

formation of bullæ, or the large open sores produced by the separation of sloughs. It is a change, however, not of frequent occurrence, and has been mistaken for elephantiasis. It is attended with a great deal of pain and smarting. When the tuberculization of the skin is fully established, a profuse discharge of serum takes place, saturating the bandages. The fluid secreted has a peculiar, faint, sickly odour. It amounts to many ounces in the twenty-four hours. In proportion to the extent of the tuberculization and the amount of the discharge is the relief experienced from the oppression of the vital functions, particularly of the respiration. The beneficial change is most striking; the fluttering pulse, the furred tongue, dry hot skin, parched lips, leaden countenance, and the laboured respiratory movements, disappear; the size of the body diminishes, the brain again becomes active, the aspect brightens, and the most sanguine hopes of ultimate recovery spring into existence. When, from any cause, the discharge of the fluid is suppressed, even for a few hours only, it is followed by cerebral disturbance and congestion, and by uneasiness about the cardiac region. From this Mr. Nunn infers that the actual disease causing dropsy is not sufficient to induce death, but that the secondary effects of the effusion upon the vital functions is the more direful of the two agents, and therefore, that if the fluid can find an exit, the patient may exist in greater or less comparative security. But, unfortunately, this effort of nature has a tendency not to be permanent. In the course of time the mammillations shrink, the exudation becomes scanty, and at last entirely ceases, the leg being covered with a dryish scurf. In one instance, the patient survived this last change for more than a year. The preceding statements were illustrated by the detail of several cases which fell under Mr. Nunn's observation, or to which he was called by professional friends, and he then commented on the mechanism of the phenomena, first considering the nature of the discharge, and secondly that of the structural change which takes place in the skin itself. The fluid does not differ from ordinary dropsical fluid; it consists of water and albumen, with a certain proportion of the salts of the blood. No traces of urea could be found in it. Only one specimen, however, had been analyzed, and Mr. Nunn, therefore, would be cautious in coming to a conclusion respecting its nature, as it is a point involving the important question of vicarious secretions. Mr. Simon's opinion is, that one organ can vicariously secrete for another only such materials as are common to both; if this be correct, then the presence of urea in the discharge cannot be expected. The relief afforded by the free discharge, Mr. Nunn, therefore, is inclined to attribute to the liberation of the parenchymatous organs from their load of serum, and to their being thus enabled to perform their allotted functions. To illustrate the saturation of these organs, he mentioned, that a kidney belonging to a person deceased from cardiac dropsy, was of double its usual weight—namely, eight ounces. With respect to the second question, Mr. Nunn was of opinion that the mammillations and tubercles were hypertrophied papillæ of the skin; and he further thought it possible that some noxious matters might be eliminated from the system with the serum. The next question to be considered was, how to favour the development of these secretory mammillæ, and to keep them in a sufficiently active condition. The first, he thought, would be effected by remedies which would soften the epidermis, and stimulate the circulation of the skin, without causing mischief, and both these objects he believed would be obtained by warm fomentations. The ordinary dressing should be a soft linen rag, slightly smeared with ung. cetacei.

After the reading of Mr. Nunn's paper, some discussion followed in which several fellows took part.

Mr. THOMAS WAKLEY exhibited the man William B—, upon whom, upwards of three years since, he performed the operation of excision of the ankle-joint, including the entire removal of the os calcis and astragalus. The preliminary business at the commencement of the new session, and the very excellent address of the President, engaged the attention of the Society until so late an hour, that Mr. Wakley only called the attention of the surgeons present to the very interesting case before them. He said that as the gentleman who had announced a paper for April 5th was unable to fulfil that engagement, he gladly availed himself of the opportunity afforded him then to read a paper "On Excision of the Ankle-Joint," when the case before them should be fully discussed. He reminded the Society that he should not be able to produce the man on that evening, consequently he trusted the fellows would, on the present occasion, satisfy themselves respecting the successful result of the operation.

## Reviews and Notices of Books,

AND ALSO

### Analyses of Papers in Manuscript

SENT FOR PUBLICATION IN THE LANCET.

*Elementary Anatomy and Physiology for Schools and Private Instruction. With Lessons on Diet, Intoxicating Drinks, Tobacco, and Disease.* By WILLIAM LOVETT. Illustrated with Coloured Plates. London: Darton & Co. 1851. 8vo, pp. 157.

