

this consists in placing the parts in such a position that the muscles concerned may be sustained in their ordinary state of association. My practice is to avoid all bandages, which only excite the muscles to undue action. All I do is to place the patient on his back in a flat bed, and the bones immediately recede into their proper position, and are uninterruptedly kept so. The arms should be kept as quiet as possible. The displacement at the acromial end is less than at the other, when luxated, because it is retained nearly in its place by the trapezoid and conoid ligaments. This case requires less attention and time than that of the sternal end, where much more and longer quietude is necessary. The principle upon which this method is adopted, is that of keeping the muscles in their natural order and power of acting.

Fractures of the clavicle occasionally occur so near the acromial point, that it is difficult to determine whether they are not luxations. I treat all fractures of the clavicle by merely placing the patients on flat beds; bandages seem commonly to do little good, and are not required if the patient will keep his bed. The clavicle is a bone which quickly unites.

Infants are frequently brought to me, in whom, by some accident, the clavicle has been only bent, and not completely separated by fracture. This bone suffers in very young children readily when they fall from small heights, or from the mother's lap, and the injury is often not adverted to, and only discovered on dressing the child. The best bandage is a handkerchief bound round in a figure of eight form, and a sling. The deformity quickly disappears.—*Observations on some parts of Surgical Practice, by Mr. Vincent.*

#### FRACTURE OF THE CLAVICLE.

Very unnecessary fears have arisen from the bone uniting not quite regularly. It is true it cannot always be effected without some slight deformity, but this is of no consequence in men, and even in women is only seen in such as are of spare make. This need not take place when the fracture is situated in the external third of the bone, the fragments being maintained *in situ* by the ligaments and muscles, so that a bandage is not even necessarily required. When the fracture occurs within the inner two-thirds, there is always some displacement in the adult, although this does not take place in very young children. The most complex apparatus are in nowise preferable to the following simple plan of treatment:—A bandage is carried from the armpit of the sound side across the back and shoulder to the fractured clavicle. The patient's hand is brought up to the sound acromion, so as to raise the elbow as high as the sternum, the shoulder being thrown backwards and upwards. Whilst an assistant holds the limb, the bandage is repeatedly passed over the anterior part of the arm, and brought round by the sound arm pit; and over this is passed one well moistened with dextrine, so as to produce an inflexible mould. The bandage need not be put on for four or five days after the accident, and in from a week to a fortnight the fracture will be sufficiently firm to allow of its removal. It is an error to suppose that a patient cannot raise his arm to his head when his

clavicle is fractured. He believes he cannot, and is prevented from trying by the pain this causes. But if you insist upon it, and that not doubtingly, you will find he can accomplish it. I have not seen six exceptions in twenty years.—M. Velpeau, *Gazette des Hôpitaux*, No. 115.

#### SOLUTION OF SULPHATE OF IRON IN PROLAPSUS ANI.

Mr. Vincent states that he has of late had great advantage in employing a solution of sulphate of iron, one grain to the ounce, in prolapsed bowels, and that an operation may often be dispensed with, and the patient cured merely by the use of this remedy. Very lately he has had two cases of the worst sort, one of twenty years' standing, with great protrusion and abundance of bleeding piles, which in three weeks was completely cured. The other came from one of the institutions which offer great pretensions in the treatment of these cases. The patient was very bad, having both internal and external piles, and the bowel descended largely and most readily; he was completely relieved in about a month. Other cases of a slighter kind have been set to rights in a week. The patient should be kept in bed, so that the bowel may be as much as possible in repose, and after it is cleansed out, a small quantity of the injection should be daily thrown up, and retained. Balsams are also well adapted to the disease.—*Observations on Surgical Practice*, p. 174.

### Medical Intelligence.

#### TRIBUTE TO DR. FORBES.

The following just tribute of honour is rendered to our esteemed associate Dr. Forbes, by the Editor of the *Archives Générales de Médecine*:—

After twelve years of a dignified and honourable existence, one of the most distinguished British medical journals has ceased to exist. In a well-conceived and well-written *adieu*, Dr. Forbes, the editor, has laid before his readers the causes which have prevented the success of his enterprise. We have frequently had occasion to appreciate the scientific spirit, the exactitude and impartiality with which the "British and Foreign Medical Review" was conducted, and willingly accord the editor our tribute of praise and regret. Some courage was required thus to sacrifice the best years of a life, and a portion of a fortune, in the attempt to perfect so difficult an undertaking. Dr. Forbes attributes his failure to the multiplicity of Journals, which have increased in a ratio disproportionate to the number of readers; and it is but too true that many of the best-established and most reputable medical men never open a medical book of any kind, still less a medical journal. We fully sympathise with him in these and his other reasons. Doubtless, in taking high ground in noticing only really scientific productions, in refusing communications bare of interest and common place, he soared far above the comprehension of the more grovelling minds around him, and was little in accordance with that spirit of industrialism, which in England as in France, speculates upon ignorance and routinism.

### APPOINTMENTS.

Dr. Meyer has been appointed Private Physician to H.R.H. Prince Albert.

Charles Aston Key, Esq., has been elected President, and C. J. B. Williams, M.D., and John Dalrymple, Esq., Vice-Presidents, of the Pathological Society, of London, for the year 1848.

