TREATMENT OF NOCTURNAL INCONTINENCE OF URINE.

TREATMENT OF Necturnal Incontinence of Urine.

It,—Nitric acid with belladonna, after meals, twice daily. No schooling; simple diet; attention to habits.—I am, sir, yours obediently, Another Member.

Has your correspondent ever tried benzoic acid (see Squire's twelfth edition of British Pharmacopeia, p. 6), for incontinence of urine? If not, I would venture to suggest the trial, either with or without belladonna. I have many times given it with successful results; and, when the too frequent micturition is put right, 'then let a strychnine and iron tonic follow, and the cure is complete. In children who "wet the bed", it is first-rate.—I am. sir. yours respectfully. wet the bed", it is first-rate.—I am, sir, yours respectfully, 46, Ann Street, Birmingham, December 12th, 1882.

STARTLED.—We should say that it is untrue; but our correspondent would, perhaps, do well to communicate with the Chairman of the Medical Reform Committee, and explain precisely his doubts or difficulties.

LOCAL USE OF TINCTURE OF PERCHLORIDE OF IRON.

Local Use of Tincture of Perchloride of Iron.

In the recent correspondence in your columns respecting the local treatment of erysipelas, no one, I think, has referred to the use of tincture of perchloride of iron. Some years ago at Guy's, it was the custom to apply it in all cases of facial erysipelas amongst the casualty patients. Next day, they generally returned much improved, and anxious to have it reapplied. Two or three paintings, as a rule, were sufficient to make the skin shrivel up, and resume its ordinary condition, in much the same way as Dr. Spender describes the tannin solution to act. The iron, however, has one disadvantage, that of imparting to the skin a conspicuous brown colour; and, therefore, in this respect, the tannin may be preferred.

It should be borne in mind that much of the good effect may after all be due to the rectified spirits of wine contained in both of these preparations, as well as in the tincture of iodine which some of your correspondents have so strongly recommended. The Medical Digest, I see, has several references to the use of tincture of iron in this disease; but, without the journals, I cannot learn whether any of these describe its local application.—Yours truly,

GEORGE ABBOTT.

Tunbridge Wells.

Tunbridge Wells.

A HOSPITAL STUDENT is quite mistaken in the inference which he draws; such persons are liable to be prosecuted.

A Fellow (Liverpool).—Mr. Luther Holden resigned his seat as an Examiner at the College of Surgeons, not as a member of the Council. At present, there is no death vacancy.

MEDICAL CLUBS

MEDICAL CLUBS.

IR,—Can any member or reader tell me of a suitable and reliable club or society that I can join, so that, in case of illness, I may be drawing even sufficient to pay a locum tenens? If illness were now to happen to me, I should run a great risk of losing my practice, and certainly those dependent on my labours would starve. I have been anxiously waiting to see our medical club started, but I fear that it is as far distant as ever. I inclose my card.—I am, sir, yours truly, L.R.C.P.Edin.

A STAFF-SURGEON.—The late Sir James McGrigor, Bart., was allowed by his sovereign to wear the Turkish Order of the Crescent for the part he bore in the Egyptian campaign; he was three times elected Lord Rector of the University of Aberdeen.

SHIP-SURGEONS.

Ship-Surgeons.

Ship-Surgeons.

Ship-Surgeons.

Ship-Surgeons.

Ship-Surgeons.

Ship-Surgeons and any side and support on board one of their vessels are very light. They consist in attending to any sick amongst the passengers and crew, making a daily health-report to the captain, inspecting ship daily with captain and senior officers, and seeing generally to the sanitary condition of the ship. On entering a port, the surgeon has to receive the "health-visit", and report to the medical officer of the port the condition of the passengers and crew, whether any fever exist on board, or any death has occurred, at the same time handing him the bill of health from the last port.