THE object of the author in the publication of this book is summarily set forth in his preface, where he says:—

"This little work may be said to have had its origin in the efforts I have been making, for some time past, to impart to children some knowledge of their own physical, mental, and moral nature; believing it to be an essential and important branch of youthful education. In the pursuit of my object, I have had to glean my information from many sources, and to simplify and condense it, and to give it in such a form as I thought might be best comprehended and appreciated by those I sought to instruct. And having to some little extent succeeded, I have thought it might aid others, engaged in the great work of education, if I printed what I have taught in a lesson form, accompanied by drawings of the diagrams I used, together with an outline of the method I adopted, and still pursue, in teaching this kind of knowledge to several classes of both sexes weekly."—p. vii.

In noticing a non-medical publication, a few weeks since, we gave some reasons why we consider that non-professional persons ought to be made, in some measure, acquainted with the structure and functions of their organization, and Mr. Lovett's work is by far the best of any which we have ever seen, proposing to convey this knowledge. The clearness of the diction, and the sanitary lessons inculcated, adapt the book to be understood and read with advantage by all individuals of ordinary capacity and acquirements. Mr. Lovett has wisely not stepped beyond his intention of presenting to his readers a mere outline of the sciences of human anatomy and physiology. What he has done is done in such a manner as to show that he is a master of his subject, in so far as it is pursued in his volume. He professes to have "an ardent desire to see the above two sciences more generally taught in our public and private schools," in which desire we concur, not only considering them as branches of a liberal education, but believing most firmly that a more general acquaintance with them would entail amongst the public a horror of quackery, and a better appreciation of the labours, learning, and value of the qualified medical practitioner. The coloured plates with which Mr. Lovett's work is illustrated are faithful representations, and well executed, and, as we have already said, this volume leaves other popular treatises on human anatomy and physiology far in the shade.

*A Letter to Lord Campbell on the Clause respecting Chloroform in the proposed Prevention of Offences Bill.* By JOHN SNOW, M.D. London. 1851.

THIS is a sensible and good pamphlet, and it has the virtue of brevity, touching on all the points of the question concisely. Dr. Snow remarks that it would be truly unfortunate if the first notice by the British legislature of the great and beneficial discovery of the anæsthetic effects of ether and chloroform should be in a new penal law: he goes on to show that there is no reason to believe that chloroform has been employed in this country in more than two instances with criminal intent; and that "so far from aiding in the perpetration of crime, it has led to the immediate detection of the offender on both occasions." The impossibility of procuring any instantaneous stupefying effect by the agency of chloroform, and the doubts which may be justly thrown on evidence in some felonious cases in which that agent is asserted to have been used, are dwelt upon, and several cases are instanced in the pamphlet before us. Dr. Snow also considers the introduction

of the word chloroform into the proposed Act as "alarming to the public, suggestive to the criminal, and little creditable to the sagacity and gravity of the law, whilst its removal would not affect the operation of the Act, even in a case in which it might be foolishly attempted to exhibit the article."

Incidentally to the main subject of the pamphlet, Dr. Snow remarks, that the rapid supervention of stupor should not be accepted as a proof that it has not been occasioned by spirituous liquors unmixed with more potent substances. Ardent spirits, he observes, under some circumstances, act with greater rapidity than almost anything else, except prussic acid; and he cites an instance in point which occurred only a few weeks since, within the jurisdiction of the coroner for Middlesex. And as to the intermingling of chloroform with gin or other ordinary spirits, he draws attention to the fact, that the intermixture is very imperfect, and that chloroform imparts such a very hot and sweet taste, that no one could take the draught without being aware of the adulteration.

*On a Case of Labour, with Procidencia Uteri.* By P. J. HYNES, M.D., Beeston, Notts. 12mo, pp. 7. THE LANCET Office.

