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REPORTS FROM THE FOLLOWING INSTITUTIONS HAVE APPEARED UNDER THE HEAD OF ILLUSTRATIONS OF HOSPITAL PRACTICE.

BROMPTON HOSPITAL FOR CONSUMPTION
CENTRAL LONDON OPHTHALMIC HOSPITAL
CHILDREN'S HOSPITAL
GUY'S HOSPITAL
KING'S COLLEGE HOSPITAL
LOCK HOSPITAL
LONDON HOSPITAL
ROYAL LONDON OPHTHALMIC HOSPITAL
SAMARITAN HOSPITAL
ST. BARTHOLOMEW'S HOSPITAL
ST. GEORGE'S HOSPITAL
ST. MARY'S HOSPITAL
SOUTH LONDON OPHTHALMIC HOSPITAL
UNIVERSITY COLLEGE HOSPITAL

BIRMINGHAM AND MIDLAND COUNTIES EYE INFIRMARY
BIRMINGHAM WORKHOUSE INFIRMARY
BRISTOL ROYAL INFIRMARY
CALCUTTA EYE INFIRMARY
DARTFORD UNION INFIRMARY
LEICESTER INFIRMARY
LIVERPOOL SOUTHERN HOSPITAL
MANCHESTER EYE HOSPITAL
MANCHESTER ROYAL INFIRMARY
NOTTINGHAM GENERAL HOSPITAL
SALOP INFIRMARY
TUNBRIDGE WELLS INFIRMARY AND DISPENSARY
WORCESTER INFIRMARY

as one of the most active promoters of sanitary science. The Society of Scientific Medicine (*Gesellschaft für wissenschaftliche Medizin*) in Berlin also, at a meeting held on November 16th, elected Dr. Richardson a Corresponding Member. A similar honour was some time ago conferred on our worthy associate, Dr. Cockle.

THE LATE WILLIAM THOMAS BELL, Esq., OF GREAT GRIMSBY, LINCOLNSHIRE.

THE record of short-lived genius is a solace to the wounded spirits of surviving relatives, and a stimulus to the emulation of aspiring minds. Medical biography, indeed, cannot have a choicer theme, than the sudden blight of the budding hopes of youthful ambition. Hence the subject of this brief memoir claims a niche in the mausoleum of departed worthies.

The late William Thomas Bell was the second son of John Bell, Esq., Surgeon, and Mayor of Grimsby. His deceased son, who had only just completed his twenty-seventh year, was a young man of fine parts, steady perseverance, and great decision of character. He had enjoyed the advantage of a liberal education at Kingston College, Hull, under that distinguished scholar, Mr. Francis, and afterwards under a private tutor. Such a mind, so cultivated, when transplanted to the metropolitan field of medical and surgical observation, soon made its powers felt, and won golden opinions alike from teachers and fellow-pupils. The profession, to which he devoted himself, and which became the ruling passion of his advancing years, was also his choice from a very early age; for when quite a child, he shewed the greatest anxiety to witness operations. On going to London, he was judiciously placed in the family and under the care of Mr. Adams of St. Helen's Place, Bishops-gate Street, Surgeon to the London Hospital, who has kindly furnished the following interesting particulars of his late protégé.

"Mr. W. T. Bell came to reside with me in October 1848, in order to prosecute his studies in medicine and surgery at the London Hospital. I cannot help stating, that his conduct and demeanour, whilst under my roof, endeared him to all branches of my family. I soon discovered, that his father had carefully grounded him in the elements of his profession. He passed through the various phases of a medical student's life with great credit, and more especially devoted himself to that branch of the profession, in which his talents have recently shone so conspicuously, I mean surgery,—in the operative department of which, as a student, he took peculiar delight. In due course of time, he passed his examinations at the College of Surgeons and Apothecaries' Hall; and was soon appointed House-Surgeon to the Hospital. Here his field of usefulness became more extensive; and the surgeons of the Hospital found that they could place every confidence in his judgment in the management of cases during their absence. This appointment he held for the full term allowed by the rules of the Hospital; and during this period he enjoyed ample opportunities for practising many of the operations of surgery. I need scarcely say, that he fully availed himself of the rich stores afforded by the Institution; and, at the time when many are just beginning to become surgeons on their own account, Bell was really an experienced surgeon, and equal to any emergency. He afterwards went to Paris to perfect himself in the operative branch of his profession; and from the tenour of his letters from that place, I could plainly trace such a keen appreciation of the importance of operative surgery, and such an ardent spirit in the cultivation of it, as, coupled with former studies, rendered him, during his short career at his native place, a blessing to the people of his neighbourhood, as well as to his immediate friends. It may fairly be said of him :

"*Multis ille bonis flebilis occidit.*"

