

To Correspondents.

STATIONAL VACCINATION.

E. F. F.—In our opinion, one of the main principles of the Vaccination Act of 1867 is that, as a rule, all public vaccinations shall be performed at the appointed stations of the public vaccinators. This principle is amply set forth by several sections of the Act, and especially by section 16, which directs that the parent or guardian shall take the child, or cause it to be taken, to the public vaccinator of the vaccination district in which it shall be then resident, according to the provisions of the Act; and by section 29, which enacts that every parent or person having the control of a child who shall neglect to take such child, or cause it to be taken, to be vaccinated, or after vaccination to be inspected, according to the provisions of the Act, and shall not render a reasonable excuse for his neglect, shall be liable to a penalty of twenty shillings. This clearly demonstrates that the intention of the Legislature was that domiciliary vaccination should not be encouraged. In addition to the sections above referred to, section 6 directs that the fees shall be for vaccinations performed at the stations, though, it is true, provision is also made for payment for vaccinations done elsewhere. This latter class of payments, however, is to be quite exceptional, for the terms of such payment are to be specified in the contract. As to the neglect of parents to take their children to the vaccinator, the guardians, under section 27, will twice a year have before them a list of all negligent parents, and it will then become their duty to take such proceedings as may be necessary to ensure due obedience being paid to the law. The official reports on the public vaccination of the country do not appear to class amongst the best, either for quantity or quality, those unions where house-to-house vaccination is the rule. And we can easily understand such to be the case; for there cannot be two opinions as to the superiority of arm-to-arm vaccination over vaccination with preserved lymph, and we hardly see how the former system is to be maintained, unless, as a rule, vaccination at a station be insisted upon. With respect to revaccination, section 8 provides that if the Privy Council shall have already issued or shall hereafter issue regulations in respect of the revaccination of persons, "the guardians shall pay in respect of every case of successful vaccination performed, in conformity with such regulations, under such contracts [i. e., contracts made under the old Act], or under new contracts a sum amounting to two-thirds of the fees payable upon each case of successful primary vaccination." It will thus be seen that vaccinators are not expected to perform revaccination without being paid for it; but, on the contrary, they will be paid for revaccination, provided it is performed under contract, and in accordance with the regulations of the Privy Council. The Privy Council regulations were issued on the 1st December, 1859.

Mr. J. Pickop.—In a case of emergency, whatever it may be, in which a medical practitioner is called upon to officiate in the unavoidable absence of the regular medical attendant, it is a well-understood rule that the gentleman so called in should immediately retire from the case on the appearance of the ordinary attendant of the patient.

A. L.—1. It would depend upon the regulation of the University; but we believe that the degrees could be taken at the same time.—2. The University of London.

The letter of *Mr. Sandford* (Cardiff) shall receive attention.

THE CLERKENWELL RELIEF FUND. To the Editor of THE LANCET.

SIR,—Permit me to correct an error, not in your report, but in the wording of the vote of thanks of the Committee of the Clerkenwell Relief Fund, thus: "To Mr. Hill and the medical staff of the Royal Free Hospital." Mr. Hill performed his duties as one of the resident medical officers; but the patients from first to last were under the charge of, and constantly attended by, F. J. Gant, Esq., the surgeon of the week.

I am, Sir, your obedient servant,
ALEX. MARSDEN, M.D.,
General Superintendent.
Royal Free Hospital, Gray's-inn-road, Jan. 9th, 1868.

A Poor Parish Doctor.—The case does not come strictly under article 183 of the Consolidated Order, though "hour-glass contraction with hæmorrhage" ought to be regarded as a special case. The facts should, we think, be forwarded to the Poor-law Board, who would probably award the fee.

Mr. Birkenruth.—Will our correspondent be good enough to send us a specimen of the "tincture"?

H.—Such appointments are constantly being advertised in the medical and other journals.

THE POISON OF THE COBRA.