THE wife of a labourer, who had been subject to a prolapsed state of the uterus, and on one occasion to a profuse uterine hæmorrhage, during her pregnancy, was attended in her labour, in November last, by Dr. Hynes, who found, on examination, a large substance, of the size of a foetal head, projecting from the vulva, which, from its elastic feel, he at first thought to be the placenta. Upon closer examination he discovered an oblong aperture capable of admitting three fingers, through which he was able to feel the membranes protruding. The projecting tumour he discovered to be a large portion of the uterus, dragging with it the inferior part of the bladder. As the expulsive pains were violent, Dr. Hynes even feared the inversion of the whole pelvic contents; he therefore, without delay, ruptured the membranes, and while maintaining steady support to the projecting substance, extracted a foetus of about six months, which survived a few hours. Little or no hæmorrhage ensued, and the patient progressed satisfactorily at first, but having imprudently got up within thirty-six hours from the labour, in contravention of the directions of her medical attendant, she became delirious and feverish, and sank eight days afterwards, the pulse, that "*res fallacissima*," having maintained regularity throughout her fever. Dr. Hynes incidentally remarks, that a practitioner in Nottingham, who has a large midwifery practice, has assured him that he had met with no instance similar to the above, though he recollects that Dr. Lever once detailed the particulars of one to his class. THE LANCET of April 18th, 1846, also records a case similar in some of its features, and extracted from one of the British-American journals.

*On a Case of Poisoning by Oxalic Acid, and Recovery.* By R. C. BOURNE, Esq., Nottingham, late Assistant-surgeon 3rd Dragoon Guards. Folio, pp. 4. THE LANCET Office.

MR. BOURNE was called to visit the wife of a sergeant of his regiment, who had taken, for the purpose of self-destruction, three drachms of oxalic acid in about three ounces of water. He arrived a quarter of an hour after the occurrence, and found the woman suffering nausea, with eructations; pulse natural; breathing regular. The stomach-pump being at hand, the contents of the stomach were forthwith evacuated, and the organ was cleansed by being washed out four or five times. Subsequently there were convulsions, spastic contractions of the muscles of the jaws and extremities; forcible closure of the mouth, and drawing down of its angles; dilated *alæ nasi*, corrugated eyebrows, twitchings of the muscles of the face, and insensibility. Lime water was now administered. Great cerebral excitement afterwards occurred, accompanied by dry coldness of the surface, and an imperceptible pulse; symptoms less marked during the intermission of the tetanic spasms. Bleeding was now resorted to; twenty ounces of blood in all were lost, and in about three hours from taking the poison, the spasmodic symptoms declined. Burning sensation and pain on pressure were felt in the throat and

epigastrium. Hot jars to the feet, and castor oil, at this time, and on the succeeding days calomel with morphia, leeches, opium, turpentine enemata, a blister to the epigastrium, and finally, bitter tonics, formed the chief remedies administered; convalescence was complete in about twelve days from the attempt at suicide.

Mr. Bourne remarks that the treatment he adopted was not precisely in the order laid down in books, where the use of the antidote—lime—is recommended prior to that of the stomach-pump. In this case the latter was at hand, and the former was not, when the surgeon was called; by the use of the pump, also, the least time possible was allowed for the poison to be absorbed; and although by washing out the stomach, and diluting the poison that was left, a large absorbent surface was exposed to its effects, Mr. Bourne considers that this was preferable to any concentrated solution of the acid being suffered to act on a defined portion of surface for a length of time. The author adds, that in a note in Beck's "Medical Jurisprudence," it is stated, "the tetanic convulsions witnessed in quadrupeds (under the influence of oxalic acid) do not seem to occur in the human species." In the case above narrated, however, they were well marked, and for a month afterwards the face and extremities were subject to spasmodic twitchings. Three months subsequently, the woman re-enjoyed good health.

*The Introductory Address at the Opening of the Bristol Royal Infirmary Medical Society, January 9th, 1851.* By GEORGE WALLIS, M.D., Senior Physician to the Infirmary. Folio, pp. 4. THE LANCET Office.

THE abstract of this oration, which has been forwarded to us, evinces that it was one well suited to the occasion. We regret that we have not space to publish it entire, but shall extract one or two sentences which impress us with their piquancy and truth. Speaking of the advantages of debating societies, in training the mind to grapple closely with argument, and cultivating an acuteness of intellect and readiness of repartee, Dr. Wallis says,—

"Your intellects will be strengthened and polished by the rubs and hits you will give one another in discussion, much as I have seen cannon-balls perfected by putting a number of them into a large iron barrel, and turning it rapidly round, when the hammering they give each other not only brightens them, but renders them perfectly spherical. These benefits have been found practically useful at other societies of a like nature. The Royal Medical Society of Edinburgh was of great use to myself; King's College Medical Society, on the plan of which yours has been formed, has been also of great benefit. Ours may be yet only a minor star in respect of these; but we hope that it will become eventually as useful as either of the other societies. Hence comes the advantage of a debating society. You must prove your own opinions to be true as far as proof can be obtained; when proof cannot be obtained directly, you must still find means to satisfy with reasonable and fair deductions."

