Fellows. The following candidates for admission into the Society were ordered to be balloted for at the next meeting—viz.: T. W. Best, Esq.; Dr. Joseph Cogan; Wm. Collingwood, Esq.; Hugh Croskery, Esq.; Robert Ellis, Esq.; T. T. Frankland, Esq.; A. J. Harris, Esq.; Dr. H. S. Hounsell; and John Williams, Esq.

*Obstetrical Instruments.* By J. B. Hicks, M.D. Dr. Hicks exhibited some instruments, made under his directions by Durroch, of St. Thomas's Street, London Bridge, for the removal of polypi, cauliflower growths, cervix uteri, hemorrhoids, etc. Their principle consisted in the adaptation of rope, made of annealed steel-wire, to the shaft of a screw-écraseur, whereby the flexibility of the rope was combined with nearly the strength of the chain. Dr. Hicks said he had made experiments with a variety of materials, and considered the annealed steel-wire that which combined the greatest strength with the most flexibility.

Dr. OLDHAM then exhibited a large Fibroid Polypus of the Uterus, which he had lately removed with Dr. Hicks' larger instrument. The tumour completely filled the vagina, distending it above the level of the brim. The rope was carried around its neck by the hand passed into the vagina, and the section completed without difficulty or hæmorrhage.

Dr. TYLER SMITH observed, that if the annealed steel-wire were stronger than other wire, Dr. Hicks would have rendered essential service in the treatment of polypus. He had himself for many years abandoned the use of whipcord for wire in the removal of polypus and cauliflower excrescence. His instrument was made on the plan of Gooch's, but sufficiently strong to cut through the tumour at once. He had used plated copper-wire, or hard iron-wire, both singly and stranded.

Mr. SPENCER WELLS, in reply to a question from Dr. Hicks, stated that the wire-cord he had used was made by stranding together from six to ten lengths of the ordinary Sheffield iron-wire introduced by Dr. Simpson. He (Mr. Wells) had removed fibrous polypi easily by this cord, and had once cut through the cervix uteri without difficulty. He had used the screw-écraseur for tightening the cord, and the tourniquet-screw; but he thought the double sawing action of Mathieu's rack-écraseur was better than the simple screw used by Dr. Hicks. In one case, the tumour was sawn off; in the other, simply squeezed off.

*Polypus of the Uterus removed by the Ecraseur.* By GRAILY HEWITT, M.D. The polypus was pendulous in the vagina by a thin pedicle from the interior of the

uterus, and was of the size of an egg, having a flattened shape. There was no difficulty in the operation, which succeeded perfectly. The case was worthy of mention, inasmuch as it had been treated for about a year for prolapsus uteri, a pessary having been worn.

*Ovariectomy.* By ISAAC BAKER BROWN, Esq. Mr. Brown related the histories of the following five cases, of which four were successful. CASE I. L. H., aged 21, single, had a tumour two years, and had been twice tapped. There were no adhesions. The pedicle was secured by a clamp, which was taken off three days afterwards, and the pedicle allowed to return. He never had a bad symptom. The tumour was multilocular, and contained seventeen pints of fluid.—CASE II. F. W., aged 19, single, had a tumour two years. There were no adhesions. The pedicle was treated as in Case I. She had only one grain of opium, and was now quite convalescent. The tumour was multilocular and composed of one large cyst, containing fourteen pints of fluid, and a conglomerated mass of smaller cysts.—CASE III. C. S., aged 49, married, had a tumour six years, and had twice been tapped. There was only one adhesion, in the direction of the liver, which was tied with a ligature. She had one grain of opium nightly since the operation. She did well. The tumour was multilocular, and weighing 1 lb. 11 oz. It consisted of two cysts, with very thin walls, containing between eleven and twelve pints of dark albuminous fluid, and several masses of conglomerated cysts, varying in size from a walnut to an orange.—CASE IV. M. A. M., aged 50, the mother of six children, of very nervous and desponding temperament, had a tumour for three years. It weighed 6 lb. 14 oz., and was composed of a mass of honeycomb cysts. There were no adhesions above, but there was one in the direction of the liver, which was ligatured. The tumour was withdrawn with great difficulty, it having modeled itself to the form of the pelvis and being attached to the whole external surface of the fundus of the uterus. The pedicle was large. One portion only was secured by callipers; the remainder divided into four separate portions, and secured by as many double ligatures. These were retained outside. There were also several large vessels ligatured. The patient sank forty hours after the operation. She had two grains of opium given her altogether. The autopsy showed very partial peritonitis and general congestion of the abdominal viscera. The whole surface of the pedicle was covered with clots, and there was also some blood in the cavity of the peritoneum. She evidently died from the great shock of the operation.—CASE V. M. T., aged 23, had a tumour over three years. There were no adhesions. The patient had not had a bad symptom, and was convalescent.

These cases make a total of fourteen operations for ovariectomy performed in the London Surgical Home, of which ten have been successful.

### RETENTION OF URINE AFTER DELIVERY.

BY SPENCER WELLS, ESQ.