WE have received several letters on this subject, which seems to have attracted considerable attention in consequence of the notice which we last week inserted in regard to the reward offered by Dr. Shortt for the discovery of an effectual antidote to the poison. Most of the letters contain mere assertions of the beneficial antidotal action of absurd remedies; others state that the writers possess certain "secret means that have never failed." One gentleman states that a ligature should be placed above the wound, which should be cauterised; the snake should then be killed, its poison extracted, and given to the patient in a glass of spirits: this causes vomiting, and ensures recovery. In reply to several inquiries, we may state that Dr. Shortt's address is—Camp, Shervarry Hills, Madras Presidency.

THE PROPOSED ASYLUM FOR INSANE PATIENTS OF THE MIDDLE CLASS.

OUR attention has, of course, been directed to the controversy at present pending, in *The Times*, respecting the feasibility of a scheme for a partly charitable and partly self-supporting asylum for people of the middle class. There can be no doubt in the mind of anyone who understands the matter of the excellence of this proposal in itself. But it must be remembered that repeated efforts have been made by various persons in past years to collect funds for such a purpose, but these efforts have always failed. That great physician and benevolent man, Dr. Conolly, among others, many years ago used all his powerful influence to carry the scheme into effect, but it was in vain.

Jamaicensis states that he was summoned at night seven miles from his home to attend a negro, suffering from compound fracture of the tibia, about three inches above the ankle. He adjusted the fracture, and all was going on well for nineteen days; but the patient, who was a head man on a sugar estate, became dissatisfied because a rapid cure was not accomplished, and coolly demanded that an ignorant, illiterate, negro adventurer should be called in consultation. This, of course, was indignantly declined. The negro took sole charge of the case, which was subsequently mismanaged in a variety of ways, and the leg of the patient had to be amputated below the knee four months afterwards at the Kingston Hospital. "Jamaicensis" brought an action against the patient for £9; he charged £3 4s. for the night visit (seven miles off), adjusting the fracture, &c.; 15s. for each subsequent visit; 11s. for medicine, apparatus, &c. It appears that a guinea is the usual fee in that district in medical cases. The case was tried, a verdict given in favour of the surgeon, and now the defendant appeals to a higher court against the decision, as our correspondent says, on the following grounds:—

"1st. That I could not recover because defendant never distinctly retained me; though I proved, and he indeed admitted, that he had received my attendance willingly and even gratefully at first. My witness, who wrote the letter at defendant's request, and could prove the retainer, being unfortunately ill, and unable to attend court.

"2nd. That I was not legally entitled to recover, as no efficient service had been rendered, the man having ultimately lost his leg.

"3rd. That my conduct in leaving him to the quack was unprofessional, inhumane, &c., though I distinctly proved, and they admitted, my reasons for doing so, as stated above.

"4th. That the charges were exorbitant."

With reference to the first objection, it should be stated that the surgeon was summoned in the first instance by a letter written at the request of the patient. Our opinion is asked by "Jamaicensis" as to the validity of the above objections. The fact of the attendance, and its being accepted by the defendant, is a sufficient retainer in law. It is not requisite in such a case that there should be a promise to pay on the part of a patient so situated.—2. Efficient service was rendered.—3. The conduct of the plaintiff was professional, and consistent with the ordinary usage in such cases. Any other line of conduct would have been derogatory and improper.—4. The charges appear to be strictly moderate.

Mr. C. J. E.—1. The Hospital for Epilepsy in Queen-square. — 2. Either of the medical officers attached to the institution.

L.R.C.P.—The General Consolidated Order of the Poor-law Board runs thus:

"1. The guardians shall give notice of their intention to proceed to make an appointment of a medical officer at one of the two ordinary meetings of the Board next preceding that at which the appointment is made. Or,

"2. An advertisement of the intention of the guardians to proceed to the consideration of the question of the appointment of a medical officer shall, by their direction, have appeared in some public paper at least seven days anterior to the date at which such appointment is made."

Walsh's Manual says:—

"To insure a due compliance with the Order, it is requisite that there should be an interval of seven clear days, at least, between the date of the advertisement and the day on which the election takes place, exclusive of the day on which the advertisement appears in the newspaper and that on which the appointment is made. Thus, if the advertisement appear, say on the 6th of the month, the election cannot take place until the 14th."