Though most actively engaged of late years in a laborious country practice, his manuscript records of cases bear witness to his zeal in cultivating the literature of his profession. A few of his papers have from time to time appeared in the ASSOCIATION JOURNAL; but his most finished production is a spirited brochure containing a report of "Eight Cases of Lithotomy and Lithotripsy successfully operated upon." Nor was his moral nature out of keeping with his superior intellect. His benevolence was chiefly conspicuous in the relief he imparted to human suffering in his own proper sphere. He was wont to say,—"the rich *will* have medical assistance; the poor *shall* have it." Hence, in obeying the impulses of his generous nature, he exhausted himself in a series of disinterested acts of compassion. Enfeebled by the discharge of his arduous duties,—by long rides, by fastings and watchings, as well as by professional anxieties,—his nervous system succumbed to an ill-timed attack of epidemic fever prevalent in the district. He therefore encountered it under every disadvantage. It was a grave example of the gastro-enteric form of typhoid fever; and, as it resisted all the attempts made to check its insidious ravages, the patient sank on the twenty-first day from profuse internal haemorrhage. With great nervous irritability, he nevertheless had but little delirium throughout; and, when the prospect of death dawned on his thoughtful spirit, he eagerly laid hold of the sustaining hopes and consolations of the Gospel.

Pleasant memories of Mr. Bell's noble and endearing traits of character, both at home and in society, will long live in the minds of his bereaved friends. His rising character, as a professional man, is proved alike by the respect shewn to him when living, and by the general sorrow evinced at his death. He was beloved by all classes of society, and for several days after his decease the shops in Grimsby were for the most part closed. His funeral was consecrated by the tears, not of his kindred only, but also of a multitude, who crowded round his bier to testify their deep sense of the loss they had sustained by his early death.

HUMPHRY SANDWITH, M.D.

1, Albion Street, Hull, Dec. 26th, 1857.

Association Intelligence.

ADMISSION OF MEMBERS, AND PAYMENT OF SUBSCRIPTIONS.

THE General Secretary of the British Medical Association begs to call the attention of members to the Laws regarding the ADMISSION of MEMBERS, and the PAYMENT of their SUBSCRIPTIONS.

"*Admission of Members.* Any qualified medical practitioner, not disqualified by any bye-law, who shall be recommended as eligible by any *three* members, shall be admitted a member at any time by the Committee of Council, or by the Council of any Branch."

"*Subscriptions.* The subscription to the Association shall be One Guinea annually; and each member, on paying his subscription, shall be entitled to receive the publications of the Association for the current year. The subscription shall date from the 1st January in each year, and shall be considered as due unless notice of withdrawal be given in writing to the Secretary on or before the 25th of December previous."

Either of the following modes of payment may be adopted:—

1. Payment by Post Office Order to the Treasurer (Sir C. Hastings, M.D., Worcester), or to the undersigned.

2. Payment to the Secretary of the Branch to which the member belongs.

3. Members residing in the Metropolis and vicinity can make their payments through the publisher of the BRITISH MEDICAL JOURNAL, MR. Thomas John Honeyman, 37, Great Queen Street, Lincoln's Inn Fields, W. C.

PHILIP H. WILLIAMS, *General Secretary.*

Worcester, January 1858.

BIRMINGHAM AND MIDLAND COUNTIES BRANCH:
GENERAL MEETING.

A GERERAL Meeting of this Branch was held at the Hen and Chickens Hotel, Birmingham, on December 11th, 1857; EDWIN BARTLEET, Esq., President, in the chair. There were also present: A. Alcock, Esq. (Smethwick); A. Baker, Esq. (Birmingham); R. L. Baker, Esq. (Bordesley); T. Boisragon, M.D. (Birmingham); G. J. Brown, Esq. (Birmingham); W. Browne, Esq. (Lichfield); E. H. Coleman, Esq. (Wolverhampton); J. M. Coleman, M.D. (Wolverhampton); W. Downes, Esq. (Handsworth); Bell Fletcher, M.D. (Birmingham); J. Fraser, M.D. (Wolverhampton); J. J. Hadley, Esq. (Birmingham); H. Hancock, M.D. (Wolverhampton); J. L. Hobbes, Esq. (Belbroughton); J. H. Houghton, Esq. (Dudley); B. Hunt, Esq. (Birmingham); G. Jones, Esq. (Birmingham); W. Jauncey, Esq. (Birmingham); W. J. Kite, Esq. (West Bromwich); G. B. Knowles, Esq. (Birmingham); G. H. Marshall, M.D. (Birmingham); E. Moore, Esq. (Halesowen); M. H. Morgan, Esq. (Lichfield); L. Parker, Esq. (Birmingham); O. Pemberton, Esq. (Birmingham); H. Roe, M.D. (Birmingham); J. V. Solomon, Esq. (Birmingham); C. Somerville, M.D. (Bloxwich); W. F. Wade, M.B. (Birmingham); C. Warder, M.D. (Birmingham); C. E. E. Welchman, Esq. (Lichfield); H. T. Whittell, Esq. (Birmingham); T. W. Williams, Esq. (Birmingham); C. Yarwood, Esq. (Birmingham); G. Yates, Esq. (Birmingham);—and, as visitors, W. J. Moore, Esq. (H.E.I.C.S.); S. A. Parker, Esq.; and J. F. Woody, Esq. (Tamworth).

CONGENITAL FISSURE OF THE STERNUM: CASE OF M. GROUX.

M. Eugène Groux, of Hamburg, the subject of congenital fissure of the sternum, attended the meeting, and presented his interesting conditions for the inspection of the members. The tendency of the opinions expressed, as to the nature of the pulsatile swelling opposite the third and fourth ribs, was almost entirely in favour of its being the right auricle of the heart—a result mostly in accordance with the views of some of the most distinguished members of the profession who have examined the case.