The coats of the bladder which was presented were thickened; and lying loose in the cavity there was found a mass, composed of the whole of the mucous membrane, detached from the muscular coat, and covered on both sides with a deposit of the saline elements of urine. Microscopically, this mass might be described as degenerate epithelium holding together saline deposit. On boiling a piece of it in twenty parts of water to one of acetic acid, much of the saline matter was dissolved, and some of the tissue became clear, looking like smooth muscular tissue which has begun to degenerate by the deposit of fatty or albuminous particles in its substance. Mr. Wells brought the case before the Society by the express desire of the father of the patient (a member of our profession) in order to impress the lesson that a valuable life may be lost, and the surgeon's reputation

evidence will stand the most searching cross-examination.) 4. Chloroform, allied to alcohol, is invaluable in convulsions; and, by following its inhalation by the temperate use of wine, infantile and other convulsions may frequently be arrested completely. 5. In cases of marasmus, I have already recorded cases of children recovering health under the influence of diluted alcohol alone (sugar included). (See *Foundation for New Theory*, etc., pp. 396-8.) I have seen adults brought round by a diet of champagne and turtle soup, without anything else, during three whole weeks; and a patient dying with phthisis recover wonderfully for a short period on champagne alone. 6. Alcohol stands next to opium as a narcotic; and it appears to have many other similar properties (and here let us note that opium, like alcohol, passes out of the body after it has been imbibed: e.g., the nursing mother taking it will narcotise her infant). And it is to be noted that a debauch on opium, on wine or spirits, and on beef and butter (see Simpson's *Voyage Round the World*; chapter, *Siberia*) will all equally produce prolonged insensibility. I have, in cases of idiopathic pervigilium, procured sleep by brandy and water, when such narcotics as opium and Indian hemp were useless. 7. In fever, without wine, we may often find the patients restless, sleepless, delirious. We give them wine; and immediately they become quiet, sleepy, and rational; and this not once or twice, but repeatedly. 8. In jaundice, I have seen the same patient treated on the total abstinence plan and the temperate stimulant one. On the former, relapses were so frequent that the lady was never well during half a year. The turning-point was the free use of wine. On subsequent occasions, a few days was the limit of the illness, when treated generously from the first. 9. In the Liverpool Royal Infirmary, the admissions into which amount to about two thousand annually, the average number of patients in the house weekly, taking the average for twenty-seven years prior to the time when the generous treatment of disease was uncommon, and when the average amount per man admitted was three shillings, was 202. For seven years since that period, the weekly average of patients in the house is 170, the annual number remaining about the same; and the cost of wine has increased to seven shillings per head admitted. This distinctly proves that the average duration of patients in the house has been materially lessened. I am, too, informed by one of my surgical colleagues that the average success of surgical operations under the present temperate stimulant plan is considerably greater than under the former abstinent period.

We may therefore fairly consider that a *primâ facie* case is made out in favour of alcohol both as food or physic. Let us now examine some objections.

1. It often increases feverishness. Granted. Well, then, let it alone in those cases. If wine make a patient worse, withhold it; if it make another better, why not give it him? 2. It makes the mouth and tongue dry, and promotes thirst. So do beef and mutton. Eat a pound of beef, and you will want more water after it than after a glass of whiskey. It is said, too, to create a craving for more: if you take it to-day, you can't do without it to-morrow. It is the same with beef: a man does not despise a breakfast because he wants a dinner afterwards, or good tea because he goes for a second cup. 3. Patients get well without alcohol in any form. Granted. So do horses when they have been hurt; but they get better sooner on oats than on grass. And oats make a horse so frisky, that we may be allowed the fancy that they really give *spirits* to the animal. 4. Persons who are total abstainers are fat and strong. Granted. So are pigs and oxen; and dray-horses, which indulge in beer, are so too. The biggest and strongest men I know drink far more strong water than they eat food. Merry and fat Jack Falstaff took very little bread to the sack he drank. 5. Indulgence in alcoholic drinks

induces various diseases. Well! so does indulgence in venery. Everybody knows that the fire that warms may burn them if they get too much of it. Must we all be celibate, therefore, and eschew fires? 6. The use of alcohol is said to make a man a beast. What beast, I wonder? The Australian savage had the sleep of coma without fermented liquors; the New Guinea man was a tiger, the red Indian a snake, long before they drank whiskey; and nowhere do we see such terrific bursts of passion, blind rage, and fury, as in the growing milk or water drinking child, before the rod has taught him to control his passions. Alcohol never yet created a bad passion.

We may conclude, then—1. That alcohol is food; 2. That it is physic; 3. That too much of it is a bad thing. And a meagre conclusion, truly, it seems.

I am, etc., T. INMAN.

Liverpool, November 1861.

## Medical News.

ROYAL COLLEGE OF SURGEONS OF ENGLAND. The following gentlemen passed their primary examinations in Anatomy and Physiology, at a meeting of the Court of Examiners, on November 5th, and when eligible will be admitted to the pass examination:—

### London Hospital.

Brereton, Alfred Henry      Levick, George  
Dyte, David Hyman

### St. George's Hospital.

Bloxam, Matthew      White, Arthur Calcutta  
Cocksedge, Thomas A. J.

### Dublin School of Medicine.

Carson, Alexander Tertius      Jordan, Myles Joseph  
Clarke, Alexander Carson

### Cork School of Medicine.

Spedding, William Alexander      Tomkins, Charles Payne

### Guy's Hospital.

Jordison, Robert Lloyd      Topham, Herbert

### Birmingham School of Medicine.

Ireland, John Roaf      Glasgow School of Medicine.

