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SIR.—The case of intestino-verical fistula described by "Quid Agam non Habeo," is a very serious one, and the chances are in the direction of a fatal termination, within twelve months, from dysentery, which will recur, and from catarrh of the bladder, which will become chronic, unless the patient be relieved by closing the abnormal opening. I have had two cases of the affection. Both were males, addicted to alcohol, and died inside a year. One, a retired valet, about 55 years of age, who consumed as much as a dozen of gin in a week, blamed the use of the catheter by a surgeon, for the relief of stricture, as the cause of the communication between the bowel and bladder. The other was an old gentleman, 80 years of age, who was confined to bed from chronic bronchitis for some months, in which he drank a bottle of sherry, and the fistula manifested itself.

In the former patient I endeavoured to stop the alcohol, and administered sulphur and senna confection every night, for the purpose of keeping the contents of the bowel semifluid, and saving the fistulous part from much distention. I had the rectum rinsed out after each stool with enemata of carbolic soap and tepid water, and had the catheter passed frequently, so as to keep the bladder from distending. Emollient drinks, Contréxville and purgative alkaline waters, and an enema of a drachm of hazeline with double quantity of water, to be retained after each stool, were used. The patient should be taught to perform all these functions. From this treatment an apparent cure resulted, which lasted three months. The urine became clear and healthy, and could be retained for six and eight hours, and ceased to pass through the rectum, and the feces did not enter the bladder until he returned to his old habit of gin-drinking, when I refused to look after him any longer. Thence he lived for about three months, when he died of catarrh of the bladder, having survived two attacks of dysentery, typical in the appearance and smell of the discharge.

In the second patient the bowels were kept moved by Hunyadi János water, and the dysentery, which occurred in this case also, was treated with ipécacuanha and morphia.

If the lady be not cured in a month, and do not continue well for a period of six months, the abdomen should be opened, the parts dissected and catgut ligatures applied. I would refer "Quid Agam non Habeo" to the treatment without operation of Fistula in Ano et Perinaeo, in the *Medical Press and Circular*, about July, 1883.—Yours truly,

JOHN ROCHIE, M.D., M.Ch., D.S.Sc., R.U.I.,
Ret. H. M.'s Indian Medical Service.

Mount Clarence, Kingstown.

QUANTITATIVE ESTIMATIONS OF UREA.

SIR.—I observe, in your issue of November 29th, an article on Dr. Squibb's instrument for estimating the quantity of urea. Some years ago my attention was directed to the subject, and I had an ureameter made, which is based on the same reaction named in the article, the evolution of nitrogen gas, the urea being estimated by this means. I have tested, since 1881, in the Glasgow Royal Infirmary, until I resigned the appointment, last spring, all the acute cases of pneumonia, rheumatism, nephritis, etc., by the ureameter. I intended to have published these, for the results were interesting. Unfortunately, owing to my illness, the nurses, thinking they were of no further use, destroyed the statistics bearing on these.

I have asked the instrument-maker, Mr. Motherwell, of Argyle Street, Glasgow, to forward you, with the necessary directions and re-agents, the ureameter of which I have spoken. I think you will find it quite as handy as Dr. Squibb's; and for its accuracy I have the high chemical authority of Professor Dittmar, of Anderson's College, Glasgow. Mention is made of this instrument in the last edition of my *Practice of Medicine*, and I understand from Mr. Motherwell, that he has sold a number to London men.—I am, yours faithfully,
M. D.

THE BLIND.

SIR.—Will any of your readers kindly tell me if they know of any home in which a blind man, formerly a cabdriver, may learn some trade, in order to obtain a living for himself, wife, and two children? He lost his eyesight after an operation. A few friends would be glad to pay something towards his maintenance if any suitable institution for grown-up people could be found.—I am, yours truly,

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The New Chemistry. By J. P. Cooke, LL.D. London: Kegan Paul and Co. 1884.
Harvelan Oration. By J. Russell Reynolds, M.D., F.R.S., F.R.C.P. London: J. and A. Churchill. 1884.
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