INJURY OF THE FACE, WITH DEPRESSION OF THE UPPER MAXILLARY BONE. BY J. H. HOUGHTON, ESQ.

Mr. HOUGHTON then read an account of a case of severe injury of the face, with depression of the superior maxillary bone, in which he had raised the part pushed down into the mouth, to the marked relief of the patient's condition, who was unable to protrude the tongue until this was done. The appearance presented by the patient was further illustrated by a photographic drawing. The case was followed by paralysis of the *portio dura* of the opposite side.

Mr. YATES and Mr. PEMBERTON, in the discussion which followed, expressed their conviction of there having been fracture of the bony palate present, in order to account for the dislocation downwards of the part. It did not seem equally clear how the paralysis of the opposite side was to be explained.

The PRESIDENT gave notice that, at the next General Meeting of the Branch, certain alterations in the Laws would be proposed for adoption.

MEDICAL BENEVOLENT FUND.

HAVING lately issued an appeal for pecuniary aid—an appeal which the Committee, and all interested in the Fund's benevolent proceedings, trust will meet with a warm, hearty response—I now give the Minutes of the proceedings of our Committee meeting in November this year: *I can say no more than these Minutes say!* JOSEPH TOYNBEE, *Treasurer.*

At a meeting of Committee, held November 24th, 1857, at New Burlington Street, the sum of £175 was voted.

CASE I. A physician, aged 86 years, formerly practising in the counties of Suffolk and Kent. Voted £10 last month; but, having died before receiving it, an appeal was made to the Treasurer by his daughter to be allowed it for the purpose of burial, etc. From her great respectability and integrity, from the great expense of her poor father's last illness, and her own very limited means, she being a widow with a family to support, the request was immediately granted.

CASE II. A lady, aged 44 years. Five children, between the ages of 19 and 6 years, all at home, and dependent. Without income. Never relieved by the Fund. Husband, M.R.C.S., getting a very small salary at sea. This case was deferred for

further inquiry from last month. Sir J. Forbes and the Treasurer having found that this poor lady was doing her duty nobly, having dismissed her servant, and she and her children struggling dutifully, advanced £15 to pay a list of small tradesmen's bills. This grant the Committee raised to £25. This poor lady, since the grant, has been able to let part of her house, and is up and doing for her family. She writes:—“Dear Sir,—It is with extreme gratitude that I write to thank the Committee for the great interest they have taken in our most distressing case, which, under Providence, has been the means of preserving us from ruin and despair. As soon as I received your munificent gift, I with great pleasure paid all the pressing demands upon me, and shall be able to live comfortably for a few weeks. I have bought shoes for myself and children.”

CASE III. A widow, aged 41 years. Eleven children to support, between the ages of 20 years and 10 months (expecting her confinement in four months), and six buried. Husband, M.R.C.S., just dead; was a union surgeon of sixteen parishes; was kicked by a colt, producing concussion of the spine; rendered helpless, confined to bed several weeks, and just died consumptive, leaving no means. Never relieved before. Voted £50.

A clergyman writes thus:—“Poor Mr. R. stood well as a surgeon in this county; but he had nothing to depend upon but his practice, and, having a very large family to support, he could save nothing; so his wife and children have only to depend upon Providence for protection and support.” We, in hope of receiving more assistance, voted £50 in this case. Was it not well bestowed? Read the following letter of thanks to the Treasurer:—“Honoured and dear Sir,—God Almighty bless you and the gentlemen of the Committee for the most acceptable grant allowed me. I cannot find words in which sufficiently to express my gratitude. I purpose applying the money and the remainder to supply our wants until I should (D.V.) recover sufficiently from my confinement to exert myself for my children by taking pupils. . . . Once more fervently thanking you most gratefully yours —.”

CASE IV. A widow, aged 45 years, in London, needlewoman, in poor health and impaired eyesight, struggling eleven years with four children between the ages of 17 and 12 years; two sons now provided for; two daughters (one in ill health) quite dependent. Relieved three times. Income £20 per annum. Out of employment the last twelve months, and now confined to bed. Voted £10. “With feelings of grateful joy, I beg to acknowledge the receipt of ten pounds. Words are inadequate to expressing obligations to a Society which snatched me and my poor children from utter destruction. Thrown upon the world in a moment by the illness of my husband, I was for a time bewildered, until a kind Providence directed me to dear good Mr. Newnham, whose sympathy has ever pleaded for me during my six years journey of affliction. My earnest prayers are ever offered up to Heaven for each individual member; and that God may bless you is the sincere prayer of —.”

CASE V. A physician, aged 42 years, in London, single, formerly of high standing, and lecturer of a Provincial School of Medicine of eminence; author of a work of repute; lost considerable property in family securities, and maintaining poor relations. Never relieved. Income small and precarious, arising only from literary work. Voted £10.

CASE VI. A single lady, aged 38 years, in London, daughter of a gentleman, M.S.A., who outlived his practice at the West. No income. Never relieved. From the recent death of a very aged mother, has lost a provision. Has the prospect of succeeding in keeping a respectable school. Voted £15.

