

ASSOCIATION MEDICAL JOURNAL.

EDITED BY JOHN ROSE CORMACK, M.D.

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NEW SERIES.

TO CORRESPONDENTS.

CLINICAL LECTURES ON SURGERY. We have much pleasure in announcing that at intervals of two or three weeks, a clinical lecture by Mr. Langston Parker, will regularly appear in the ASSOCIATION JOURNAL till the publication of the course which he is now delivering is completed. The lectures will be reported by Mr. James Jaffray, and corrected by the lecturer. The subject of the Lecture to appear next week is, "Retention of Urine, and the Operative measures to be adopted for its relief."

A GENERAL PRACTITIONER (North Staffordshire), ought to get for the forty-four visits and medicine not less than £11. This would probably be "a fair remuneration" from a "bookkeeper in a banking concern": but less would be "unfair", as the visits were but *one daily*, and were spread over *eight months*. If the medicines furnished were costly, an additional charge would be proper.

SPECIAL MEETING OF THE GENERAL COUNCIL AT WORCESTER. Numerous communications reached us last week upon this subject: but as most of them were addressed to the President of the Council, we decided against publishing them, as they did not come through an official channel.

We are confident that the general body of members will excuse the Editor and SECRETARY from expressing any opinion of Dr. Lyon's protest, or of the proceedings connected with it. The principle involved is a momentous one: the personal question is not worth a thought.

THE CHICHESTER BARRACKS are to be converted into a Hospital for sick and wounded soldiers. The services of the civil practitioners of Chichester will no doubt be asked for by the Director-General. ●

We cannot answer the other questions of Dr. M. and others, regarding the civil hospitals to which the sick and wounded have been invited. Can any correspondent give information on this subject?

LETTERS. Many have been received on operative surgery, the army medical department, etc. Their authors will be communicated with early next week.

BOOKS, LETTERS, AND COMMUNICATIONS FOR THE EDITOR AND GENERAL SECRETARY may be addressed, after 25th March, to 37, Russell Square, London.

NOTICE. COVERS FOR THE VOLUMES for 1853 and 1854 may be had at the Office of the Journal, 37, Great Queen Street, London, price 1s. 6d. each. Members in the country can readily obtain them by order to their local Booksellers.

BOOKS RECEIVED. [*An Asterisk is prefixed to the names of Members of the Association.*] 1. *SMITH [W. Tyler, M.D.] The Pathology and Treatment of Leucorrhœa, pp. 217. plates. London: 1855. 2. WILKOT, [John Bramston, M.D.] On the Use of Creosote in Scorbatic Camp Dysentery, pp. 16. London: 1855. 3. ROBINSON, [George, M.D.] On Electro-Lithotrixy, or the application of the Mechanical Force of the Electrical discharge, to the disintegration of Stone in the Bladder. pp. 16. plate. London: 1855. 4. *MAYNE, [R. G., M.D.] An Expository Lexicon of the terms ancient and modern, in medical and general science. Part IV. London: 1855. 5. GANT [S. E., C. E.] Notes and Queries on the Public Health Act 1848, with suggestions for a New Bill. pp. 72. London: 1855.

PARAGRAPHS FROM OUR PORTFOLIO.

I. IMPERIAL PULMONARY APOPLEXY has during the last fortnight been the text of many discussions in professional and non-professional circles. Is the *imperial* a distinct species of pulmonary apoplexy, hitherto unknown to pathologists, and as yet undescribed by any author?

The signs of pulmonary apoplexy from mitral disease had never been shown, or at least had never been spoken of in reference to the Czar; yet, while his body was still warm, Europe was informed that the troubler of the nations had suddenly died of this slow malady! A few days before his death, Nicholas was described as in health, portentously energetic, and unwearied in the pursuit of his ambitious schemes, presenting the image of some infernal king of men turning at bay against the world. Suddenly we were informed that he had died of a disease which, in order to be rapid at its close, must have been long known to his physicians, and which must have disqualified him for the great physical efforts he had been making during the preceding weeks.

Of the various forms of pulmonary apoplexy, would any explain this sudden termination except that arising from encephaloid cancer, when the pleura is torn, and great hæmorrhage takes place, causing sudden death? This variety, says Dr. Walshe, in his *Diseases of the Lungs and Heart*, is

"decidedly rare". Its existence is also incompatible with the previous good health and energy of the Czar. If from mitral disease also, the symptoms would have been long manifest. Nor, so far as we know, is it possible to pronounce that death has taken place from pulmonary apoplexy resulting from regurgitation at the mitral valve, without a *post mortem* inspection of the body. This, when England first learnt the news, could not have taken place: nay, every capital in Europe was convulsed by the shock of the Czar's doom, ere his corpse had become rigid in death.

Pulmonary apoplexy, we admit, is sufficiently obscure to be a fitting cause of death for an Emperor of Russia. There may or may not be recognised anatomical characters in some forms of disease which have received this name; but has the suddenness of the death, with the previous energy and good health of the Czar, ever been exemplified? The term "pulmonary apoplexy" harmonises, however, with the results of the tight lacing from which the late Emperor suffered so severely some years ago, and which it is said that he refused to give up. The term may perhaps be a cloak for the ignorance or knavery of the pseudo-physicians (homœopaths) who attended upon him.

One form of "pulmonary apoplexy", compatible with as sudden a death as this of the Czar, is probably that of which an instance is given by Dr. Watson, in the case of a man dying from hæmorrhage from the lingual artery, in which there were several apoplectic nodules discovered, evidently formed of blood "which had trickled down from the wounded artery through the windpipe, and accumulated in the air-cells."

Another form of suddenly fatal pulmonary apoplexy is that which is known in Italy under the name of *accidente*, and which is generally attributed to a rarefied condition of the atmosphere. It has been described as sometimes prevailing almost as an epidemic, and as consisting in a rapid exudation of bloody serum into the air-cells and rootlets of the bronchi.

Who shall ever be able to tell what caused the deadly engorgement of the imperial lung? Let us, however, thank God that this inexplicable infiltration in the chest of the Czar has enabled all the rest of the world to breathe more freely.

In connexion with the death of the Czar, it is important to record, that *cases of sudden death have of late been unusually prevalent*. For an explanation of this fact, we look to our medico-meteorologists.

"Art is long, and time is fleeting,
And our hearts, though stout and brave,
Still like muffled drums are beating
Funeral marches to the grave."

II. THE ANNUAL MEETING OF THE ROYAL MEDICAL AND CHIRURGICAL SOCIETY was a chilling spectacle. It was sad to see truth energetically suppressed, and to perceive hero-worship relentlessly pitted against fair play. Is this the policy by which the rapid decay of the Society can be arrested? Is this the course to follow if it be desired to