Edinburgh School of Medicine.

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At the same meeting of the Court—

O'Connor, Daniel, of the Royal Naval Hospital, Plymouth, passed his examination for Naval Surgeon. This gentleman had previously been admitted a member of the College: his diploma bearing date July 4th, 1856.

Admitted on November 13th:—

Anderson, John, Manchester  
Cocker, William Henry, Blackpool, Lancashire

Colston, Samuel B., Brixham, Devon  
 Dyte, David Hyman, London  
 Fryer, John, Newbigin, Bishopdale, Yorkshire  
 Gedney, John, Hull  
 Gwynn, Edmund, Caterham, Surrey  
 Haslam, George H., Market Drayton, Shropshire  
 Hedley, Edward Anthony, Felton, Northumberland  
 Jones, John Lloyd, Treborth, near Bangor  
 \*Lee, Herbert G., Thame, Oxfordshire  
 Miller, Richard May, B.A. Lond., Barnstaple, Devon  
 Moore, Edwin, York  
 Nickols, Thomas, Leeds  
 Okell, George, Northwich, Cheshire  
 Passmore, Thomas Henry, Instow, North Devon  
 Rowe, Thomas Henry, Haverfordwest  
 Rudge, John E., Westbourne Grove, Bayswater  
 Smart, Bath Charles, Balsham, Cambridgeshire  
 Somerville, James H., Bloxwich, Staffordshire  
 Strother, Arthur, Forest Gate, Essex  
 Williamson, Henry George, M.D., Nantwich, Cheshire

## Admitted on November 14th:—

Allfrey, Charles Henry, Stamford Hill  
 Cooper, Herbert, Bristol  
 Davey, John Edwin, Lewes, Sussex  
 Dustan, John, Jersey  
 Edwards, Morgan John, Newbridge, Glamorganshire  
 Fletcher, Henry Studd, Abingdon  
 Gale, Henry Stanley, Hampstead  
 Harris, Walter, Waterford  
 Hicks, John Wale, Hackney  
 Lidderdale, John, Osmington, near Weymouth  
 Meade, Edward, Middleton, co. Cork  
 Mitniss, Henry William, Calcutta  
 Murrell, William Henry Julius, Lewes, Sussex  
 Onley, Samuel, Cheltenham  
 Ramsbotham, Samuel Henry, Leeds  
 Russell, William Smyth, West Indies  
 Smith, Henry, Wigan, Lancashire  
 Thorne, Thomas Henry, Northampton  
 Wadd, Thomas Herbert, Basinghall Street  
 Watson, William Tyndale, Tottenham  
 Whitall, James William, Chertsey  
 Winterbottom, Edwin John, Sloane Street

## Admitted on November 15th:—

\*Adams, Thomas Rutherford, Kilkenny  
 Daniell, John, Sydney, Australia  
 Hoff, George Framingham, Calcutta  
 Sheetz, James, Etawah, Bengal Presidency  
 Sheppard, William Matthew, Geelong, Australia  
 Tray, John Henry, Clarendon Square

## Admitted on November 19th:—

Handy, H. Francis, Melbourne, Australia

UNIVERSITY OF CAMBRIDGE. The following graduates have passed their examinations for degrees in medicine:

## Doctor of Medicine.

Robertson, Charles A. L.

## Bachelors of Medicine.

Cheadle, Walter B., B.A. Fish, John C., B.A.

APOTHECARIES' HALL. On November 14th, the following licentiates were admitted:—

Adams, Walter, Ipswich  
 Bromley, John Bourne, Stourbridge, Worcestershire  
 Carter, Edward Hunt, Billericay, Essex  
 Dyte, David Hyman, London Hospital  
 Owen, Richard Jones, Leamington, Warwickshire  
 Walker, Bernard, Sheffield

## APPOINTMENTS.

CROSSLEY, C. R., Esq., elected Surgeon to the Leicester Infirmary.  
 MARRIOTT, C. H., Esq., elected Surgeon to the Leicester Infirmary.  
 MASON, David, M.D., appointed, by the Queen, a member of the Legislative Council of the Island of Jamaica.  
 PATTEN, Charles A., Esq., appointed Assistant-Surgeon to the Convict Prison at Portsmouth, *vice* W. W. Leadam, M.D.  
 ROGERS, Frederick J., Esq., elected House-Surgeon to the Leicester Infirmary.

ROYAL ARMY. The following appointments have been made:—

ANDERSON, Assistant-Surgeon J., M.B., 73rd Foot, to be Staff-Assistant-Surgeon, *vice* Creagh.  
 BRIEN, Staff-Surgeon E. A., to be Surgeon 1st West India Regiment, *vice* Martin.  
 BUCKLE, Staff-Surgeon R. T., M.D., to be Surgeon 15th Foot, *vice* Bawtree.  
 DURRELL, Staff-Surgeon W. H., M.D., to be Deputy Inspector-General of Hospitals.  
 CREAGH, Staff-Assistant-Surgeon W., to be Assistant-Surgeon Royal Artillery, *vice* Hawkins.  
 DONNELL, Staff-Surgeon O. S., having completed twenty years full-pay service, to be Staff Surgeon-Major.