Mr. William Altham says, in reference to a statement of Mr. Edwin S. Green, of Settle, that there is no other duly qualified practitioner in the town of Settle than himself; that he (Mr. Altham) has been many years in practice in that town. As he is a licentiate of the Society of Apothecaries, he is undoubtedly duly qualified.

Major Ross, R.A., is thanked for his letter. The subject shall be noticed in a future number.

Mr. H. D. Workman.—Thanks. The department is already occupied.

A RARE CASE OF VACCINATION.

To the Editor of THE LANCET.

SIR,—You may possibly deem the following case worthy of a place in the columns of THE LANCET as somewhat unusual:—

A private, aged thirty-two, who had just enlisted in the corps of Royal Marines, was vaccinated on the 4th December; and although he had a large cicatrix on the left arm, where he said he had been inoculated when seven months old, and his face was deeply pitted from small-pox, on the 11th inst. he appeared with two large and well-formed vesicles on the arm.

I may add that the worst case of confluent small-pox I have seen occurred in the case of a man who had been vaccinated when a child, and who was also deeply pitted from a former attack of small-pox.

I remain, Sir, yours, &c.,

MAXWELL RODGERS, M.D.,
Assistant-Surgeon, Royal Marines Light Infantry.
Melville Hospital, Chatham, December, 1867.

THE INQUEST AT SNETTISHAM.

As might have been expected, the important inquest lately held at Snettisham, and referred to in THE LANCET last week, is attracting general attention. The local papers contain letters from Mr. Flockton and Dr. Meller in relation to the case and the inquiry upon it. They throw some further light upon the subject, and enable us to arrive at a more accurate conclusion respecting it. It appears that a person of the name of Clarke, an unqualified practitioner at Snettisham, engaged to attend a woman in her confinement. She was taken with what appeared labour pains on the Thursday, and, as we suppose from the evidence adduced, Clarke was in attendance upon her to the Saturday following. It would appear that he then discovered that the presentation was an unnatural one, and sent for Mr. Flockton, a surgeon of the town, to come to his assistance. Mr. Flockton declined to meet Clarke, but offered to attend immediately if Clarke retired. This Clarke did, and Mr. Flockton instantly attended. Finding the woman in a very dangerous condition, and the arm of the child protruding, Mr. Flockton, we think with commendable caution, decided upon seeking the assistance of a professional brother before he took upon himself the responsibility of delivering the woman, who, from the exhaustion produced by the length of her labour, was in a most enfeebled state. Moreover, he considered it necessary that chloroform should be administered, in order that the operation of turning might be effectually performed. Under these circumstances he sent for Dr. Meller, a practitioner in a neighbouring town, who promptly attended, and in two hours from the time that Mr. Flockton was sent for, the woman was delivered, and survived the operation only half an hour. These are the main facts of the case as disclosed at the inquest, and by the correspondence to which we have alluded. It is difficult to understand the remark of the Coroner, that he considered the inquest an unnecessary one, and that it would never have been held but for the jealousy of the medical men. There was evidently blame somewhere with regard to the treatment of the case, and it was clearly requisite for a Coroner's jury to determine this. It was due to the medical gentlemen engaged in the case, and demanded in the interests of the public. Is it necessary to ask any person but a Norfolk jury upon whom the grave responsibility of this case rested? Could it be upon Dr. Meller, who in two hours from the retirement of Clarke delivered the woman, no doubt with competent skill? Could it be on Mr. Flockton, who was called to a difficult and dangerous case, and immediately sought and obtained the assistance of a qualified professional brother? Or should it rest upon the unqualified practitioner, who allowed the poor woman to be in labour for a long time without discovering that the presentation was unnatural, and only called for proper assistance when the mischief had been done, and the case, as proved by the result, was hopeless? The Norfolk jury censured Mr. Flockton, but made no addendum to their verdict upon the conduct of Mr. Clarke. As to the remarks of the Coroner and Mr. Beloe, the advocate retained by Clarke, we desire to say nothing more than that they were not so pertinent to the issue as they should have been. This case affords a striking illustration of the necessity that a Coroner should be a highly educated member of the medical profession. With such a training, a judge presiding at an inquiry of this kind might have addressed the jury upon the only essential points in the case; for let it be remembered that it involved a question of medical practice, and not one of law. A medical Coroner would have told the jury that in obstetric practice it is of vital importance both to the mother and child that any abnormal presentation should be early detected, in order that means might be taken as soon as possible to meet the abnormality. He would have stated that the earlier the interference is made—consistent with the rules of practice,—the greater the probability that the two lives would be saved. He might have gone further, and explained to the jury the relative responsibility of the practitioners who were engaged in the case. Doubtless the Coroner in this particular instance acted with conscientiousness. But how could a lawyer Coroner be expected to sift the evidence adduced upon a complicated obstetric case in such a manner as should determine questions of practice which the most experienced accoucheurs feel sometimes at a loss to decide? In conclusion, we may express our regret that both Mr. Flockton and Dr. Meller were not allowed to be present during the entire course of the inquiry. We are acquainted with no instance in the higher courts of judicature in which a Judge has thought it necessary to exclude a medical witness during any portion of the trial. We must acquit both Mr. Flockton and Dr. Meller of any breach of professional etiquette, and, what is of far more importance, of any lack of that skill and humanity which are so characteristic of the members of our profession.

