

## MATERNAL IMPRESSIONS.

Mr. CHARLES VOKES (Birmingham) writes: A few weeks ago I attended Mrs. M. during her fourth confinement. After the child was born, I found that the index, middle, and ring fingers of one hand were webbed. When the mother noticed them the next day, she told me that when she was nearly half her time gone, one of the pigeons which her husband kept in the yard flew on to her shoulder; it startled her a little at the time, but not very much, and thought no more about it, and was very much surprised to find the child's hand as described.

Dr. G. A. ARRATH requests us to state that, in addition to being a graduate of the University of Heidelberg and a Licentiate of the Apothecaries' Society of London, he also is a Licentiate of the Royal College of Physicians of London.

## TYPHO-MALARIAL FEVER.

I AM glad to find so good a discussion of the subject of typho-malarial fever in your issue of February 13th. My experience in South Africa leads me to believe that the very name enteric, which is given to any fever in this country, is not the enteric of Europe. It is a malarial fever, and, when complicated with enteric lesions, becomes very infectious, often complicated with dysentery, enlargement of liver and spleen; and, in one case, both lungs were found implicated in the general congestion, the right being gangrenous. This very fatal form of fever is well known in this country, cases proving fatal in a few days without perforation. Even in these cases the spleen is found enlarged, and when there is an increasing admission from simple continued fever, several of these cases are seen to crop up by change of disease, and I find that quinine, given as a prophylactic before the fever season sets in, has checked it completely, in such hot-beds as Rorke's Drift, of this fever. The antiseptic treatment of the discharges from these patients will tend greatly to lessen the secondary cause of this disease, which resembles more nearly the enteric of Europe.

## ASEPTIC CATHETER FOR WASHING OUT THE BLADDER.

Dr. J. FOULIS writes: In using my instrument, if Mr. Penny will only turn on the tap controlling the antiseptic reservoir as soon as the catheter enters the bladder, so that the urine and antiseptic lotion may escape together from the end of the instrument, he will find that, although the patient may very violently cough or sneeze, air cannot enter the bladder through the instrument as long as the antiseptic solution is flowing. This simple precaution makes my instrument absolutely safe as regards the entrance of air into the bladder after the urine has ceased to flow from the end of the instrument. It is the surgeon's fault if the catheter be not perfectly clean or aseptic before it enters the bladder. After it has entered the bladder, an intelligent control of the tap of the antiseptic reservoir will completely prevent the possible dangers to which Mr. Penny has referred.

## A CASE FOR GENERAL SYMPATHY.

Mr. HENRY C. BURDETT writes: It may be within the remembrance of your readers that, in 1883-84, I brought under their notice the distressing case of the wife and two small children of Dr. Cedric H. Sturford, B.A., a member of the Medical Department in British Guiana, and that about £500 was collected, and invested for their benefit. Dr. Sturford's residence in a very unhealthy district (La Retraite) brought on a serious illness, which produced such an effect on his nervous system, that he lost his reason, and has since died. The interest on the sum raised only produces £36 a year, and Mrs. Sturford is striving to maintain herself and her children by giving lessons in singing, for which she is exceptionally well qualified. No doubt people who want their children to sing well would be glad to avail themselves of an opportunity of having them taught from the commencement by one of Signor Randegger's pupils, which Mrs. Sturford is. Her terms are five shillings a lesson, and all further particulars may be obtained by applying direct to Mrs. Sturford, 43, Minusa Street, Fulham Road, S.W.

I desire to thank you once more, on Mrs. Sturford's behalf and my own, for the great assistance you have kindly rendered in this matter, and I hope that those who have children of a suitable age will give Mrs. Sturford a trial, in their own interests as well as from feelings of sympathy.

## ALCOHOL IN HOSPITALS.

Mr. R. KERSHAW, Secretary to the Central London Throat and Ear Hospital, writes: Referring to the letter of Mr. George Sturge under the above title in your issue of March 27th, may I be allowed to place on record in your JOURNAL that the authorities of this hospital, although making no pretence to dogma on the question of temperance, have carried on a successful practice, with a low rate of mortality, without the use of alcohol?

The medical officers agreed to adopt this practice at the suggestion of the senior surgeon on the opening of the in-patient department in 1877, not from any restriction placed on them by the committee in this respect, but from the fact that, while alcohol might be considered at least a predisponent in the causation of many of the special forms of disease here received, it was found to be seldom necessary as an aid to remedial treatment. One thousand three hundred and eighteen in-patients have been admitted in the ten years ending March 25th, 1886, and the total cost of stimulants has amounted to £10 14s. 2d. In the past year, £1 1s. 9d. was the expenditure on 238 patients, and the amount was credited to three patients, one—a tracheotomy case—having port-wine administered; a second—carcinoma with paroxysmal dyspnoea, brandy; and the third, specific ulceration of the larynx with dysphagia of solids, stout to a small amount, that is, a pint and a half in all. The death-rate has been 2 per cent.

## RURAL SUPERSTITIONS.

T. A. C. writes: A curious incident occurred to me the other day, illustrating the hold that superstition still has over the poorer classes in country districts. I was called to see a child, about three years old, who had had the ill luck to have her clavicle fractured. After having carefully put up the fracture in the orthodox way, I was naturally somewhat disgusted on my next visit, at finding the child's arm hanging free, and the bandage reapplied in a very domestic fashion. The mother's explanation was, that the child had disarranged the dressing in bed, and they had put it on again as best they could. As a matter of fact, it afterwards transpired that a spiritualistic friend had dropped in, and, seeing the child, suggested an easy and speedy method of cure. In accordance with his advice, the bandages were removed, and a local "medium" was brought to rub, and spiritualise into its original integrity, the injured bone. This incident did not surprise me as much as it might have done, had I not known that charms for ringworm and erysipelas also enjoyed a high reputation among the same classes.

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## BOOKS, ETC., RECEIVED.

- The Springs of Conduct: an Essay in Evolution. By C. Lloyd Morgan. London: Kegan Paul, Trench, and Co. 1885.  
Reference Handbook of the Medical Sciences, embracing the entire range of Scientific and Practical Medicine, and Allied Science. By Albert H. Brick, M.D. New York: Wood and Co. 1886.  
Transactions of the Obstetrical Society of London. Vol. xxvii for 1885. London: Longmans, Green, and Co. 1886.  
Prison Despotism: a Personal Narrative. By Dr. McCook Weir. London: National Publishing Company. 1886.  
Method of Case-Reporting for Clinical Clerks. By T. Churton, M.D. Leeds: McCorquodale and Co. 1889.

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