

## TREATMENT OF POST PARTUM HÆMORRHAGE.

SIR,—I have carefully perused Mr. Bassett's communication in the JOURNAL of November 26th, but, to my mind, it is extremely indefinite upon the most salient point; viz., how the pressure upon the abdominal aorta should be conducted; and no doubt Mr. Bassett will be kind enough, in a forthcoming number of the JOURNAL, to answer the three following questions, for the edification of those interested in the subject. 1. Should the pressure be complete or incomplete; or, in other words, should it be applied so as to entirely arrest the further flow of blood from the aorta, or only to modify the same? 2. How long should such pressure be kept up, having a due regard to the proximate and remote condition of the patient? 3. What is the exact spot where the pressure should be applied?—I am, etc.,  
Skirlaugh.

CHARLES SOLOMAN.

MENS CONSCIA RECTI.—The question put is so entirely a legal one, depending upon the interpretation of the agreement, that our correspondent should certainly consult his solicitor on the subject.

## PILOCARPIN.

SIR,—Your issue of the 22nd ult. has just come to hand. In it I find a question as to the best solvent for pilocarpin. Last year, in Afghanistan, I got some of the nitrate of pilocarpin, but from ill health did not experiment with it much. Here I use it (the same) very constantly in bad cases of remittent fever and other febrile conditions associated with hyperpyrexia, with the happiest results. I use a solution in plain water, one grain to one ounce, and find that it keeps its properties for a month, and can be confidently used hypodermically.—Yours faithfully,  
GEORGE A. HARRIS, Surgeon B.M.S., Civil Surgeon.

Backergunge, E. Bengal, India, November 14th, 1881.

MR. F. B. MONEY COUTTS.—1. Taking the facts as stated, the medical man will hardly fail to draw the right lesson from them. There is not complete accord of opinion as to the danger of the propagation of puerperal fever under the conditions described. There are many sources of danger whence danger may come; those which seem the most obvious are not always the real source. 2. It is difficult to see how the public can be adequately instructed in matters of this kind. 3. We believe that cases of the kind are not nearly so frequent as they were some years ago. A large proportion of the mortality from "puerperal fever," is due to inherent conditions of childbed, and in no way to infection conveyed from without.

DR. MURRELL'S CASE OF DIABETES, AND THE INFLUENCE OF BETHESDA WATER. SIR,—In your issue of the 26th ultimo is reported a case of diabetes mellitus of a typical kind, in which it would appear that some influence upon the course of the case was exerted by the Bethesda water administered in very large quantities. I regret not having at hand reports of the analyses published from time to time of the various mineral waters reported to be of service in the treatment of diabetes; and there can be no doubt that the use of these, aided by change of air and climate, is a most potent help, and in fact very often affords a momentary cure, to sufferers from this disorder; for very many leave Carlsbad, and some Neuenahr, with no trace of sugar in the urine, and with some gain of strength and substance, in spite of the mentally depressing effect the waters always have.

From my recollection of the composition of the Bethesda water, I should place it a little above that of Neuenahr, and a little below that of Carlsbad, in the scale of utility. But people should bear in mind that the advantages gained by drinking them at home cannot for one moment equal that acquired upon the spot whence they issue fresh from the ground; whilst change of place is everything to a diabetic who has any strength left, only provided that this change be not at the seaside. Upon this point, let the case of Baron Haymerle be noted. That the patient, whose case Dr. Murrell reports, died of acetonaemia, may be questioned; his age, and the report of the *post mortem* examination, would point rather to tubercular disease of the brain, or to some other form of brain-lesion to which diabetics are prone. Acetonaemia occurs most frequently in those who live luxuriously, and who will not muzzle their appetites; also fatid, sour, and unwholesome perspirations are either always present or are easily excited, especially at night; their urine, too, contains often very little sugar.

Dr. Murrell's remark that the patient's death was accelerated by the strictness of the hospital diet, seems fully justified by the report; and I would here remark that diabetics must not be kept too low, but should be allowed wine and some little bread of good quality; and, if white bread be used, let it be toasted. Bran-bread and specially prepared biscuits afford little more nourishment than chopped straw, and, even in extreme cases, these reappear as sugar, along with everything else taken.

Let me, however, refer your readers to Professor Seegen's works, from which they will gather that the treatment of diabetes and glycosuria can be modified according to the stage of the disorder and the patient presented to us.—Believe me, sir, yours obediently,  
FREDERICK SIMMS.