MUNIFICENCE AT LINCOLN.

THE Town Council of this important city, after a lengthened debate, have determined to give their medical officer of health the munificent salary of £15 per annum. It was proposed that the salary, which was lately £10, should be increased to £20; but this was negatived by a majority of 1 in a meeting of 21. So a compromise was come to, and the £15 awarded—a less sum, we believe, than the town crier receives.

A. B. W. shall receive a private note.

Esculapius, Junior, (Belast).—1. None of the persons mentioned are registered, and in all probability have no legal right to be so. At all events the very nature of their advertisements proves that they are of the irregular class.—2. All quack medicines should be avoided.

G. S.—Messrs. Burrows' New Self-registering Thermometer is a very convenient and useful instrument.

THE communication of Mr. J. H. Barnes will be noticed next week.

"SLEEPY STUFF."

A CASE of alleged child poisoning by opium, recorded in the Bristol papers, and which formed the subject of a Coroner's inquiry last week, is worth a passing notice. It exemplifies in a very forcible manner the way in which a large number of infants are every day brought near or across the threshold of death's door. A widow, a certain Mrs. Parfitt, has occasion to go from home, and leaves her illegitimate child, seven weeks old, in charge of her landlady. On her return, the mother finds the babe ill—cold, stiff, and foaming at the mouth. The landlady cannot account for the change from a perfectly healthy and lively condition in the morning to one of imminent danger in the evening. She suggests a visit to a doctor; but poverty stands between the services of the latter and the mother's desires. The daughter of Parfitt now declares that the landlady, during the absence of the mother, sent for some laudanum to get the child to sleep for a couple of hours, counselling her at the same time that nothing should be said about it. The child is taken next day to the infirmary, when symptoms of opium-poisoning are recognised. Various remedies are used by the landlady, who seems to have exhibited a special interest in the case. The child dies the following day, early in the morning, and a certificate of death is refused by the medical officer of the infirmary. At the inquest the evidence as to the purchase and administration of the opium was denied point blank. It was deposed by Mr. Tyler, a chemist, that the statement of the daughter of Parfitt (the mother), that she had purchased laudanum on the occasion referred to and at other times for Mrs. Sprague, who took the drug herself for some pain she had, was correct. He had also sold her "Godfrey's Cordial." The jury adjourned the case in order that a post-mortem examination might be made, and subsequently returned a verdict that the child died "from inflammation of the lungs," on the evidence of the house-surgeon of the infirmary, who, however, stated that laudanum had been administered. It was, we admit, difficult to come to an absolutely satisfactory decision in the face of the confusion that had taken place, and the strong feelings that had been excited between the mother and the landlady, leading to random assertion and hard swearing; but we still view the case with greater severity than did the jury. The practice of "quieting" children whose presence is inconvenient is carried on to an alarming extent, and to allow offenders to escape is productive of serious evils. What must be the effect of such a case and result as the above on the mothers of infants, illegitimate or not, who are for divers reasons "inconveniently in the way"? Something more than an extended knowledge to the ignorant of the possibility of procuring remedies which, although possessed of danger as properties, may be used with impunity for their own convenience. The permissive sale of "sleepy stuff," and the thoroughly lax administration of the law in such case, form the best security against retribution to those whose object it is to destroy speedily by indirect means.