GIBBON, Assistant-Surgeon E. A., 7th Foot, to be Staff-Assistant-Surgeon, *vice* Longmore.  
 JOHNSTON, Staff-Assistant-Surgeon J. S., M.D., to be Assistant-Surgeon 72nd Foot, *vice* Jones.  
 LEET, Staff-Assistant-Surgeon C. H., to be Assistant-Surgeon 5th Foot, *vice* Whitty.  
 LOGIE, Surgeon C. G., M.D., Royal Regiment of Horse Guards, having completed twenty years full pay service, to be Surg.-Major.  
 MENZIES, Staff-Surgeon E., to be Staff-Surgeon-Major.  
 THOMPSON, Staff-Surgeon W. R., M.D., to be Surgeon 2nd West India Regiment, *vice* McDermott.  
 TOTTELL, Assistant-Surgeon J. H. H., 18th Foot, to be Staff-Assistant-Surgeon, *vice* H. T. Sylvester, M.D.  
 WHITTY, Assistant-Surgeon T. R., 5th Foot, to be Staff-Assistant-Surgeon, *vice* Leet.

ROYAL NAVY. The following appointments have been made:—

ALLAN, James A., M.D., Acting Assistant-Surgeon, to the *Emerald*.  
 ANDERSON, James R., Esq., Assistant-Surgeon (additional), to the *Nile*, for Marine Battalion.  
 COMRIE, Peter, Esq., Assistant-Surgeon, to the *Edgar*.  
 ELLIOTT, George, Esq., Assist.-Surgeon, to the Chatham Marines.  
 FAWCETT, James E., Esq., Assist.-Surgeon (addit.), to the *Wellesley*.  
 HALPIN, Joseph, Esq., Assistant-Surgeon, to the *Rifeman*.  
 HAMILTON, Mark, M.D., Surgeon, to the *Greyhound*.  
 HEAD, Richard, L. B., Esq., Assistant-Surgeon, to the *Impregnable*, for service in the *Squirrel*.  
 KING, John, Esq., Surgeon, to the *Doncgal*.  
 KNAGGS, Sydney H., Esq., Acting Assistant-Surgeon, to the *Algiers*.  
 NATHAN, Henry F., Esq., Assistant-Surgeon, to the *Cambridge*.  
 RAHILLY, Michel J., M.D., Acting Assist.-Surg., to the *Greyhound*.  
 SLOGGETT, William, Esq., Surgeon, to the *Edgar*.

VOLUNTEER CORPS. The following appointments have been made (A.V.=Artillery Volunteers; R.V.=Rifle Volunteers):—

ADAMS, A. M., jun., Esq., to be Assistant-Surgeon 2nd Royal Lanarkshire Militia.  
 COGHILL, J. D. M., Esq., to be Surgeon 2nd Royal Lanarkshire Militia, *vice* Gouliay.  
 FIFE, J. B., Esq., to be Surgeon 1st Newcastle-on-Tyne R.V., *vice* Angus.  
 FOULKES, F., Esq., to be Assistant-Surgeon 6th Regiment Royal Lancashire Militia.  
 INNES, J. G., Esq., Surgeon 1st Administrative Battalion Elginshire R.V.  
 LAWRENCE, S., M.D., to be Assistant-Surgeon 5th Forfarshire R.V.  
 LOMAX, H. T., Esq., to be Surgeon 2nd Administrative Battalion Staffordshire R.V.  
 MANFORD, R. A., Esq., to be Surgeon 1st Administrative Battalion Invernesshire R.V.  
 ORD, G. R., Esq., to be Assistant-Surgeon 4th Surrey R.V.  
 SMITH, R., Esq., Assistant-Surgeon 1st Administrative Battalion Elginshire R.V.  
 TERRY, J. N., Esq., to be Assistant-Surgeon 2nd West Riding of Yorkshire A.V.  
 WILSON, J., Esq., to be Surgeon 1st Invernesshire A.V.

To be Honorary Assistant-Surgeons:—

JENKINS, R., Esq., 5th Glamorganshire R.V.  
 JONES, W. W., Esq., 11th Shropshire R.V.  
 LESLIE, J., Esq., 5th Aberdeenshire R.V.  
 MASFEN, W. F., M.B., 25th Staffordshire R.V.  
 PARK, G., Esq., 11th Perthshire R.V.

## DEATHS.

BOWLING. On November 16th, at Hampstead, aged 76, Ann, widow of the late \*John Bowling, Esq., of Hammersmith.  
 \*FORBES, Sir John, M.D., D.C.L., F.R.S., at Whitechurch, Oxon, aged 73, on November 13.  
 PRING. On November 12th, at Taunton, Louisa, wife of James H. Pring, M.D.  
 SAYER, Augustin, M.D., at 23, Upper Seymour Street, aged 71, on November 15.  
 TOMKIN, Thomas, M.D., at Witham, Essex, aged 74, on Nov. 17.

ST. THOMAS'S HOSPITAL. It is supposed that the demand made by the Governors of St. Thomas's Hospital for compensation from the Charing Cross Railway people will be reduced to between £250,000 and 300,000.