CASE VII. A widow, aged 52 years, in London, three children, two realising £10 per annum each, the other provided for. Late husband M.R.C.S. and L.S.A. Income precarious, arising from needlework. Relieved three times; in all, £20. Voted £10.

CASE VIII. Two single ladies, aged 23 and 21, daughters of a practitioner, M.R.C.S. and L.S.A., in the country forty years. Lost his practice from deafness and ill health. Gone to Australia. No income. Never relieved. Voted £10; to be placed in the hands of a gentleman who takes charge of a fund for assisting the daughters to emigrate to their father.

CASE IX. The wife, aged 49 years, of a practitioner in the country, M.R.C.S. and L.S.A. One son, aged 17 years, in Australia with his father. Never relieved. Income precarious, arising from nursing children. Desirous to emigrate to her husband. Voted £10; to be placed in the hands of a gentleman who holds her emigration fund.

Here is an extract from her letter:—“I beg to offer you my heartfelt thanks for a remittance of ten pounds towards my passage to Australia; I cannot find words to thank you; it is

indeed a great kindness, a real charity. With much gratitude, believe me", etc.

CASE X. A practitioner before the Act of 1815, aged 73 years; married; three children, who are only just able to support themselves. Relieved once. Income £12 per annum, and the remnant of a practice. To be placed in the hands of a Member of Committee for distribution. £10 was voted.

CASE XI. A widow, aged 79 years, of the Jewish persuasion. Late husband a Member of the Corporation of Surgeons of London, 1796. Two grandchildren dependent on her. Very infirm; had a fracture recently of the condyles of the humerus entering the elbow-joint. Income five shillings and sixpence per week. Relieved once. Voted £5.

CASE XII. A widow, aged 52 years. Two sons: one with diseased heart, quite dependent on her; the other only able to support himself. Late husband a highly respectable practitioner in the country, L.S.A.; many years labouring under dysentery, and ultimately died of cancer of the larynx and oesophagus; all means exhausted. Voted £10.

CASE XIII. A widow, aged 61 years, in Warwickshire, with diseased heart, helpless, and compelled to have a nurse. Three children, married, in Australia, and one to a young surgeon: all unable to render assistance. Late husband M.R.C.S.; much respected; once relieved in dying illness. Income £30 per annum, from an old patient of late husband. Voted £10.

One other case, postponed for more strict inquiry.

NOTE. Besides having the object of obtaining sympathy and thereby funds for our truly noble charity, I publish this report of our proceedings in November, in order that a comparison may be drawn between the system of a society like ours which gives aid through a committee elected by and from the body of subscribers, and to whom it holds itself responsible, and the system of a society where recipients have to apply for the votes of the whole body of subscribers, sometimes numbering many thousands, and with whom the responsibility is so divided as absolutely to cease to exist at all. Look, for only one minute, at the results. I will hazard the statement that our seventeen annuitants (six of whom are provided also with comfortable homes), among whom we divide about £300 a year, and the twelve recipients of our £175 in November, obtained their aid at the average expense of one shilling only each person, without, too, the worry, suspense, excitement, and may I say degradation, of a prolonged canvass. On the other hand, I have evidence to show that in the unfortunate system so usually adopted of each subscriber giving a vote, thousands and thousands of pounds are annually thrown away by the poor candidates and their friends, a system of jobbing in votes is adopted, and canvassing becomes a regular hack business. The rule is, that a poor candidate must not expect to win the first "put up." How should he, when there are sometimes between ten or twenty thousand votes? but he must stand severe fights. Look at the list of successful and unsuccessful candidates in these large polling charities, and it is palpable that the cause of deserving poverty is often trampled under foot by the more noisy and friend-making claimants.

J. T.

Reports of Societies.

ROYAL MEDICAL AND CHIRURGICAL SOCIETY. TUESDAY, DECEMBER 8TH, 1857.

SIR C. LOCOCK, Bart., M.D., President, in the Chair.

A CONTRIBUTION TO THE SCIENCE OF TERATOLOGY. BY HENRY R. SILVESTER, B.A., M.D.LOND.

THE congenital deformity existed in both upper extremities. In the right arm, the radius was entirely absent. The upper part of the ulna and the lower extremity of the humerus were modified to compensate for the deficiency. The defective parts in the hand were the scaphoid, trapezium, and the metacarpal bone and phalanges of the thumb. The pronators, supinators, flexors, and extensors of the radial side of the carpus and of the thumb were absent. The flexors and extensors in the middle of the arm were abnormal, but those on the ulnar side were normal. The hand was fixed in a prone position, and flexed to such an extent that the radial side of the index-finger lay adjacent to the radial side of the forearm. The left arm was more deformed. The scapula was well formed, except that the glenoid cavity presented the form of a hemispherical

eminence. Little more than the lower extremity of the humerus existed, and a small cartilaginous nodule represented the radius. The carpus presented only the pisiform, cuneiform, and unciform; the metacarpus the three inner bones. The little and ring fingers were persistent. The soft parts of both arms presented many interesting peculiarities, and were described in detail.