*On a Case of Ranula; Rupture of the Tumour, Exit of a Large Salivary Calculus.* Translated, with Remarks, by J. L. MILTON, Esq., London. Post, pp. 6. THE LANCET Office.

JOSEPH B—, aged thirty, gardener to the Orphan Society of Caen, of a sanguino-bilious temperament, went to bed quite well, but on rising next morning he found some heat and uneasiness in, the right cheek and side of the neck, which, however, did not prevent him from going to work. At mid-day any movement of these parts became difficult and painful, and in the evening he suffered so much that he was obliged to go to bed earlier than usual. He grew hot and agitated, the state of his tongue producing more and more inconvenience. At ten o'clock he thought he was about to die of suffocation, and could not speak a word. In vain was drink offered to him; his mouth was so filled and distended that it was impossible for him to make the least attempt at deglutition. Nevertheless, towards midnight, thinking he might find some relief from attempting to swallow a little warm liquid, he got at a cup of pisan, but had scarcely gulped down a few drops

when he felt a violent sensation of burning under the tongue. He carried his finger to the place, and found something like a pouch, long, hard, and pushing the organ back towards the palate. He endured this torture more than an hour, when all at once a solid body appeared between his teeth. Somewhat frightened, he broke it by a convulsive movement of the jaws, one part falling into his hand. The patient experienced immediate relief. The rest of the calculus was subsequently removed; in its entirety it appeared to have been about two inches in length, and half an inch in breadth.

M. Leclerc, from whose account this case is translated, thus explains the progress of occurrences:—The calculus, formed a long time ago, shaken by some circumstance or other, had probably quitted the cavity in which it had been formed, and had proceeded in the direction where it met with the least resistance; perhaps also the burning ptisan hastened the rupture of the obstacle, which prevented it (the calculus) from making its way out. Although in not very rare cases salivary calculi have been seen to cause ranula, we do not know that one has been seen of this size, nor attained such a development, without producing very well-marked symptoms. The prompt cure, he adds, which this patient experienced ought to lead the practitioner to make certain, when he has a ranula to treat, that the malady is not caused by a calculus of this kind; for not only may we assume that the cure will be more simple and easy in such a case, but a method will doubtless be taken by a simple operation to give issue to the calculus.

### Correspondence.

“Audi alteram partem.”

#### THE KEY-TSE-SING, OR JAPANESE EMMENAGOGUE.

To the Editor of THE LANCET.

SIR,—May I request the favour of your inserting the following cases of the successful use of the above remedy in my own practice, and at the same time allow me to inform the medical officers of public institutions, that I shall be happy to forward them sufficient for a more extended trial upon being apprised of their wishes.

I should also feel obliged by the gentlemen in private practice who have been supplied through your former announcement, communicating the results to me at their earliest convenience, but I must inform several correspondents that their notes remain unanswered from their directions being undecipherable.

I have the honour to remain, yours, very truly,  
EDWARD WILLIAMS, M.D.

Upper Clifton-street, Finsbury, March, 1851.

CASE 1.—Miss W. L.—applied to me, September 6th, for relief from severe attacks of hemiplegia and hæmatemesis, which had existed for several months, and was referred to cessation of the menses from catarrh, in March last. She had been under several practitioners, who had prescribed both lotions, mustard-cataplasms, and aloetic and steel purgatives, with little or no amelioration of the symptoms, and with no effect upon the uterine functions. I therefore put her under the influence of key-tse-sing, and in four days from its employment, the catamenia appeared, and flowed normally for three days, with considerable diminution of the previous symptoms. The effects produced before the catamenia appeared were slight retching and purgation, with a sense of bearing-down.

At the following menstrual period, I advised her to take a few doses of the remedy; the result was as wished, and she has since been regular, while the head and stomach affections have ceased to annoy.