ROYAL MEDICAL BENEVOLENT COLLEGE. Two gentlemen educated at this establishment have recently passed the second B.A. examination of the University of London; one being placed in the first, and one in the second division.

THE MEDICAL COLLEGES OF NEW YORK have now all commenced their winter sessions, and, we are glad to learn, with classes which prove that the average number of students in this city has not materially diminished. (*American Med. Times.*)

THE ETHNOLOGICAL SOCIETY. At a meeting of the Ethnological Society, held last Tuesday, Dr. Hunt read a report of the Ethnological Papers read at the British Association at Manchester. Mr. Crawford, the chairman, said that more persons attended these meetings than any other.

SOCIETY OF ARTS. At the opening meeting of the 108th session of the Society of Arts, on Wednesday last, one of the Society's silver medals was presented to Dr. Edward Smith, for his papers, on "Recent Experimental Inquiries into the Nature and Action of Alcohols as Food;" and on "The Uses of Tea in the Healthy System."

AMERICAN ARMY HOSPITALS. We learn that General McClellan has ordered the immediate construction of the most improved pavilion hospitals, for the accommodation of 5000 beds, with 1750 cubic feet of air-space for each patient. The sites for the buildings have been selected. We may congratulate the country for having at the head of its army, a commander so enlightened in all that relates to the welfare of its citizen soldiers. (*Amer. Med. Times.*)

KING'S COLLEGE HOSPITAL. On Tuesday week, the materials of the old hospital in Portugal Street, Lincoln's Inn, formerly the workhouse of the parish of St. Clement Danes, were sold by auction, preparatory to the site being cleared for the completion of the new hospital. More than two-thirds of the new building are already erected; and all that remains to be done in order to complete the hospital, according to the architect's design, is to continue the Carey Street wing to Portugal Street, on the site of the old workhouse, which is now being pulled down.

UNIVERSITY OF CAMBRIDGE. The Vice-Chancellor has given notice that the Professorship of Chemistry has become vacant by the death of the Rev. James Cumming, and that the election of a new Professor of Chemistry will take place on Friday, the 6th day of December next. The electors to the Professorship are the persons whose names are on the electoral roll of the University. The Vice-Chancellor and proctors will receive the votes of the electors from eleven o'clock in the morning till one o'clock, when the Vice-Chancellor will declare the election. Mr. Liveing, of St. John's College, is at present the only declared candidate.

EXTRACTS FROM REGISTRAR-GENERAL'S REPORT. "Low typhoid fever is very prevalent at Steyning in Sussex, where in consequence of bad drainage it is believed to cling with greater tenacity. The total deaths in Brighton were 427 against 342 in the same quarter of 1860. Fever prevails in the more crowded parts of the town of Buckingham, where drainage and ventilation are stated to be very imperfect. At Worcester, where there has been a great deal of typhoid fever, almost every case has been accompanied by 'pustular eruption or ulceration of the throat, which sometimes became almost diphtheritic.' Typhus carried off a man, his three adult sons, and his granddaughter, who occupied two houses at Snitterfield (Stratford-on-Avon). It was very prevalent, though not very fatal, at Yeadon in the West Riding of Yorkshire. Of 29 deaths at Somersham (St. Ives) 9 were caused by diphtheria; and of 31 at Ixworth, in Suffolk, there were also 9 (in Great Livermere parish) from the same disease. It was fatal in 7 cases in Holt, Norfolk. Five deaths all in one family, occurred from it at Burnham in the same county; and in the neighbouring sub-district of Snettisham 'a malignant form of sore throat' is very prevalent, of which more than 30 cases (6 fatal) occurred in the parish of Hunstanton. Diphtheria raised the mortality at Loddon and Diss. It was fatal in 6 cases at Ellesmere. It prevailed greatly at Leake in Leicestershire, and it caused 5 deaths out of 26 at Holt in North Wales.

## Varieties.

MEDICAL LEGISLATORS IN BRAZIL. There are no fewer than thirteen doctors of medicine members of the actual chamber of deputies, which consists of one hundred and twenty members; in the senate are two, this body consisting of about fifty senators. Thus, the profession enjoys far greater guarantees in this way than in the so-called liberal and enlightened British empire! As to Ireland, no comparison on this subject can be instituted, owing to her anomalous state in modern times. (*Dr. Daunt.*)

MARRIAGE OF A MEDICAL MAN NOT ADVISABLE. It has often occurred to us, that most medical men would be the better if they remain single. We know that it is opposed to the received opinion on the subject, and we own that it has its inconveniences. But we feel confident that, in the present state of society, in which expensive luxury forms a constant element, it is next to impossible for a general practitioner to support a proper appearance in the world from nothing more than the proceeds of his professional exertions. It is the married life that urges so many to work themselves to death. They cannot bear to see their family less than they should be. Consequently they are ever on the fret. They have no leisure to sit down and think. They cannot and must not do so; and it is owing to the cares of matrimony that many, who would otherwise have been philosophers, devoted to their profession, end by becoming nothing better than routiners or professional tradesmen. In moments of real illness and danger the public do not ask whether the doctor rides or walks, is married or unmarried. All they require is that he should be at hand when he is wanted, and should be capable of performing all that is required of him. (*Medical Critic and Psych. Jour.*)