The following were amongst the conclusions drawn from the facts contained in the paper. A Law of Compensation prevails during the growth of the body in monsters—a certain tendency to render the parts as nearly normal as possible, and to make up by excessive formation for the defective development of an adjoining part. This principle may be shown equally to exist in the animal and vegetable kingdoms. The leading shoot of a plant being cut off, its place is supplied by the development of an adjacent lateral branch. In the same way, when the carpels of fruits are irregularly developed, the defect is remedied by the excessive growth of a corresponding portion. In the animal kingdom, an example may be taken from the subject present. The outer part of the great sigmoid cavity of the ulna is rendered larger than usual by projecting forwards and outwards. It is concave, and the concavity is directed upwards and outwards, and it becomes exactly adapted to the capitellum of the humerus, or that part which usually articulates with the head of the radius. In this way, the integrity of the elbow-joint is to a certain extent maintained, notwithstanding the entire absence of the radius. In the right arm, the median artery, which is usually a small branch of the interosseous artery accompanying the median nerve, compensates for the deficiencies of the ulnar artery by giving off digital branches, and completing the superficial palmar arch. In the right arm, a branch of the interosseous nerve from the median trunk compensates for the absence of the radial nerve, and supplies digital branches on the back of the hand for those fingers which are usually supplied by the radial. The arrest of development or defective condition of the radius, which appears to be the rule in congenital malformations of the human forearm, is not the normal state in brutes. The ulna is the bone which in them is atrophied. In the horse or ox, the ulna is retained only in so far as it is required to strengthen the radius, make the joint of the elbow secure, and give advantageous attachment to certain muscles; it forms what in human anatomy would be called a process of that bone. The hand is maintained in its proper position by the radius. When the radius is defective in length, or absent, or too long, the posture of the hand is abnormal.

The paper concluded as follows:—It having been proved that the malformation of the germ owes its origin to something connected with our peculiar mode of existence, and if, as I have endeavoured to show, the tendency of the laws regulating the formation of the body is to render the parts as nearly normal, and the body as capable of life and existence as possible, it can scarcely be said that monstrosities "offer an apparent exception to the inferences which have been drawn from the animal kingdom in general concerning some attributes of the Creating Power", a theory which has been advocated by an eminent physiologist.

ON THE HISTOLOGY OF THE SUPRARENAL CAPSULES.

BY G. HARLEY, M.D.

The author began by pointing out that the suprarenal capsules could not properly be said to diminish in proportionate size and activity of function with advancing years. He placed upon the table several preparations of suprarenal capsules, taken from individuals of different ages, to prove that their development proceeded at a certain ratio after birth. He moreover stated that, as they did not become proportionately more atrophied in old age than many of the other organs, it might naturally be supposed that they had a certain function to perform in adult as well as in foetal life. Dr. HARLEY then called attention to the great variety of size and shape of the suprarenal capsules throughout the vertebrata, and afterwards proceeded to point out the appearances presented to the naked eye by healthy suprarenal capsules. He denied the existence of any large cavity in the centre of the healthy human suprarenal capsule, and said that when such was found it was the result either of accidental rupture of the medullary substance, or as the effect of disease. He pointed out, however, the existence of a number of small sinuses in the centre of the organ. Dr. Harley said that the cortical and medullary portions of the suprarenal capsules, which are so different in colour, have equally distinct microscopic characters. The former, which constitutes the greater part of the organ, consists of a number

sitions of that most embarrassing class of pelvic tumours, which are not to be accounted for on ordinary and accepted grounds, highly important and satisfactory. Those accustomed like himself to the treatment of diseases of females, would feel with him how much the obscurity and doubt attending investigation of the pelvic tumour alluded to would be cleared away by the novel and excellent practical deductions in Dr. Savage's paper.

Mr. CANTON said the course pursued by Dr. Savage was one he delighted to see followed in all inquiries relating to the art of medicine. First, there was a searching anatomical investigation; secondly, rigorously practical and legitimate deduction; thirdly, the application of principles thus elicited to the elucidation of disease. The reasons given for the more frequent occurrence of "uterino-ovarian" varicocele on the left side, and oedema of the left limb, he quite agreed in. The functions attributed to the "bulb of the ovary"—indeed, that part of the paper altogether—was new to him. As to the homologies mentioned by Mr. Nunn between Dr. Savage's fibro-elastic vaginal ring and the prostate, he felt sure that such analogies applied with far greater propriety between the prostate and uterus. Mr. Canton entered into some details in support of this view, in contrast with that adopted by Mr. Nunn.

The PRESIDENT related a case of traumatic haemorrhage strikingly corroborative of Dr. Savage's account of the vascular distribution in the female perineum, and observed that the source of the extremely obstinate haemorrhage from the small punctured wound found a ready explanation in one of the plates Dr. Savage had brought to illustrate his paper. As regards the function Dr. Savage attributed to the bulb of the ovary, admitting its originality, he was not disposed exactly to concur in it. The Fallopian tube was muscular, and he thought quite equal to the task generally assigned to it without the aid of the erectile bulb. This was an opinion in no way to the disparagement of the paper, which he considered a most valuable one.

