

proof here adduced of mischief wrought by alcohol is by no means equal to the demand made upon it in support of a prohibitory liquor law. Some useful information is afforded respecting the prevalence of drinking in different European countries, and the measures employed for its control. The chemistry of alcohol and its behaviour in the body are treated, on the whole, with a fair degree of care and intelligence, though the views of the writer on physiology and pathology occasionally strike one as being more original than accurate. Thus we learn that the carbonic acid in the blood is carried by the red corpuscles, that nerve roots convey sensation and motion to nerves, that when gout spreads from joints to internal organs death is imminent, &c. The ordinary letterpress likewise will, in some passages, bear careful revision. Some practical remarks on temperance from an economic standpoint are worth reading. But the book as a whole, notwithstanding a certain substratum of scientific evidence, is to be regarded rather as a popular and somewhat extreme presentation of total abstinence views than as a dispassionate study of the alcohol question.

What Cheer, O? or the Story of the Mission to Deep-sea Fishermen. By ALEXANDER GORDON. London: James Nisbet and Co. 1890.—Under this encouraging title we are introduced to a brief but very readable account of the past, present, and probable future of the mission to deep-sea fishermen. The fisher of less than twenty years ago—a nearly forgotten man by those on shore, and therefore a bad citizen—and his crafty foe, the “coper,” are shown as they then existed. The history of a genuine effort of humanity which has caused the disappearance of the latter, and has raised his former dupe to the level of intelligent, moral, and useful manhood and to the fellowship of his countrymen, is detailed with faithful care. In this account of the Mission’s work all matters of essential interest relating to that work may be studied through the medium of a light and attractive literary style. The needs, the dangers, the deservings of the hardy east-coast fishermen are emphasised by descriptions of the life on board the smacks, and by yarns of the grim storm-battles fought in former years. Medical readers will peruse with special interest the details given of the floating hospital and the working of the ambulance system. Men of business will find matter for approval in a statement of shrewd and honest financial management, and all who care to take part in an enterprise worthy of their best efforts will in these pages discover their opportunity. Let us not forget to mention that the illustrations, by well-known artists, are unusually good.

Practical Manual of Diseases of Women. By H. MACNAUGHTON JONES, M.D. Fourth Edition. London: Churchill. 1890.—The fourth edition is enlarged, and contains new chapters on electro-therapeutics, massage, ovarian tumours, and ovariectomy.

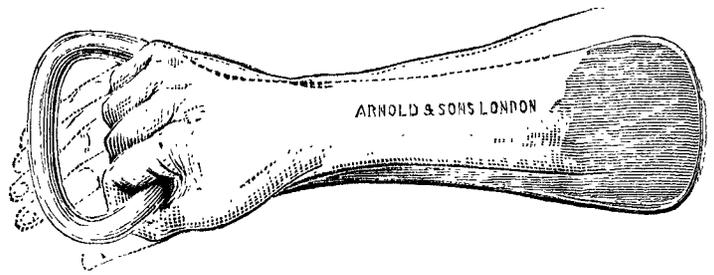
The Cell Theory Past and Present. Being the Inaugural Address delivered to the Scottish Microscopical Society by Sir WM. TURNER, F.R.S. London: Williams and Norgate. 1890.—In this pamphlet the reader will find a clear and excellent account of the history of the cell theory.

New Invention.

A NEW SPLINT FOR COLLES’ FRACTURE OF THE FOREARM.

AFTER the impaction of the fractured end of the radius has been reduced, this splint, previously suitably padded, should be applied along the flexor side of the forearm. The patient may then be directed to grasp in his hand the

transverse portion of the perforated end of the splint. A plain wooden splint, padded, should now be applied on the extensor side, reaching from the back of the wrist to about two-thirds up the forearm. The chief object of the splint is to allow full freedom to the hand and fingers, so as to



avoid the painful stiffness and helplessness which usually follow when fixed up in other various form of splints, and all of which necessitate the hand and fingers being confined in an abnormal position by a bandage. It is made by Messrs. Arnold and Sons, London.

J. GALLAGHER,
House Surgeon, Jamsetjee Jejeebhoy Hospital, Bombay.

REGINA v. BENNETT.

To the Editors of THE LANCET.

SIRS,—This case is an interesting one to the medical profession as illustrating the extreme difficulty of getting a knowledge of simple medical facts into the minds of a judge and jury.

Matthew Bennett was a soldier on sentry duty at Wellington Barracks, carrying, as is usual, an unloaded rifle. Suddenly he crouched down into a kneeling position, loaded and discharged his rifle, striking a passer-by whom he had never before seen, and began to reload. He was at once arrested, and was found to be pale, dazed, and shaky, and when spoken to he made no reply. He was taken to the guard-room, and subsequently asked what he was under arrest for, and denied all recollection of the occurrence. On inquiry it was found that he had for long been subject to attacks of giddiness.

Upon these facts the medical witness for the prosecution is asked whether the case may not be one of epileptic vertigo, and whether the act of loading and firing may not have been one of the automatic acts that so often occur in petit mal, and he gives his opinion that such an explanation is extremely probable. When counsel for the defence advances this hypothesis, and endeavours to support it by medical evidence, the reception that it meets with is somewhat discouraging. The notion that a man could suddenly become unconscious, and, while unconscious, perform quasi-rational acts of which he afterwards retains no recollection, is regarded by the judge and jury as an extravagant burlesque which is not entitled to serious consideration. The judge regards the medical witness with amused contempt, as a weak-minded enthusiast who is carried into monstrous absurdities by the domination of a fixed idea. The jury laugh audibly at the hypothesis, and counsel for the prosecution suggests by his manner that it is for just such people as the witness before him that Broadmoor was established.

The legal interest of the case lies in the fact that the judge left to the jury the question of the prisoner’s sanity, of which no witness had expressed a doubt. It seems that in law a person who is in an attack of petit mal, and whose consciousness is for the time being annulled, is regarded as insane, and is liable to be committed to detention during the Queen’s pleasure if he does a criminal act while unconscious.

It would seem that the defence must have had some influence on the jury, for the prisoner, who was committed for shooting with intent to kill, was found guilty of a common assault only. The jury, upon being asked their opinion as to the prisoner’s state of mind, hesitated for some time, and then said that they “supposed the man had fired from a sudden impulse.”

Upon the often-mooted question of medical assessors in such cases I express no opinion; but I feel sure that I am within the mark when I say that no jury of medical men could be got together that would fail to find that Matthew Bennett’s crime was committed during an attack of petit mal.

I am, Sirs, yours truly,

Catford, September, 1890.

CHARLES MERCIER, M.B.