CONVERSION OF SEA-WATER FOR MARINE PURPOSES. On Thursday week a number of gentlemen connected with the shipping interest assembled on board the *Mataoika*, fitting out as an emigrant ship for New Zealand, and lying in the London Docks, for the purpose of witnessing the rapid conversion of the impure water of the docks into fresh water fit for drinking, by means of Graveley's patent sea-water distilling and aerating apparatus. The apparatus is now carried by most of the vessels chartered for the conveyance of government emigrants, and has proved of the greatest possible utility in the conversion of sea into fresh water, to the great comfort of the passengers, and the saving of a vast amount of stowage space in the vessels. Mr. Graveley, the patentee of the apparatus, explained the principle of the invention. It is extremely simply in construction, and easily applied, not only to vessels, but to land carriage, and from its portable character is found most useful in sweetening brackish water in the desert. The dirty water of the dock was first pumped up into a reservoir, under which a furnace is placed, and the steam arising from the boiling water, being collected in a steam-chest, passes through a number of small pipes, in which it is condensed, the water falling into a second reservoir in which the process of filtration and aeration takes place. By this process something like eight or ten gallons of beautifully pure water can be obtained in an hour, no matter how foul, or how much impregnated with deleterious matter it may be originally. Mr. Warington, the chemical operator to the Society of Apothecaries, on analysing the water thus produced, found it to be bright, colourless, soft, and well tasted, free from odour, and a very excellent water either as a beverage or for domestic purposes. It is estimated that one of these distilling apparatus would be fully equal to the abundant supply of 240 men; but as a matter of

precaution it is usual in the case of emigrant ships to carry half the requisite quantity of water in barrels. It is, however, rarely used, the passengers preferring the converted water, which is infinitely more healthy and pleasant to the taste than that served out from barrels. Twelve ships in the Russian Imperial navy are fitted with this apparatus, and it has been adopted in our mercantile marine by several vessels.

**SANITARY STATE OF MADRID.** Compared with most European cities of a similar category, Madrid is by no means salubrious, since its average rate of mortality usually ranges much higher, with few exceptions, than other places possessing large and crowded populations. During most winter seasons, acute inflammatory diseases of the lungs, popularly denominated "pulmonia," rage exceedingly common, and often prove fatal to thousands of the Madrilénian people. The icy northern blasts which at that period blow down from the Guadarrama mountains, then usually covered with snows, contribute greatly to this mortality, while in summer excessive heat, an unusually dry, keen, and frequently varying atmosphere, in regard to its temperature, also produce much unhealthiness. Febrile diseases, rheumatism, and bowel-complaints are likewise often prevalent under these circumstances. Perhaps, however, the most remarkable peculiarity characterising disease in Madrid is the marked frequency of intermittent fevers during dry, scorching weather, and when the entire district has a hot, burning sun above, but is frequently enveloped in clouds of dust below, while utterly devoid of moisture everywhere. This prevalence of agues, which often assume a tertian type, becomes more singular, seeing the above-named maladies are generally considered as associated with malaria, stagnant marshes, decaying vegetable matter, and also peculiar to moist atmospheres. So far from such being the case in the arid Castilian plains surrounding Madrid, trees are there almost wanting, bare rocks often taking their place, while an aspect of desolation and unfruitfulness meets the eye outside its precincts in nearly every direction. Indeed, this entire district looks like the barren sandy wastes of Africa. No announcement is, however, more commonly made in the weekly reports of public health at Madrid, than that "muchas fiebres intermitentes de typo cotidiano y tertiano" are often exceedingly prevalent among Madrilénos, both during summer and autumn, besides being not unfrequently observed at other seasons. The great singularity now described appears so contrary to occurrences noted elsewhere, and under very different circumstances, that we think further inquiry seems necessary before being fully able to give any satisfactory explanation of these phenomena. Among other features which the climate of Madrid portrays, is the marked difference of temperature that frequently prevails between day and night-time, and even on opposite sides of the same street, during sunshine especially. This fact must never be overlooked. Again, the river Manzanares often gets covered with ice in winter, which disappears after sunrise; while in summer, should the Solano, a south-east wind, blow through its thoroughfares, the city then becomes almost a furnace, the thermometer rising frequently to 100° F., or even higher, but falling again at night, sometimes to the extent of 40° or upwards, which alternation therefore exceeds treble the amount of analogous diurnal changes usually noticed in London. Knowing these characteristics of its climate, observers need not wonder if Madrid proves unhealthy, or at the custom which natives adopt of wrapping themselves in cloaks both during cold and hot weather; since "embozandose en las capas" becomes alike beneficial as prudent at all seasons. Therefore the Madrilénian atmosphere is most treacherous, and should due care be not taken, exposure to its action may produce hurtful consequences. This injurious in-

fluence being well known, has given birth to the popular Castilian proverb, "El aire de Madrid es tan sutil, que mata a un hombre, y no apaga a un candelil:"—"The air of Madrid is so subtle that it kills a man and does not extinguish a candle." Besides, if contrasted with numerous other continental cities, Madrid will be found to occupy a more elevated situation, and consequently is much colder during winter than many a northern metropolis, but often hotter in summer, its site being 2412 feet, or about three-sevenths of a mile, above the sea-level. That the Spanish capital is hence an insalubrious residence cannot after these statements be now questioned. (*Brit. and Foreign Medico-Chir. Rev.*, October 1861.)