Dr. SAVAGE explained, that the paper was intended as an anatomical exposition of certain diseases of females depending on the venous peculiarities of the female pelvis, and, therefore, he would rapidly pass over the subject of homologies, highly interesting as he knew they were, since their discussion was foreign to the object of the paper. Mr. Nunn had mentioned Kobelt's previous description of the bulb of the vagina; but this body was known and described two hundred years ago. He (Dr. Savage) had brought it with the other venous bodies, not before described, into what he ventured to call the erectile system of the female. He had freely entered into his reasons for regarding such tumours as pelvic hematoceles, pelvic varicoceles, labial thrombus, and certain forms of perineal hematoceles, leading to inflammation of the adventitious cyst, and a form of menorrhagia—draining menorrhagia—as connected with the venous and erectile pelvic system of the female; and he was much pleased to find others so entirely agreed with him on those points. The President seemed to undervalue the utility of the ovarian belt, which he said he thought was not wanted for the purpose named in the paper. But there it was, and what other function could be given to it? The President had also said that the figure of a arrangement of fibres of continuation between the constrictor vaginae and sphincter of the rectum was seen only in old books of anatomy. It was precisely in this that the old books were correct. The drawings then in the room were exactly copied from Nature, and showed the same thing. The action of the muscle was the most interesting point to surgeons, and this afforded additional reasons for comparing it with the muscles of the bulb in the male.

Editor's Letter Box.

SACCHARINE DIET IN DIABETES.

LETTER FROM THOMAS WILLIAMS, M.D.

SIR,—My attention has been called, by a mutual friend of Dr. Budd and myself, to certain points in the original paper of Dr. Budd on the proposed use of sugar in diabetes.

At the moment when I drew up the short paper which appeared in the last number of your JOURNAL, I had not the opportunity of reperusing Dr. Budd's observations; I therefore drew upon what I believed to be correct impressions. On referring again to his communication, I find that his proposal refers to *cane-sugar*, excluding every article of diet which con-

tains starch in any of its forms, or such principles as are capable of being converted into glucose or diabetic sugar. Although the facts stated in my last communication are of great value, without reference to theory, I am most anxious to repair the injury which I have, by my misconception, done to Dr. Budd; and promise, in a short time, to publish the results arrived at by the exclusive use of *cane-sugar*.

I am, etc.,
Swansea, December, 1857.

THOMAS WILLIAMS.

SPLINTS IN RESECTION OF THE KNEE-JOINT.

SIR,—I feel it a duty incumbent on us all, as members of an honourable profession, to expose and hold up to well merited contempt those members of it who endeavour systematically to make or improve their position by a detraction of their neighbours. I also feel it a kindness we owe to a friend to remind him of his duty when we see him appropriating to himself the merit of an invention which belongs to another, especially when, as in the present case, his well known modesty of character assures us that thoughtlessness alone can have allowed the merit due to a friend to be in every way unrecognised.

The case to which I allude is that of Mr. P. C. Price, whose communications on excision of the knee-joint, with its after-treatment, have at various times appeared in the medical journals. He recommends the use of a peculiar splint, and enters so fully into its merits that, in his enthusiasm for the apparatus, he forgets its inventor. I will endeavour to supply the omission.

In the winter session of 1855-56, Mr. George Parkinson, now of Grosvenor Street, then house-surgeon to King's College Hospital, invented, and used with marked success, the splint in question. Mr. Price, a friend of Mr. Parkinson, was known at that time to express those opinions of it which usually fall at first to the lot of new contrivances. However, seeing afterwards its great practical utility, Mr. Price, who was a well known advocate among his contemporaries at King's College Hospital of the practical *versus* the scientific surgeon, adopted the splint, and, from his description and advocacy of it, gave an impression, which I know he will feel obliged to me for removing, that he, and not Mr. Parkinson, was the inventor of this apparatus, to the great practical utility of which I can add the testimony of personal experience. I am, etc.,

AN ASSOCIATE OF KING'S COLLEGE, LONDON.
December 29th, 1857.

Medical News.

BIRTHS, MARRIAGES, DEATHS, AND APPOINTMENTS.

In these lists, an asterisk is prefixed to the names of Members of the Association.

BIRTHS.

CADDY. On December 27th, 1857, at Abbey Farm Lodge, Hampstead, the wife of Dr. Caddy, R.N., of a son.

CLAREMONT. On December 28th, 1857, at 1, Thorney Place, Camden Town, the wife of C. C. Claremont, Esq., Surgeon, of a son.

M'CULLOCH. On December 17th, at Heathland Lodge, Hampstead, the wife of George M'Culloch, M.D., of a daughter.

RICHARDSON. On December 26th, at 12, Hinde Street, Manchester Square, the wife of *Benjamin W. Richardson, M.D., of a son, stillborn.

SHAW. On December 22nd, at 25, Henrietta Street, Cavendish Square, the wife of Alexander Shaw, Esq., Surgeon, of a son.

MARRIAGES.

DICK—BLAKELY. DICK, Robert, M.D., to Hannah, eldest daughter of W. Blakey, Esq., of Rochester, at St. Barnabas, Kensington, on December 23rd.

FRANZ—ATKINSON. FRANZ, John C. A., M.D., of Brighton, to Caroline, eldest daughter of the late James Atkinson, Esq., of Russell Square, at Trinity Church, Westbourne Terrace, on December 23rd.

