CATHETER FEVER.

SIR.—As a brief commentary on a surgical question, propounded by an eminent physician, kindly allow a general practitioner to make a few observations, by relating a case which occurred in his own practice, and which he will take the

relating a case which occurred in his own practice, and which he will take the liberty of calling "Catheter-neglected Fever."

On March 26th, 1867, I was requested to go a few miles into the country to see a man who had been ill for nearly a month. To my surprise, on my arrival at his house, as he had been under medical treatment, I found him with a distended bladder, running over; in a state of restless delirium, with a with a distended bladder, running over; in a state of restless defiritin, with a pulse quick and small, and clammy perspiring skin; with an odeur surrounding him to be felt, rather than smelt. In fact, he appeared to be at the point of dissolution. Not suspecting such a condition, I had gone without a catheter, and had to return home to fetch one; this took about an hour-and-acatheter, and had to return home to fetch one; this took about an hour-and-ahalf. Having obtained the necessary instrument, I had some difficulty in passing it, in consequence of his delirium; however, having succeeded, a large quantity of water was drawn off, and then I tied the instrument in the bladder (it was a silver-plated catheter), and plugged it with a quill; giving his wife directions to remove the plug every few hours, to allow any accumulated water to escape. The next day, he had decidedly improved. On the 29th, I removed the catheter; it required to be passed on the 30th and 31st, from which date he was able to empty his bladder without assistance, making a good recovery, and living in health and strength till April, 1881, when he died in the seventy-eighth year of his age, of cystitis and uræmia, not even now having the chance of dying of catheter fever, for his friends did not send for assistance till too late; he having, however, lived just over sixteen years from his first attack in good health.

As a general practitioner in the country, and, of course, therefore, an ignoramus, perhaps it may be permitted me to hint—just to hint an opinion—that Sir A. Clark has discovered what may be called a "mare's nest, quite empty;" and that Sir H. Thompson and other gentlemen have only been too

empty;" and that Sir H. Thompson and other gentlemen have only been too polite to say so plainly; and, if allowed, I would suggest the name "Catheterneglected Fever," as more appropriate than "Catheter-Fever," being more likely to have the effect of directing attention to the danger of neglecting proper treatment till too late.—I am, sir, yours truly,

JOHN GABB, M.R.C.S.E., etc.

PSORIASIS PALMARIS SYPHILITICA.

SIR,—In reply to the question of "M.B., C.M.," the treatment depends very much upon the age, so to speak, of the disease. This cruption will frequently show itself in quite the early stages of the disease, co-existent with other papular or squamous eruptions, and then requires a treatment similar to that followed by your questioner; but if this cruption appears at a later period, when it is probably the only visible manifestation of disease, the treatment will resolve itself into tonics, Donovan's solution, abstinence from alcohol, and locally chrysophanic acid ointments, or red iodide of mercury ointment.

If "M.B., C.M.," will give ten minim doses of Donovan's solution ter. die, and an ointment, ten or fifteen grains to the ounce, of either chrysophanic acid, or red iodide of mercury in vaseline, I think he will be pleased with the result.—I remain, faithfully yours,

G. Houlton Bishop.

sult.—I remain, faithfully yours, G. 11 and 12, Clement's Lane, London, January 2nd, 1884.

Sir,—In answer to the questions of "M.B., C.M.," in your issue of 29th ult..

I beg to say that I have been getting very satisfactory results lately in cases of above affection from the local application of oil of cade, coupled with the of above affection from the local application of on the sate, coupled with the internal administration of arsenic and iodide of potassium.

Rlackbool.

GEO. O. KINGSBURY, M.A., M.D.

ALKARAM. In reply to Mr. Jeffries of Chesterfield, Mr. Francis Toulmin (Upper Clapton) writes: The following is the formula I have used. I cannot recollect where I obtained it; but I have had it frequently prepared when I had a surgery. B Acid carbolic. Il viij; ammon. sesquicarbon. 3ij; pulv. carbonis ligmi. 3ij; olei lavandure Il vij; tincturæ benzoine comp. 3j; liq. ammon. fort. q. s.

Misce bene.

HOUSEMAID'S KNEE.

SIR,—I was recently consulted for the above complaint, by a young woman, who stated that the swelling, which was very considerable, but free from pain, had come on in two days. The size of the bursa (the lower one) was such as to allow but very slight flexure of the knee, the tumour completely overlapping the patella on all sides. There were no symptoms of inflammation, even rough manipulation failing to produce pain. I emptied the sac of about four ounces of clear mucilaginous fluid, by means of a small incision with a tenotome in the lower centre; and the firm application of a roller wound the tome, in the lower centre; and the firm application of a roller round the knee, at first above and below, and gradually surrounding the opening, over which I applied a pad of lint, and bound up the whole securely. In three which I applied a pad of lint, and bound up the whole securely. In three days, notwithstanding this pressure, the bursa had filled again, and, on the fourth, was as large and painless as before. I now determined to set up inflammation in the sac, and bring about adhesion of its walls, by introducing a seton, which I easily accomplished by means of two small incisions with the tenotome, drawing six threads through them with an eyed probe, knotting them together in front. The seton, which was drawn through every day, and had a pad outside, tightly bandaged down, produced the desired pus, with very little pain, and, at the end of a week, I was enabled to withdraw it, to find the bursa completely solidified. I had ordered the girl to continue her daily household duties, except if attacked by severe pain, which never occurred.

I record the case, simple as it is, on account of never having met with a "housemaid's knee" so large, so quickly formed, and so free from inflammation; as the treatment (well adapted to ganglion) would have probably been tried by any of your readers.—Yours truly,

Lamberhurst, Kent.

JOHN J. MARSHALL, L.R.C.S.I., etc.

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BOOKS, ETC., RECEIVED.

The Physiological Factor in Diagnosis; a Work for young Practitioners. By J. Milner Fothergill, M.D. London: Baillière, Tindall and Cox. 1883.

The Field of Disease: A Book of Preventive Medicine. By B. W. Richardson, M.D., LL.D., F.R.S. London: Macmillan and Co. 1833.

Wiesen as a Health Resort in Early Phthisis; With Directions for Clothing, Diet, and Exercise in the Swiss Alps During Winter. By A. T. W. Wise, M.D. London: Baillière, Tindall, and Cox. 1883.

Plant Analysis, Qualitative and Quantitative. By G. Dragendorff, M.D. Translated from the German. By Henry C. Greenish, F.I.C. London: Baillière, Tindall and Cox. 1883.

Pocket-Book of Physical Diagnosis of the Heart and the Lungs for the Student and the Physician. By Edward T. Bruen. Second edition revised, with additional illustrations. Philadelphia: P. Blakiston, Son and Co. 1883.

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