### OPERATION DAYS AT THE HOSPITALS.

MONDAY.....Royal Free, 2 P.M.—Metropolitan Free, 2 P.M.  
TUESDAY. .... Guy's, 1½ P.M.—Westminster, 2 P.M.  
WEDNESDAY... St. Mary's, 1 P.M.—Middlesex, 1 P.M.—University College, 2 P.M.—Royal Orthopaedic, 2 P.M.  
THURSDAY.... St. George's, 1 P.M.—Central London Ophthalmic, 1 P.M.—London, 1.30 P.M.—Great Northern, 2 P.M.—London Surgical Home, 2 P.M.  
FRIDAY..... Westminster Ophthalmic, 1.30 P.M.  
SATURDAY.... St. Thomas's, 1 P.M.—St. Bartholomew's, 1.30 P.M.—King's College, 1.30 P.M.—Charing Cross, 2 P.M.

### MEETINGS OF SOCIETIES DURING THE NEXT WEEK.

MONDAY. Medical Society of London, 8.30 P.M.: Dr. Mackenzie, Lettsomian Lecture. No. II. "Physiological Researches into the Origin of Phlebitis as connected with the Pathology of Phlegmasia Dolens."—Royal Geographical.  
TUESDAY. Royal Medical and Chirurgical, 8.30 P.M.: Mr. R. Barwell, "On the Evils of Tenotomy, and on a New Method of Curing Deformities"; Mr. T. Nunneley, "On Congenital Malformation of the Eyes in three Children."—Zoological.  
WEDNESDAY. Society of Arts.—Archæological Association.  
THURSDAY. Antiquarian.  
SATURDAY. Royal (Anniversary).

### POPULATION STATISTICS AND METEOROLOGY OF LONDON—NOVEMBER 16, 1861.

[From the Registrar-General's Report.]

	Births.		Deaths.	
During week.....	{ Boys .. 876	1774	1288	
	{ Girls .. 898			
Average of corresponding weeks 1851-60 .....		1617	1294	

**Barometer:**  
Highest (Tu.) 29.607; lowest (Sun.) 29.087; mean 29.356.  
**Thermometer:**  
Highest in sun—extremes (Mon.) 92 degs.; (Wed.) 58 degs.  
In shade—highest (Sun.) 50.8 degrees; lowest (Sat.) 25.5 degs.  
Mean—39.7 degrees; difference from mean of 43 yrs.—3.8 degs.  
Range—during week, 25.3 degrees; mean daily, 13 degrees.  
Mean humidity of air (saturation=100), 89.  
Mean direction of wind, Var.—Rain in inches, 2.51.

### TO CORRESPONDENTS.

\* \* All letters and communications for the JOURNAL, to be addressed to the EDITOR, 37, Great Queen St., Lincoln's Inn Fields, W.C.

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

EXPERIMENTS ON ANIMALS WITH FEVER POISON.—SIR: Dr. Barker, of Bedford, has written to me by this post, to say that he can lay no claim to the experiment on the pig, referred to in a footnote appended to a paper on Typhoid Fever by myself, in the last number of the JOURNAL. The experiment in question was performed by another physician, whose name he is not sure of. I need scarcely add, that the inaccuracy on my part was quite unintentional. I am, etc. WILLIAM BUDD.

Clifton, November 18th, 1861.

**PROFESSIONAL AMENITY.**—We were not able last week, through want of space, to publish Dr. Inman's letter: but, in the mean time, asked him to give us some proofs of one astounding statement made in it by him; viz., "that he had investigated five cases in which for many months nothing was taken but alcohol and water, the persons keeping up their apparent health and strength, and one increasing in fat." This request, to be found in last week's notices, has produced the following note from Dr. Inman. As a reply to it, we again ask Dr. Inman to give us the details of those cases upon which he frames the statement alluded to. We will only remark, that we sincerely trust that this is not Dr. Inman's usual mode of arguing a scientific question.

"12, Rodney Street, Liverpool, Nov. 16, 1861.

"Sir,—Your notice of my letter in to-day's JOURNAL is insulting; but, as an editor, you offend with impunity.

"To fall in with the prejudices of the many may make the JOURNAL popular; but to commit breaches of good manners and good taste, will not make it respected.

"I am, etc., THOMAS INMAN."

**ALCOHOL.**—The following note is from a gentleman who was for some years chaplain to a county jail:—

"Sir: I have read your interesting article on the alcoholic question. I am glad to see so important a subject taken up by the faculty. My observations on the generally improved health of the prisoners in — County Jail, made me a teetotaler. As you may suppose, we had not the most favourable specimens to operate upon; on the contrary, we had, as a rule, some of the greatest drunkards in the county in the prison. No doubt, cleanliness, regularity of diet, etc., had their share in promoting the health of the prisoners. Still the treadmill and crank labour were daily endured without intoxicants; and the Infirmary was frequently without any invalids for weeks and months together; so that I arrived at the conclusion that alcoholic liquors are not at all necessary to men in health; and some ten years of personal abstinence have confirmed this conclusion. In Salford Jail, where there are between four and five hundred prisoners in daily confinement, they have not had one death for seven months, and no sickness worth speaking of."