DEATHS.

BAKER, James, Esq., Surgeon, at Staines, aged 56, on December 22nd, 1857.

BAUDENS, M., Inspector of Health to the French Army, and formerly professor at the Val-de-Grace, on December 27th. The cause of M. Baudens' death is stated to have been a disease contracted during the performance of his duties in the Crimea, during the war with Russia.

BRYANT. On December 19th, at Suffolk Villa, near Clifton, Rebecca, wife of John Berry Bryant, Esq., Surgeon to the 4th Middlesex Regiment.

HAWES, William H. B., Esq., Surgeon, on December 16th.

LODGE. On December 26th, aged 8 years, of scarlet fever, Aneurin Thomas, only son of *Llewelyn Lodge, Esq., Surgeon, St. Asaph, Flintshire.

SHAW. On December 28th, at Henrietta Street, Cavendish Square, Alexander John, infant son of Alexander Shaw, Esq., Surgeon.

WARD. On December 14th, at 14, Clapham Rise, aged 66, Charlotte Elizabeth, wife of N. B. Ward, Esq.

APPOINTMENTS.

*RICHARDSON, Benjamin W., M.D., elected a Honorary Member of the Literary and Philosophical Society of St. Andrews, and a Corresponding Member of the Society for Scientific Medicine in Berlin.

PASS LISTS.

APOTHECARIES' HALL. Members admitted on Thursday, December 24th, 1857:—

BRUNTON, William Riddell, East Indies
 DIVER, Thomas, Hampstead
 EDMONDS, Shirley, Woolmer
 EDWARDS, William Watkin, Keston
 HARRISON, John, Gibraltar
 KEENE, Alfred William, Guildford, Surrey
 PAGE, Edward Arthur, Bedworth, Warwick
 PARKINSON, George, Grosvenor Street
 UTERMARCK, George, Guernsey
 WHITE, George Farr, Park Terrace, Regent's Park

HEALTH OF LONDON:—WEEK ENDING DECEMBER 26TH, 1857.

[From the Registrar-General's Report.]

The deaths registered in London, which in the previous week were 1234, declined in the week that ended last Saturday (December 26th) to 1013. In the ten years 1847-56 the average number of deaths in the weeks corresponding with last week was 1227. But as the deaths of last week occurred in an increased population, the average with a view to comparison, must be raised proportionally to the increase, in which case it will become 1350. Hence it appears that the public health was so far improved, that the deaths were less by about 300 than the number which the average rate of mortality at the close of the year would have produced.

The deaths caused by diseases of the organs of respiration were last week 246, whilst the average corrected for increase of population is 271. The decrease in the numbers assigned to this general head (which does not include phthisis) is shown by the results of the last four weeks, which were successively 415, 336, 298, and 246. Considerably more than half of these 246 deaths arose from bronchitis, which carried off 140 persons, of whom 55 were 60 years old and upwards. The fatal cases of pneumonia (inflammation of the lungs) were, last week, 83, which is decidedly below the corrected average for corresponding weeks. Of this number 57 occurred to children during the first two years of life. Of persons who died from phthisis in the last two weeks the numbers were 161 and 115. Of deaths arising from zymotic complaints, only one is referred to small-pox, 30 (which is much less than usual) to typhus and common fever, the same number to scarlatina, 37 to hooping-cough, 9 to croup, 41 to measles. Seventeen, or nearly half of the deaths from measles, occurred in the Eastern division of the metropolis; 4 in the sub-district of St. Paul (St. George-in-the-East), 4 in Mile-end Old Town, 3 in Poplar. The Registrar of St. Mary in St. George-in-the-East registered 2 deaths from measles at Nos. 1 and 2 Sarah's-place; and he adds that eight deaths from this disease have occurred within a short period in the neighbourhood, and that many other severe cases have occurred though without fatal

results. The single case of small-pox, mentioned above, occurred to a dressmaker, aged 37, at 4, Devonshire-street, Christ-church, Marylebone, in which house three cases, though not all terminating fatally, have occurred recently. A figure-maker died of painter's colic and haemorrhage. Of four nonagenarians, three men and a woman, who died in the week, the oldest was 94 years of age, and died in the Workhouse, Borough-road.

Last week the births of 769 boys and 780 girls, in all 1499 children, were registered in London. In the ten corresponding weeks of the years 1847-56 the average number was 1410.

At the Royal Observatory, Greenwich, the mean height of the barometer in the week was 30.083 in. The mean daily reading was above 30 in. on the last five days. The *highest* reading occurred on Thursday, and was 30.30 in. The mean temperature of the week was 47.1°, which is 9.6° above the average of the same week in 43 years (as determined by Mr. Glaisher). The mean daily temperature was above the average throughout the week, and on Monday and three following days the excess was from 10° to 14°. The greatest daily range of temperature occurred on Sunday (the 20th), and was 17.8°; the least on Thursday, when it was 5.5°. The mean daily range of the week was 10.4°. The difference between the mean air temperature and mean dew point temperature was 3.6°. The mean temperature of the water of the Thames was 46.6°. The mean degree of humidity of the air was 86, complete saturation being represented by 100. The humidity fell from 93 on Sunday to 78 on Wednesday. The wind blew from a south-westerly point. Rain fell to the amount of 0.10 in. on Sunday; none was measured during the rest of the week. Wednesday was very warm for the season, and on Christmas day the weather was unusually fine.