CASE 2.—The daughter of a clergyman, in Berkshire, was sent up to town to consult me in October last. The history of her case was, that two years since, menstruation, which had been previously regular, ceased, without any assignable cause, and that contemporaneously her mind became affected to so great a degree that temporary seclusion was advised and adopted, but all other secretions were in a generally healthy state. Various eminent practitioners were consulted, and many plans of treatment adopted, with little benefit to the mental malady, and with no advantage to the secretive function. I recommended the continuance of the local treatment, and the exhibition of the key-tse-sing, a few days before the next cata-

menial period. The result was, a scanty flow for a few hours, which seemed to have a slightly beneficial effect; but suspecting that habits of masturbation had been indulged in, I suggested a plan to obviate the same, and a recourse to the remedy at an interval of three weeks, which was attended to, and the result has been most satisfactory, the catamenia being tolerably profuse and regular, while the irritability, waywardness, and suspiciousness have considerably decreased, and she has begun to devote some of her time to those objects and amusements indicative of returning rationality.

CASE 3.—Mary W.—aged twenty, a domestic servant, consulted me Oct. 21st. She stated that she had never menstruated, and had been subject to fits since the age of fourteen, which had caused her the loss of several situations. Her appearance indicated good health, and all the other secretions were normal. She had taken various popular remedies, and had been a patient at two of the metropolitan hospitals, without any alleviation; in fact, the fits had increased in frequency and duration. She stated that she had never known any of the usual symptoms of menstruation, and as there was no tumefaction of the abdomen indicating retention, I was very doubtful if the key-tse-sing would be of any use, but determined to give it a trial, as the patient resided in the neighbourhood, and I could watch its effects. I therefore desired her to take four drachms every four hours, which caused severe vomiting and purging after taking eight doses. I then abstained for twenty-four hours, and commenced again with three-drachm doses every eight hours. The same results occurred in a diminished degree, with the addition of severe darting pain across the back, and along the course of the suspensory ligaments, and a sense of weight and bearing-down, which was followed on the fifth day by a pale catamenial discharge. On the seventh day after the menstrual appearance she had a slight fit, and on the recurrence of a monthly period I administered three-drachm doses twice a day; these had the effect of establishing the secretion, which since, with one exception, has flowed regularly, and she has also entirely recovered from the epileptic attacks to which she had been subject.

#### THE REGISTRAR-GENERAL AND UNQUALIFIED PRACTITIONERS.

To the Editor of THE LANCET.

SIR,—Last Saturday's LANCET contains a letter, signed “M.R.C.S.E.,” complaining of the reception, by district registrars, of certificates as to the cause of death by unqualified practitioners.

I think this, Sir, is a subject calling loudly for redress; and the question immediately suggests itself—Has the district registrar the power to refuse a certificate bearing the title of “Surgeon” &c. after the signature? If he has this power, and knowingly receives the certificate of an unqualified man, then is he guilty of a dereliction of duty; but if, as was lately stated to me by a district registrar, his duty is merely to obtain the best information he can touching a death, then does the fault lie with the registrar-general, in not enforcing a stricter observance to what is due to himself, the public, and to qualified practitioners; and this, I think, only requires to be pointed out in your able journal to meet with immediate attention.

That the occasional refusal of unqualified or illegal certificates, by certain district registrars, is apparent, from the case detailed in THE LANCET of Nov. 22, 1850, where the district registrar at Market Drayton, with a most praiseworthy exercise of his duty, upon receiving a certificate of death from a party he ascertained to have no qualification, “was firm in his legal duty, and positively refused his certificate.” The consequence was, the burial was delayed till an examination and certificate from a legally-qualified practitioner was obtained. If all registrars would act in this most laudable way, illegal practice would receive a great check.

Why should not every district registrar be empowered to inspect the qualifications of all practitioners who are unknown to him?

In the high courts of judicary at Edinburgh, medical evidence is not received without an inspection, and, I believe, registration by the authorities, of the qualifications of medical men giving evidence.

No wonder that the illegal practitioner in England can maintain his position, when by simply writing a qualification after his name he is received upon the same footing, by the registrar-general, as the regularly-educated and qualified medical man.

The printed certificates of death bear upon their face the