6, Mandeville Place, W., December 5th, 1881.

DR. EDWARD B. AVELING requests us to state that he is not a Bachelor of Science, but a Doctor of Science, of the University of London.

## THE DRY-EARTH SYSTEM.

SIR.—I should be much obliged if any of your readers, having practical experience as to the adoption and working of the dry-earth system, would be good enough to favour me with any information they may possess on the point, either directly or through the columns of your JOURNAL; also as to the best form of dry-earth closets, both for outside and indoor use. The district in which it is proposed to be adopted is a semi-urban one, containing about four thousand inhabitants, with an acreage of eight to nine hundred; and the central authority purposes supplying dry earth, and undertaking the scavenging of the closets.—I am, sir, yours truly,  
S. WELLESLEY COOMBS, F.R.C.S.

Worcester, December 5th, 1881.

J. A. C. (Waterfoot).—We think our correspondent perfectly right, and that he might find precedent for it; and that the course which the secretary wishes him to take is one to which he should not submit.

THE following is from the *Malvern Advertiser*, November 12th, 1881, and is rather a brilliant piece of writing.

"By the favour of A. Henderson, Esq., M.R.C.S., of Cranfield, Malvern, we have been enabled to see an impression of the very handsome large bronze medal, cast in commemoration of the International Medical Congress, London, 1881, which has been presented to him by the Secretary of the Congress, as an official recognition of Mr. Henderson's professional status. The one side of the medal bears an allegorical group, and the inscription: 'International Medical Congress, London. James Paget, Pres.; William Mac Cormac, Hon. Sec. Gen., 1881,' and on the reverse side an excellent portrait of Her Majesty, inscribed, 'Victoria, Queen of Great Britain and Ireland, Empress of India.'"

## THE CUSTOM OF EAR-BORING.

SIR,—Can you kindly refer me to any medical authority, British or foreign, who has treated on this widespread custom, of boring the ears, as a remedy against sore eyes. I read, in *The Life of Cardinal Mezzofanti*, by C. W. Russell, D.D. (London, 1863. Chapter xiv, pp. 379, 380) this statement: "Mezzofanti, from his childhood, had worn earrings, as a preventive, according to the popular notion, against an affection of the eyes, to which he had been subject." In Germany, boys have their ears bored when very young, it being considered very beneficial for the eyes to wear gold rings in the ears. Has this practice any anatomical foundation, for extension and adoption, or not?—I am, sir, yours faithfully,  
London, November 29th, 1881.

MARY BARKER.

\* \* The custom of ear-boring, still occasionally met with in this country, especially among the seafaring poor, is doubtless founded on the very long-established principle of counterirritation; consequently it might possibly benefit certain inflammatory eye-affections, its value being proportional to the degree of irritation set up. The greatest benefit would be obtained by wearing rings of some such inferior metal as would cause long-continued inflammation. In no case, however, would it equal that of a seton, or of a blister behind the ear. The benefit would, however, cease directly the rings could be worn with comfort.

COATES.—We are sorry the letter was not published. The facts stated there have frequently been referred to in these columns, and probably it would serve no useful purpose to repeat them.

## SPONTANEOUS EVOLUTION.

SIR,—One morning lately, I was called up to drive a few miles to what I expected to be an ordinary labour. On arrival, I found that there was a midwife in attendance, and that the left arm of the child was presenting externally as far as the elbow, and of a deep violet colour. With charming candour, the midwife acknowledged that for some time she had thought that something was wrong, but that she had decided to give nature a fair chance before sending for help. Nature had availed herself of the interval to drain away all the liquor amnii; so that, on attempting to turn, I found it impossible to reach the feet, as my arm was completely numbed by the powerful uterine contractions. At last I was compelled to desist, though my efforts to alter the position of the child, so as to bring the feet within reach, caused the shoulder to recede from the pubes, on which it appeared to be resting. I went downstairs to write a note to a friend to bring some chloroform; and had scarcely sent it off, when the midwife called to me that the child was born. In fact, the child was lying in the bed dead, and the placenta followed with the next pain.

I have seen a similar case at the seventh month; but this was at full term, and it seemed interesting from the fact that so little interference had enabled the labour to be concluded. The woman had had labour-pains for some days, and the neighbours were sure that the arm had been down for at least three and a half hours before my arrival.—I am, etc.,  
J. B. E.

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