Practically, the surgeon has the greater part of every day to himself, and he generally finds that he has too much leisure. The accommodation is good, the surgeon always having a cabin to himself, which in most of the ships is spacious and conveniently fitted; I am speaking of the West India Mail steamers. In the cargo-boats, the cabin may not be quite so good, but still very fair. The chief ports touched at by these ships are Bridgetown (Barbadoes), Jacmel, Kingstown (Jamaica), Colon, Port Limon, Greytown, and St. Thomas. The time occupied by the round voyage is about eight weeks. I shall be happy to supply Mr. Allinson with any further information I may possess, through the post, should he desire it.—Yours faithfully,

R. W. Isbell, late Surgeon Royal West India Mail.

Hereford, December 18th, 1882.

Inquirer writes: "Will one of your correspondents kindly inform me how much

Reretord, December 18th, 1882.

ROQUERE writes: "Will one of your correspondents kindly inform me how much a surgeon is paid on the Peninsular and Oriental Steam Navigation Company's steamers? if they are required to provide their own instruments and uniform, or are such things provided by the Company? and what is the best way to set about obtaining the appointment, etc.?"

Nimrod.—The question is very difficult to answer, as other conditions than those of bare income have often to be considered. Twenty guineas would be a moderate

PASSING THE SOUND.

PASSING THE SOUND.

SIR,—May I ask you to be good enough to give me your advice in the following case? A patient who has had as many children as her husband can well support, is in a miserable state of mind from suspicion that she is again pregnant. So terrified, indeed, is she that such is the case, that she "would rather drown breself" than give birth to a living child, and has pleaded with me to produce abortion. Her only symptom is absence of menstruation, which she has not seen for nearly three months, and so it is impossible for me to say whether she is pregnant or not. Out of respect to her feelings, I am inclined to introduce the sound, and explore the uterns: but before doing so will feel grateful by previously receiving explore the uterus; but, before doing so, will feel grateful by previously receiving your advice as to what I ought to do.—Your obedient servant, L. L. D.

** We are not a little surprised at the question. If terror at the prospect of bringing forth a living child, because a woman has as many children as her husband thinks he can afford to keep, could be for a moment admitted as a reason for provoking abortion, a very great encouragement to abominable and criminal practices would ensue. Our consultant would certainly not be justified on medical, ethical, or legal grounds, in passing the sound where there is reason to suspect pregnancy, even if the woman declare "she would rather drown herself" than have another living child. That should have been a prior consideration.

DIFFICULTY OF PRODUCING ANÆSTHESIA.

DIFFICULTY OF PRODUCING ANASTHESIA.

SIR,—If "Rusticus" will refer to Holmes's System of Surgery, vol. v, page 489, he will find Mr. Lister mentions a case in which he found it impossible to anæsthetise a patient for Mr. Syme. A similar case oocurred when I was houses surgeon at the Huddersfield Infirmary, a few years ago. A middle-aged man was brought in suffering from dislocation of the shoulder. Despite the repeated efforts of the assistant house-surgeon and myself, we were quite unable to bring him under the influence of chloroform; and ultimately, in despair, I gave it up, and reduced the dislocation without it. In this case, the drug was certainly not at fault, and it must be regarded as due to an idiosyncracy on the part of the patient, fortunately very rarely met with.—I am, faithfully yours,

EDWARD ARTHUR WRIGHT, M.B.Edin.

Huddersfield. December 18th. 1882.

Huddersfield, December 18th, 1882.

COMMUNICATIONS, LETTERS, etc., have been received from:-

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The Relative Mortality, after Amputations, of Large and Small Hospitals; and the Influence of the Antiseptic (Listerian) System upon such Mortality. By Hen. C. Bennett. Reprinted from the Journal of the Statistical Society, September 1882. London: J. and A. Churchill. 1882.

Speech and its Defects considered Physiologically, Pathologically, Historically, and Remedially. By Samuel O. L. Potter, M.A., M.D. Philadelphia: P. Blakiston, Son, and Co. 1882.

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