Enquirer.—The gentleman named is duly qualified to practise.

A CASE OF MIDWIFERY: SYMPTOMS SIMULATING THOSE OF HYDROPHOBIA.

To the Editor of THE LANCET.

SIR,—The following case occurred in the practice of Mr. Henry Rowland Hurst, and I trust from its rarity you will deem it of sufficient importance to give it as wide a circulation as possible in the columns of your journal:—

Mrs. G—, aged twenty-seven, a farmer's wife, residing in Berkshire, was delivered of her first child in the ordinary time. On the third day Mr. Hurst was requested to come immediately, as the patient had had several fits, and was foaming at the mouth, and when any fluid was offered to her she went off into a fit. On Mr. Hurst's arrival, he at once pronounced it to be hydrophobia, but was afraid to ask the question if she had ever been bitten by a dog. On more minute inquiries from the nurse, he ascertained that the lochia had been suppressed from the birth of the child; and conceiving this to be the cause of these alarming fits, he administered an injection of castor oil, and also got some down by the mouth, but with difficulty. The oil acted, and was repeated; the fits gradually became less in intensity, and finally ceased on the appearance of the natural discharge. She made a good recovery.

On inquiry about such rare cases, I extract the following from Dr. Palfrey's letter:—"Twice in my life I have seen exactly such cases. The first was a patient of the Guy's Charity. So exactly did the case resemble hydrophobia that Dr. Lever took to see the case with us Drs. Addison, Hughes, and (I believe) Dr. Barlow, and, in addition, several of the surgical staff went to see the case. The woman, aged twenty-two, unmarried, was attacked suddenly on the fourth morning after delivery. No history of a bite. Dr. Lever had every two hours administered an enema of spt. terebinth., assafetida, and gruel. The patient, after giving us an immense deal of trouble, recovered perfectly. The other case occurred to me three years last September, at Watford, in Herts. I there saw in consultation a woman over thirty. There the symptoms came on within a few hours of her delivery. Her attendant was naturally alarmed, and when I arrived, certainly the woman was in a very sad state. Then, remembering our old hospital case, I gave a very favourable opinion; had the woman kept gently under the influence of chloroform for six or seven hours, at the same time fed well per rectum, and she had not a single bad symptom the next day. Now, will you permit me to remark that both my cases were the subjects of hysterical symptoms before delivery, and both women of a very excitable temperament. The notes of neither of my cases remark upon the particular condition of the lochia; therefore I conclude that secretion was not suppressed in either case. I do think you should send this case to the journals; its very rarity is the essence of its importance, and what a comfort to some brother in some far away place to have even read of such a case should one happen to him in practice."

It will be seen from the above that the treatment in these cases was widely different, and yet all recovered; therefore the prognosis in such cases is markedly favourable. The question now presents itself, Why should the bite of a mad dog and the cessation of a natural secretion after natural labour produce identical morbid symptoms?

I am, Sir, your obedient servant,
South Hackney, January, 1868.

W. STORY.

F.R.C.S. takes exception to the paragraph, we think, without sufficient reason. In the present state of obstetric practice, it is surely not necessary to send to London for a "physician-accoucheur" on the occurrence of every difficult or peculiar case. The writer of the case referred to merely gives his reasons for declining such assistance, and surely he was justified in doing so.

M. A. B.—The most important point is that not more than one medical candidate should go to the poll.

Dr. Dawey's communication shall receive attention next week.

THE AFTER-TREATMENT OF SCARLET FEVER.

To the Editor of THE LANCET.

