

the first application fails to diminish the tumefaction, pain and secretion of pus, and especially when the appearance and consistence of the latter are not changed by it, we must have recourse to the nitrate of silver again; in very acute cases this must be done within five or six hours of the same day.

The nitrate of silver has been applied in the form of solution, as a powder, or solid; but the lotion is certainly the most convenient form, particularly in the case of children or irritable persons. The strength in which I employ the solution is two scruples of the nitrate to eight scruples of water. It may be applied with a camel's hair brush, first to the lower lid, then to the upper one, and finally to the globe of the eye. I have already said that we should be careful to avoid the cornea. Some recommend the application of a drop of oil to cover this part of the eye; but the object is equally well attained by injecting some water between the eyelids. Solid nitrate of silver is the form which I generally prefer; with the caustic pencil the granulations and other morbid products are more easily commanded, but more caution is required to avoid injuring the cornea. The pencil should be passed over the diseased surfaces, until a thin white film ensues; our object being to modify the action of the mucous membrane, but not to destroy it.

Although I have thus recommended the use of nitrate of silver in all stages of gonorrhœal ophthalmia, I would not have the practitioner neglect other means of subduing the inflammation. In severe cases, general and local abstraction of blood must be employed; we must command the inflammation, and not be content to follow it; purgatives and abstinence from food will also be requisite. The patient, likewise, finds much relief from warm fomentations of the decoction of poppies. The extract of belladonna is efficacious in all cases of ophthalmia, and in this form particularly, by diminishing the sensibility of the organ; it may be rubbed round the base of the orbit twice a day. To cleanse the eye from the purulent secretion with which it is constantly bathed, is also indispensable; for this purpose I am in the habit of injecting, every hour or half hour, according to circumstances, the anodyne decoction and weak lotion of lunar caustic alternatively. The efficacy of the treatment now recommended has been abundantly proved by experience. During the last ten years I have only lost a single eye, and this can be testified by the numerous practitioners and pupils who have attended the venereal hospital during that time.—*Bul. de Therapeutique*, Jan., 1842.

with instructions how to carry out my views during the night." Now, Gentlemen, the case either was or was not sufficiently serious to require the attendance of a medical man during the night; if it was, the physician's duty was clearly to place a duly qualified practitioner at the bedside of the patient; if not, surely there were other and more proper nurses to be found in Bath than allowing a druggist, who is as foreign to the profession as a grocer, to remain in attendance upon a professional case. Yet I find, on the following day, the patient was attended by both the physician and druggist; so also on Sunday; nor nor was it until the evening of that day that a second qualified practitioner was called in. I do not question for one moment the right of any practitioner taking the sole charge of any case, however serious; but it is a very grave question for our profession, whether a physician has a right to meet and continue in attendance with a druggist for three days; such conduct is an insult upon the general practitioner. In the published evidence of this case the druggist is placed on a full level with any duly qualified practitioner of medicine; the physician meets him, day after day, in consultation; he leaves him in charge of the case, with directions for leeching, &c., as he may judge requisite. He gives his evidence like any other doctor; he has counted the pulse, forsooth! and noted its bearings, and gives his medical opinion "ore rotundo," side by side with two physicians and a surgeon. Gentlemen, if such things as these are to be, vain is all the talk about the honour of our profession—vain are our endeavours for procuring a proper medical reform, especially at the time when strenuous efforts are being made to put down the encroachments of druggists upon our rights; vain and empty will the professions of the Provincial Medical and Surgical Association be deemed by the general practitioners, if members of the Association can thus treat their brother practitioners with insult. I would fain hope that this transaction may yet admit of explanation, or that measures will be taken by the council of the Association, condemnatory of such conduct in one of their own body. One chief purpose of the Association was to uphold the honour, dignity, and unanimity of the profession; it numbers in its list of members many hundreds of general practitioners, who, like myself, look up to it as a safeguard to the respectability of our profession. But far different will be the feeling, if physicians, its members, openly insult us by putting the druggist upon a level—nay, give him a preference over the duly qualified practitioner. The matter loudly calls for explanation from Dr. Watson.

I am, Gentlemen,

Your obedient servant,

A MEMBER OF THE PROVINCIAL MEDICAL
AND SURGICAL ASSOCIATION.

Feb. 22, 1842.

ROYAL COLLEGE OF SURGEONS IN LONDON.

*List of Gentlemen admitted Members on Friday,
February 25, 1842.*

Charles Smith, Edmund Henry Peters, Horatio Girdlestone, Joseph Schofield, Henry Norton Shaw, Thomas Patrick Matthew, Richard Tilston, Edward Turner.

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ATTENDANCE OF PHYSICIANS WITH DRUGGISTS.

TO THE EDITORS OF THE PROVINCIAL MEDICAL AND
SURGICAL JOURNAL.

GENTLEMEN,—I must beg leave to call your attention to the "important medico-legal inquiry," as you justly call the coroner's inquest upon the body of Miss Rathbone, at Bath, reported in your valuable Journal of last week. On the melancholy event itself no more need be said; it will, doubtless, act as a warning to the druggist and his assistants. The case assumes importance from the alliance between the doctor and the druggist. It is a most serious matter for the profession, and one which I am sure my brother general practitioners will view with indignation, that the physician, Dr. Watson, attended with a druggist, a Mr. Watts, from the afternoon of Friday until the evening of the Sunday following. When called in haste, consequent upon the mistake in the medicine, it appears in evidence that Dr. Watson met the druggist with his patient, and left him in charge of the case during the night. In the Doctor's own words, "I left Mr. Watts