### ROYAL COLLEGE OF SURGEONS.

Gentlemen admitted Members Friday, Jan. 14th :—B. Mallam; H. H. Brown; G. Keer; P. S. Warren; C. Johnson; J. Robinson; D. Williams; F. King; H. Davis; C. Morgan; A. Adams.

### HUNTERIAN ORATION.

The Hunterian Oration will be delivered on Monday, February 14th, by R. D. Grainger, Esq., Lecturer on Physiology at St. Thomas's Hospital.

### SOCIETY OF APOTHECARIES.

Gentlemen admitted Licentiates, Thursday, January 6th :—David Evans, Llanfyllin, Montgomeryshire; Walter Winter Walter, Stoke-under-Ham, Yeovil; Percival Thomas Meggs, Alverstoke, Hants; Thomas Henry Mitchell, Kingston.

Gentlemen admitted Licentiates, Thursday, January 13th :—Thomas Carr Jackson, Clitheroe; Wm. Henry Ackland, Bideford; Robert Rayner, Birstal, Yorkshire.

### OBITUARY.

Died, December 14th, 1847, at Florence, aged 67, Sir James Annesley, F.R.S., F.A.S., &c., late of the Hon. East India Company's Medical Service, and well-known for his truly valuable works on the Diseases of India, and Warm Climates.

December 28th, at Atherston, aged 89, John Power, M.D.

January 2nd, 1848, at Carlow, aged 83, Martin Tuomy, M.D., formerly Professor of the Practice of Medicine in Trinity College, Dublin.

January 4th, at Sheffield, Bedfordshire, aged 73, Charles Seaman Gaye, Esq., M.R.C.S.

January 9th, at Armagh, of fever, Thomas S. Parker, M.D.

January 12th, at Brecon, aged 65, of fever, Thomas Batt, Esq., Coroner for the County of Brecon, Senior Surgeon to the County Infirmary, and Surgeon to the County Gaol.

Lately, at Tipperary, of fever, Edward Dalton, M.D., Medical Attendant of the Bansa Dispensary.

Lately, at York, William Stephenson Clark, Esq., M.R.C.S.

### BOOKS RECEIVED.

The London Medical Directory. 1848. London: Churchill. pp. 203 and 432.

The Retrospect of Medicine, &c. Edited by W. Braithwaite, Lecturer on Obstetric Medicine at the Leeds School of Medicine, &c. Vol. XVI. July—December. 1847. London: Simpkin Marshall and Co. 1847. pp. 459.

The Half-Yearly Abstract of the Medical Sciences, &c. Edited by W. H. Ranking, M.D., Cantab. Vol. VI. July—December. 1847. London: Churchill; 1848. pp. 432.

Elements of Natural Philosophy, &c. By Golding Bird, A.M., M.D., F.R.S., F.L.S., Fellow of the Royal College of Physicians, &c. Third edition. London: Churchill. 1848. Fcap. 8vo., pp. 552. Numerous Illustrations.

Pocket Dispensatory and Therapeutical Remembrancer, &c. By John Mayne, M.D., L.R.C.S., Edin. London: Churchill. 1848. pp. 271.

A Popular Essay on Anæsthetic Agents, &c. By William Henry Mortimer, Surgeon Dentist. London: Higley. 1848. 8vo. pp. 32.

Dysphonia Clericorum, or Clergyman's Sore-Throat; its Pathology, Treatment, and Prevention. By James Mackness, M.D., Member of the College of Physicians, London; Consulting Physician to the Hastings Dispensary. London: Longman and Co. 1848. 8vo. pp. 125.

On the Aims and Philosophic Method of Pathological Research: an Inaugural Address, delivered at St. Thomas's Hospital, December 14th, 1847, by John Simon, F.R.S. London: Renshaw. 8vo. pp. 52.

Outlines of Medical Proof. By Thomas Mayo, M.D., F.R.S., Fellow of the Royal College of Physicians, &c. London: Longman, &c., &c. 1848. 8vo. pp. 47.

### INQUIRY INTO THE MEDICINAL ACTION OF ARSENIC.

#### NOTICE TO MEMBERS.

Mr. Hunt, of Herne Bay, requests us to acknowledge the receipt of many interesting communications from members of the Association, in reference to their experience in the medicinal use of *arsenic*, embodying records of nearly 2000 cases. As a large majority of the members have not as yet responded, and as the silence of many may be in some measure accounted for by the urgent nature of their engagements during the present sickly season, it is proposed to keep open the enquiry till the *end of March*, by which time it is hoped that every member, however limited his experience, will have responded to the questions addressed to them in the Journal for Dec. 1st, 1847, page 662. Those who have the charge of hospital records especially are earnestly requested to forward, (in a tabular form,) a report of the cases in which arsenic has been administered.

### TO CORRESPONDENTS.

Communications have been received from Mr. T. Hunt; Mr. Whitehead; Mr. Crompton; H. B. B.; Mr. H. S. Smith; The Birmingham Pathological Society; Mr. T. B. Torr; Mr. S. Miller; Dr. Oke; Professor Simpson; Dr. Kennion; Dr. J. Duncan. *A Student*.—Mr. Wilson's Anatomist's Vade Mecum will probably answer the purpose. No edition of the London Pharmacopœia has been published since 1836, but a new one may be expected during the course of the present year.