

TO CORRESPONDENTS.

LETTERS and other COMMUNICATIONS for the JOURNAL should be directed to the private address of the Editor, 39, Cuzson Street, May Fair.

Members should remember that corrections for the current week's JOURNAL should not arrive later than Wednesday.

TO CONTRIBUTORS. The Editor would feel glad if Members of the Association and others, would cooperate with him in establishing as a rule, that in future no paper for publication shall exceed two pages of the Journal in length. If the writers of long communications knew as well as the Editor does, that lengthy papers always deter the reader from commencing them, this great evil would never arise. Brevity is the soul of medical writing—still more than of wit.

HOOPER'S WATER BEDS.

TO THE EDITOR OF THE ASSOCIATION MEDICAL JOURNAL.

SIR.—As the accompanying letter defines so clearly, and in such few words, the usefulness of my Water Cushions and Water Beds, I asked Dr. Wood to allow me to send it to your Journal for publication, which he immediately consented to. I shall therefore feel obliged by your inserting it in an early number.

Pall Mall East, Nov. 20th, 1866.

Yours obediently, WILLIAM HOOPER.

Chempside, Wakefield, Nov. 18th, 1866.

"SIR.—I enclose a Post-Office Order in payment of your account for the Water Cushion.

"This Cushion is for the same patient as that which you sent me three and a half years ago, and I think it but justice to you to say that in consequence of severe Morbus Coxarius, the patient has been laid upon his back during the whole of that time, without any bedsores whatever, so long as the Cushion could be used; but, during the short time that elapsed between the old one being unfit for use, and the arrival of the new one, a bedsores began to form.

I am, Sir, your obedient Servant,

"Mr. William Hooper, 7, Pall Mall East, London. WILLIAM WOOD, M.D."

Communications have been received from:—DR. JOHN KETWORTH; DR. W. TINDAL ROBERTSON; DR. MONTGOMERY; MR. THOMAS R. HEYWOOD THOMSON; MR. R. J. STARLING; AMICUS; THE COUNCIL OF THE APOTHECARIES' COMPANY; THE SECRETARY OF THE EDINBURGH MEDICO-CHIRURGICAL SOCIETY; THE DIRECTORS OF THE GENERAL ORTHOPEDIC ASSOCIATION; MR. J. V. SOLOMON; MR. J. BROWNLOW; DR. JAMES WILLIAMS; MR. AMESBURY; DR. R. U. WEST; SIR CHARLES HASTINGS; MR. W. MOXON; MR. T. HOLMES; DR. G. G. ROGERS.

BOOKS RECEIVED.

[* An Asterisk is prefixed to the names of Members of the Association.]

Pathological Chemistry in its Application to the Practice of Medicine. Translated from the French of M.M. Bequerel and Rodier. By *Stanhope Templeman Speer, M.D. London: Churchill. 1857.

On Rheumatism, Rheumatic Gout, and Sciatica: their Pathology, Symptoms, and Treatment. By *Henry W. Fuller, M.D. Second Edition. London: Churchill. 1856.

The Change of Life in Health and Disease. A Practical Treatise on the Nervous and other Affections incidental to Women at the Decline of Life. By *Edward John Tilt, M.D. London: Churchill. 1857.

Defects of Sight: their Nature, Causes, Prevention, and General Management. By T. Wharton Jones, F.R.S. London: Churchill. 1856.

The Stomach and its Difficulties. By Sir James Eyre, M.D. Fourth Edition. London: Churchill. 1857.

Outlines of Ophthalmology. Third Edition. By William Mackenzie, M.D. London: Longmans. 1856.

The Vocation of the Medical Scholar: being the Oration delivered at the Eighty-third Anniversary of the Medical Society of London. By *Benjamin W. Richardson, M.D. London: Thomas Richards. Glasgow: William Mackenzie. 1856.

ADVERTISEMENTS.

TO ADVERTISERS.

Association Medical Journal.—Office—37, GREAT QUEEN STREET, LINCOLN'S INN FIELDS, LONDON.

The Journal of the Provincial Medical and Surgical Association is published every Saturday, and is transmitted direct from the Office to between Two and Three Thousand Members of the Association in all parts of the United Kingdom.

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Every additional line.....	0	0	6
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Fig. 1.

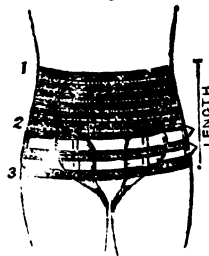


Fig. 2.

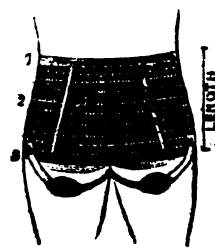
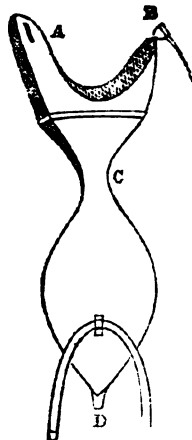


Fig. 1. MR. BOURJEAUD'S NEW BELT & AIR-PAD for INGUINAL HERNIA.—MR. BOURJEAUD begs to state that the smaller ends of the pyriform air-pads are seen below the inferior margin of the belt. The latter is made of elastic strips, about one-inch in breadth, which by being sewn together in a peculiar manner, effect an equable compression around the abdomen. On the internal and front part of the belt two air-pads are attached, exactly on the spot where the belt comes in contact with the inguinal rings; and these yielding pads exercise a gentle compression upon the rings, which compression may be increased or diminished in changing, by means of a small tube and stopcock, the quantity of air contained in the pads. This apparatus is now driving the steel springs completely out of the field; and Mr. BOURJEAUD is happy to say that the hernia belt is getting more and more a favourite among the leading surgeons of the metropolis and the provinces. It is plain to all, that two ends should be kept in view as to apparatus for hernia: First, the support of the intestinal mass; and secondly prevention of protrusion through the rings, without giving the patient pain or causing inflammation and gangrene by pressure on the abdominal parietes with unyielding steel springs. These generally acknowledged desiderata the new belt for hernia completely satisfies; and it becomes every practitioner's duty to advise its use to such of his patients who are affected with hernia.

Fig. 2. POSTERIOR VIEW OF THE HERNIA BELT & AIR-PAD.—This diagram has been drawn in order to illustrate the latest improvement MR. BOURJEAUD has introduced touching this extremely useful apparatus. It had, namely, been found that, in the sitting posture, the pressure of the air-pads upon the inguinal rings became somewhat weaker; to guard against this change, the tubing attached to the lower margin of the belt and terminating in the air-pad has been made to swell towards its centre, posteriorly. When the patient sits down, he drives the air contained in this kind of reservoir into the air-pad in front; the latter becomes a little larger, and the slight difference alluded to above is compensated without any effort on the part of the patient. This contrivance gives to the hernia belt a most valuable accuracy.

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