**T. S.**—Perhaps you may think the enclosed advertisement worthy of notice in your JOURNAL.

"*Ask Homœopathic Dispensary.* Patron: His Grace the Duke of Beaufort. Patroness: Her Grace the Duchess of Beaufort. This Dispensary will be open on Mondays and Fridays, from 9.0 till 11.0 A.M., commencing Friday, 15th November, when advice and medicines will be administered to the poor. Medical officer: Wm. Hy. Watts, Esq., M.R.C.S. Eng. (Member of the British Homœopathic Society; late Assistant-Surgeon to the London Homœopathic Hospital, Bloomsbury, London). Terms: Two Shillings and Sixpence per Month. N.B.—Mr. Watts will attend at the Llanover Dispensary, under the patronage of the Right Hon. Lady Llanover, every Wednesday, at 3.0 P.M., and at the Llanarth Dispensary, under the patronage of the Hon. Mrs. Herbert, of Llanarth, every Thursday, at 9.30 A.M."

**THE CRANLEY VILLAGE HOSPITAL.**—Mr. A. Napper writes:—"In your notice of the Second Annual Report of the Cranley Village Hospital, you state, 'During the past year, twenty-three cases have been treated in this little hospital, which would otherwise have been transmitted to a London hospital.' Now, as my note which accompanied the report unequivocally stated that few, if any, of these twenty-three cases would have been sent to London, I must beg your insertion of this, as a means of controverting an erroneous impression, which I know exists in some quarters, that the multiplication of these small institutions will have a prejudicial effect on the London hospitals."

**DR. GIBB AND SCIENTIFIC NOMENCLATURE.**—Sir: It is to be hoped that the simple, yet precise, scientific language used by Mr. Toynbee, in his recent work on the *Diseases of the Ear*, is producing some influence upon the writings of medical men who pay attention to this branch of surgery. Dr. Gibb, however, in his paper lately published in your JOURNAL, appears to be beyond all hope, for the confusion of terms he has crowded together almost surpasses belief. Allow me to illustrate my meaning. Dr. Gibb begins by speaking of air going "into the tympanum", and of its "rupturing the membrana tympani." So far, good—the tympanum, we know, is the cavity of the drum, and the membrana tympani the head of the drum. But let us now see what terms Dr. Gibb proceeds to use when he means the membrana tympani. They are as follows:—1. *Tympanum*—"rupture of the tympanum" three times repeated. 2. *Membrana tympani*—"six ruptured membrane tympani"—"perforation of the membrana tympani." 3. *Tympanic membrane*—"rupture of the tympanic membrane", "perforation of the tympanic membrane", "ulcerative destruction

of the tympanic membrane", and "suppurative destruction of the tympanic membrane." 4. *The membrane of the tympanum*—"ulcerative destruction of the membrane of the tympanum." 5. *Tympanic membrane*—"ruptured tympanic membrane." 6, and lastly, as if to make confusion worse confounded, Dr. Gibb talks of "rupture of both tympani." It is to be hoped that before Dr. Gibb is found again "throwing these few observations together", he will throw his eyes upon his Latin grammar, and will give himself a short time to acquaint himself with the subject upon which he writes. In conclusion, sir, I may be allowed to say, that your admirable efforts to elevate the tone of the British Medical Association, and thereby that of the medical profession, are worthy of being seconded; and I sincerely hope that members of the Association will do their best to supply you with valuable, well written papers.

I am, etc.,

F.R.C.S.

**MR. FLEISCHMANN.**—We have received a long explanatory letter from Mr. Alfred Fleischman, respecting a matter of dispute between himself and Mr. Wallis. A report on the subject was brought before the last meeting of the Committee of Council; and judgment thereon was passed by the Committee. It is therefore impossible for us to reopen the matter in our pages; especially as the Report of the Committee of Council informs us, and Mr. Fleischmann himself admits, that he refused to attend a meeting of the judges who, with his consent, had been nominated by the Association to decide on the dispute, and consequently allowed judgment to go against himself by default. If Mr. Fleischmann is determined on reopening the subject, his proper course will be to apply to the Committee of Council.

**COMMUNICATIONS** have been received from:—Dr. GRAILY HEWITT; Mr. A. B. STEELE; Dr. R. W. FALCONER; Mr. J. KENT SPENDER; Mr. SPENCER WELLS; Mr. T. M. STONE; Dr. CIACCIO; Dr. R. B. GRINDROD; Mr. R. DUNK; Mr. INGLEBY; Mr. ALBERT NAPPER; Dr. BUDD; Mr. HIGGINBOTTOM; Dr. INMAN; Mr. J. F. NICHOLSON; Dr. LATHAM; Dr. J. D. HEATON; Dr. T. HILLIER; Mr. R. GRIFFIN; THE REGISTRAR OF THE MEDICAL SOCIETY OF LONDON; Dr. F. J. BROWN; Mr. J. RHODES; Mr. T. HUNT; Mr. J. APPLEBY; Mr. J. SMEDLEY; and Dr. BOYCOTT.

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