

minute, then less frequently, or in diminished doses, and liquor ammoniac acetatis (concent.) in from 10 to 15-minim doses. I add iron if the secretion begins to become abundant or watery, and if cyanosis threatens I give iron only. I order a diet of milk every three or four hours, and toast-water between times. I especially carefully avoid all stimulants, for the reason that all inflammatory disorders require depressant not stimulant treatment. Finally, I never take a temperature.

#### THE EFFICACY OF VACCINATION.

DR. CECIL DIGBY (Hednesford) writes: Until reading the articles in the BRITISH MEDICAL JOURNAL on the Royal Commission on Vaccination, I was unaware that the want of belief in the efficacy of vaccination as a prevention of small-pox was still so widespread; the following facts go some way in proving its usefulness. In the town of Lagos, West Africa, numerous cases of small-pox occurred every year; towards the middle of 1884 and during the following years a very thorough system of vaccination was carried out by means of house-to-house vaccination throughout the whole town, and inspection and vaccination of all unvaccinated strangers at the different canal landing places. This resulted in the number of cases falling in 1884, to 80; in 1885, to 7; in 1886, to 3; in 1887, to 1; and in 1888 there were no cases; the disused small-pox hospital being used as an asylum for lepers. In 1887, 55 Houssas (native constabulary) formed part of an expedition sent inland; I had previously examined and where necessary vaccinated or revaccinated 54 of these men; the expedition was three months away and passed through several native villages in which small-pox was present, with the result that the one man not inspected before starting was attacked by small-pox, the others being unaffected.

#### TRAUMATIC HEMATOCELE; CASTRATION; RECOVERY.

MR. MONTAGUE D. MAKUNA, M.R.C.S. Eng., L.R.C.P. Lond., Lic. Med. Bomb. Univ. (Treherbert), writes: A young man, aged 23, came under my observation with a scrotal tumour of four months' duration, caused by an accident. Having ascertained its nature, I injected cocaine hypodermically along the line of incision. The cut was painless; clots were removed, cavity washed with Sanitas lotion and plugged with lint. There was hydrocele of the cord, which was soon cleared away by the prick of a scalpel. Within a few days the cavity was refilled with clots, which were again removed, cocaine being freely used to render the operation painless, perchloride of iron applied to check oozing of blood, and the cavity plugged with lint. Unfortunately, it proved of no avail. On February 18th the patient was given chloroform, and with the assistance of Dr. A. Cook, of Cardiff, the incision was extended, and the testis found diseased and filled with clots. The cord, which was healthy, was tied with carbolised silk and cut. The sac was torn out from above downwards from the scrotal tissue without difficulty. This saved the hæmorrhage and the trouble of ligaturing the vessels, only one requiring torsion. The surface of the wound was freely dusted with iodoform with an insufflator and the edges brought together by five silver sutures. The drainage tube and the cord ligature were brought out together at the lowest end. The scrotum was covered with iodoform wool and bandaged. The drainage tube was removed the fourth day, no discharge having been observed, and the first dressing and sutures removed the eighth day. The ligature came away on the twelfth day, and the wound healed up by the first intention, the lowest part only requiring three dressings. The patient was discharged, having made a complete recovery.

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#### BOOKS, Etc., RECEIVED.

Collected Contributions on Digestion and Diet. By Sir William Roberts M.D., F.R.S. London: Smith, Elder, and Co. 1891.  
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The Modern Antipyretics. By Isaac Ott, M.D. Easton, Pa.: E. D. Vogel. 1891.  
The Watering Places of the Vosges. By Henry W. Wolff. London: Longmans, Green and Co. 1891.

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