SIR,—The sequelæ of scarlet fever are so frequently the dread of both the medical man and the mothers of the little ones who suffer from this disease, that I venture to lay before the profession a line of treatment which in my hands has been followed with wonderful success. I do not doubt that others have used the same or similar remedies; but, so far as I am aware, the profession generally is not sufficiently impressed with the almost specific nature of the treatment which I advocate; and as there has been, and still is, a considerable amount of scarlet fever about, I think the present a favourable time for making known my views.

After an attack of scarlet fever the little patient is usually left in a cachectic condition, with enlargement of the cervical glands, and an impoverished state of the blood, which too often is followed by some strumous affection, by mucous discharges from one or other of the passages, by nephritis, dropsy, rheumatism, or pericarditis. Now, when we consider the complications which may arise, and then remember the property of the drug which I use, the wonder is that it is not the universal treatment pursued by the profession.

"Iodine," says Squire, "acts especially as a stimulant to the entire lymphatic system, causing absorption, promoting elimination by the kidneys, acting as an antidote to certain blood poisons, organic and inorganic; also in chronic inflammations, promotes absorption and elimination in dropsies and chronic rheumatism; most efficacious in glandular enlargements, scrofulous glands of the neck, or as an alterative in obstinate mucous discharges."

During the convalescence of all cases of scarlet fever, I use iodine either in the form of syrup of the iodide of iron, or as iodide of potassium. I find, as a rule, the former preferable, because children like it on account of its sweetness, and I think the iron a good and useful combination. I have never seen anything but the best results, cautions as to clothing and the time of being allowed to go into the open air being enjoined. I sometimes use iodine to a very much enlarged gland externally. I think, with one exception, I have never seen a gland suppurate, and this case did not come under my care until too late. I have seen children who were reduced to a skeleton rally in a miraculous way after the use of the iodide; immensely enlarged cervical glands disappearing, and rosy cheeks and sparkling eyes taking the place of the ghastly remains of the former little one.

Every day the antiseptic treatment of disease is coming more into favour, and the day may not be far distant when we shall be able to destroy all fever poisons in their early stages, and thus free ourselves of the whole class of zymotic diseases. In the meantime, however, we are glad to know of anything which will in any way lessen the dangers of so virulent a poison, and I recommend the use of iodine as prescribed by myself after all cases of scarlet fever with the greatest confidence. Yours faithfully,

Harewood-square, N.W., Jan. 1868.

PERCY BOULTON, M.D.

W. S.—As the partnership will dissolve in March, it would not be improper to announce the fact by a circular, a copy of which might be sent enclosed with each account. There would be no objection to state where the two practices would in future be carried on.

Julius.—The degree is to be obtained, we believe, at San Francisco.

Mr. C. J. Hislop is thanked for his note.

UNPROFESSIONAL PRACTICE.

To the Editor of THE LANCET.

SIR,—Though possibly your attention is almost daily directed to similar cases, I venture to submit the following, especially as it seems to show the necessity of some legislation for the protection of the public as well as of the profession:—

A respectable-looking woman called on me a short time since relative to a cook who had reason to suppose herself pregnant, and wished to know if I could give her "something to prevent it." She said that she would not mind *what she paid*; that she had never been so before; that she had spent a good deal of money in different things; and that only last Saturday she went to a *chemist*, who gave her a bottle of medicine, 3s. 6d., and a box of pills, 1s., which had not done her any good.

Now, Sir, what could I do in this case but assure her that only certain chemists or unqualified and unprincipled men would take her money under such circumstances, and that to interfere in such cases was both criminal and highly dangerous to the patient. This advice I have repeatedly given, but *cui bono*? She may ask somewhere else, and I may be pooh-poohed, and she robbed and deceived.

There is a party not a hundred miles from me, who is unqualified, but protected by a man with a diploma, whose principal practice is, I have been told, of a nature worse than that above stated. He also visits, and attends midwifery at 10s. 6d. per case. Surely, Sir, there ought to be a Board to take up and investigate such cases on their attention being called to them; and surely there should be a law forbidding any qualified man lending the protection of his diploma to one unqualified. Again, Sir, if the same protection were afforded to members of the medical profession as the Legislature afford to patent medicines, there would be as little irregular prescribing and visiting as there is now selling proprietary articles without a stamp.