SALE OF POISONS BY CHILDREN.

At the Thames Police Office, on Monday last, James Thomas Worley, a shoemaker, aged 24 years, residing at No. 92, Fore-street, Cripplegate, was charged with attempting to commit self-destruction by swallowing a quantity of oxalic acid.

George Ifield, a police constable, No. 158 K, stated that on Saturday evening, at half past 8 o'clock, he was called to the prisoner, who was in Bull-lane, Stepney, supported by a young man, and apparently in great pain. He took a paper from the prisoner's hand, on which were printed the words "oxalic acid—poison." He took the prisoner to the surgery of Mr. Orton, in White Horse-street, Stepney, who gave him an antidote, and the prisoner was then removed to Mile-end Old Town Workhouse, where he had since remained under medical treatment. When he first took the prisoner into custody he admitted that he had swallowed poison, and said he hoped it would kill him.

Mr. SELFE. Who supplied him with the poison?

Ifield replied that a boy nine years of age bought the poison of another boy of the same age.

Mr. SELFE. Children dealing in poison! How is that?

Edmund John Cross, a boy aged nine years, stated that he went by the direction of the prisoner to the shop of Mr. Hutchins, chemist, in the Old-road, Stepney, on Saturday, for a pennyworth of oxalic acid. A boy served him with it.

Mr. SELFE. Did the boy ask you what it was for?

Witness. Yes, sir, and I told him it was to stain boots. He gave it to me over the counter. The prisoner is my cousin.

Mr. SELFE. Did you see the prisoner dissolve the oxalic acid in water, and swallow it?

Witness. I saw him "scrunch it", and then put it in his mouth in small pieces and swallow it.

George Foster, a boy about the same age as last witness, said that he sold the poison, and he said it was to finish off boots. He knew the boy Cross before, and he had come to him with a bad arm.

Mr. SELFE. You had better not sell poisons to any one again. Does your master allow you to sell poisons and to prescribe for persons with bad arms?

Witness. Not as I know of, sir.

Mr. SELFE. Don't you sell poisons again.

Mr. Hutchins, the master of the boy Foster, said he did not allow him to sell medicines of any description, or to prescribe for patients at any time. [Laughter.]

Mr. SELFE. A boy not ten years of age ought not to be allowed to be in a shop where there are poisons.

Mr. Hutchins. It was very wrong in the boy to sell oxalic acid or anything. He did it early in the morning, before I came down stairs.

MR. SELFE. I hope you will not allow him to sell anything again in the shop. I repeat it is not safe for him to sell anything where there are poisons.

MR. HUTCHINS. I will take care nothing of the kind occurs again. The prisoner did not take enough to destroy life. He took about a drachm, and he vomited directly, which saved him.

MR. SELFE remarked that the prisoner could be committed for trial and severely punished for attempting the crime of self-murder; but in consideration of the punishment he had already undergone, his contrition, and his promise not to renew the attempt, he would permit him to be discharged.

TO CORRESPONDENTS.

POSTAGE OF MANUSCRIPT AND PRINTED MATTER.

Any amount of manuscript or printed matter, singly or together, provided it contains nothing in the form of a letter, is transmitted through the post, in packets *open at the ends*, at the following rates: not exceeding 4 ounces, one penny; above 4 and not exceeding 8 ounces, two pence; above 8 ounces and not exceeding 1 pound, fourpence; for every additional half-pound or under, two pence.

TO CONTRIBUTORS. The Editor would feel glad if Members of the Association and others, would cooperate with him in establishing as a rule, that in future no paper for publication shall exceed two pages of the Journal in length. If the writers of long communications knew as well as the Editor does, that lengthy papers *always* deter the reader from commencing them, this great evil would never arise. Brevity is the soul of medical writing—still more than of wit.

ANONYMOUS CORRESPONDENTS should always enclose their names to the Editor; not for publication, but in token of good faith. No attention can be paid to communications not thus authenticated.

NOTICE.—DR. WYNTER will feel obliged if the Associates will address all Post Office Orders in payment of Subscriptions, to the Publisher, Mr. THOMAS JOHN HONEYMAN, 37, Great Queen Street, Lincoln's Inn Fields, London, W. C., "Bloomsbury Branch"; and he would also feel obliged by their sending all communications respecting the non-receipt of the Journal, to the same address; as both these matters are out of the province of the Editor.

Communications have been received from:—DR. T. WILLIAMS; DR. SOUTHAM; MR. SOUTHAM; DR. HUMPHRY SANDWITH; MR. J. H. HOUGHTON; DR. DAY; DR. HAYES JACKSON; MR. PEMBERTON; MR. BOOTH EDDISON; DR. C. W. GRAHAM; MR. LL. LODGE; MR. T. P. SMITH; DR. P. H. WILLIAMS; MR. O. PEMBERTON; DR. H. VERNON; DR. G. G. ROGERS; and DR. BURD.

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