It really seems time that something should be done in earnest, or else, Sir, can you or any of your readers kindly inform me how one may be honest with profit, or contend with those who act and advertise only to entrap, rob, and fatten on the misfortunes, miseries, and necessities of others? Of course the nature of these cases prevents their exposure by the victims, and the disgraceful advertisements in the daily papers give those so advertising a certain standing, by which, I have little doubt, vast numbers are deceived. I am told of a pharmaceutical chemist who shows his diploma (which is very showy) of that Society, and by so doing, and being in a large thoroughfare, deceives a great number of people, who regard him as a "regular doctor." Ought this to be?

December, 1867.

I am, Sir, yours, &c.,

H. C.

THE columns of *The Times* of the 15th instant indicate an altogether new development of hospital work. The Secretary of one of the newest special institutions advertises that "the Council thankfully acknowledges £1;" and adds, "Timely treatment saves them from becoming insane or incurable." Unfortunate Council; yet fortunate in having so thoughtful a Secretary.

Rochdale.—A person calling himself Doctor and Herbalist would probably not come under the provisions of clause 40 of the Medical Act. He might be a Doctor of Music or any other Doctor.

R. G. J. O.—Walker on Intermarriage.

OPERATIONS UNDER ANÆSTHESIA.

To the Editor of THE LANCET.

SIR,—The following is the chronological history of painless surgical operations during the anæsthetic state, induced by the inhalation of narcotic and stimulating vapours:—

The first surgical operation during an anæsthetic condition, induced by the inhalation of the fumes from rum, was the reduction of a dislocation of the hip-joint of a negro, "Bob." Louisiana. By Dr. Collyer. December, 1839.

Extraction of tooth from Miss Mary Allen during an insensible condition, induced by the inhalation of ether combined with the fumes from poppy-seeds. Philadelphia. By Dr. Collyer. November, 1842.

Publication of "Psychography" (copyrighted work), wherein at pages 26, 27, and 28, particular mention is made that the inhalation of narcotic and stimulating vapours will produce the anæsthetic state. Philadelphia. By Dr. Collyer. May, 1843.

Insensibility produced by the inhalation of protoxide of nitrogen. Hartford, Connecticut. Horace Wells. 1845.

Publication in *Boston Medical Journal*, that ether combined with opium would produce the anæsthetic state. Boston. By Dr. Smilie. June, 1846.

Administration of ether by Drs. Morton and Jackson. Boston, United States. September, 1846.

Inhalation of chloroform. Edinburgh. By Dr. Simpson. 1854.

Amylene. London. By Dr. Snow. 1857.

Dichloride of methylene. London. By Dr. Richardson. 1867.

Yours obediently,

January, 1868.

ANÆSTHESIA.

P. A.—The *Englishwoman's Domestic Magazine* for November, 1867, and several previous numbers. It is said that "a handsome volume—with sketches of the kind of corset, stay, or compressor of whatever name, that has been worn by Eve's daughters of which any records or information can be found"—is in the press on this subject.

Students.—Brande and Taylor's Chemistry.

J. B., (Coventry).—We cannot recommend the person named.

Dr. Vernon will find the case noticed.

Veritas.—The gentleman in question is L.R.C.P. Edin. and L.R.C.S. Edin. (1867), and is registered.

COMMUNICATIONS, LETTERS, &c., have been received from—Sir Ranald Martin; Dr. Russell Reynolds; Sir Thomas Watson; Mr. Barwell; Major Ross, Woolwich; Sir Henry Thompson; Mr. Brown; Dr. Vernon; Mr. Grant; Mr. H. D. Workman; Dr. Holt Dunn; Mr. Milivard, Cardiff; Mr. Capes; Dr. Percy Boulton; Mr. Bartlett; Dr. Sandford; Dr. Turnbull, Liverpool; Messrs. Palmer and Co.; Dr. Davies, Swansea; Dr. Fletcher, Manchester; Dr. Wilson, Castle Eden; Mr. Wheeler; Mr. Lee; Dr. Cooke, Gloucester; Dr. Yates, Kingston, Canada; Dr. Broadbent; Dr. Trimmer, Okehampton; Mr. P. Squire; Mr. H. Watson, York; Dr. Glen, Glasgow; Dr. Ballard; Dr. Day, Stafford; Mr. Bucknell; Mr. Leeds, Sheffield; Dr. Cremer, Milan; Mr. Debenham; Mr. James, Southernhay; Dr. Bird, Bradford; Mr. Watt, Ballyjamesduff; Dr. Fitch, Maine; Dr. Pike, Weyhill; Mr. M. Hayman; Mr. Russell; Dr. Lewin; Mr. Trubshaw, Liverpool; Mr. Calthrop, Manchester; Dr. Fox, Broughton; Dr. Scott, Ben Rhydding; Dr. C. Mackay; Mr. Holland; Dr. Brown, Belfast; Dr. Blair, Denholm; Dr. Marsden; Mr. King; Mr. Branson; Mr. Barnes, Liverpool; Dr. Harding, Whittlesea; Dr. Belgrave, Hendon; Mr. Reid; Mr. Hodson; Mr. T. L. Gentles, Derby; Dr. Mayne, Leeds; Mr. Acton; Mr. Lupton; Mr. Little; Dr. Wood, Edinburgh; Mr. C. M'Cready, Dublin; Mr. Edwards, Cardiff; Mr. Ebsworth; Dr. Meller; Dr. Watson, Aberdeen; Dr. Davey, Northwoods; Dr. Rose, Kidderminster; Mr. Amphill; Mr. Sutton, Smethwick; Mr. Birkenruth; Dr. Robinson, Chesterfield; Dr. Knapp, Sackville, B.N.A.; Dr. Ketchen, Middlesborough; Mr. Hislop; Mr. Slace, Portland; Mr. Mosey, Liverpool; Dr. Warren, Boston, U.S.; Mr. Abereromby, Putney; Dr. Hardwicke; Mr. Ellis; Dr. Wiblin; Dr. Willmott; Mr. Mills, Lincoln; Mr. C. J. Fox; Dr. Shaw, Newcastle; Mr. Cheesewright; Mr. Allen, Presteign; Dr. Irvine; Dr. Piekop, Blackpool; Mr. Rouse, Taunton; Mr. W. Smith; Mr. M'Carthy, Manchester; Dr. St. John Coleman, Miltown Malbay; Mr. W. Hamilton; Mr. Heatly; Mr. Gramshaw, Saxmundham; Mr. Sandwell; Mr. Williams, Avondale; Dr. M'Cormac, Belfast; Dr. Kennedy, Portobello; Mr. Stone; Mr. Willis, Lewdown; Mr. Williams, Neath; Dr. Brunton; Mr. Howard, Ipswich; The Secretary of the Clinical Society of London; F.R.C.P.; H. H. V.; W. S.; The Registrar-General of Edinburgh; A. B. W.; Julius; F.R.C.S.; H.; A Poor Parish Doctor; Alula; B. G. J. O.; J. W., R.N.; Rochdale; Veritas; M.D.; Æsculapius, Junior; J. B. C.; Dublinensis; Royal Institution; The Secretary of the Industrial Dwellings Company; J. M'K.; Jamaicaensis; Ethnological Society; M.D. Edin.; Students; A. D.; A Junior Practitioner; Clericus; N. B.; Enquirer; &c. &c.

THE *Cambria Daily Leader*, the *Lynn Advertiser*, the *Newcastle Daily Chronicle*, the *Midland Counties Express*, the *Leeds Mercury*, the *Essex Herald*, the *Colonial Standard*, the *Bermuda Chronicle*, the *Gateshead Observer*, the *Indian Medical Gazette*, the *Christian Times*, the *Aberdeen Journal*, the *Wisbeach Chronicle*, the *Lynn News*, and the *Chelmsford Chronicle* have been received.