

evaporating spirit lotion is consequently substituted.

12. Pain and swelling nearly in *statu quo*. The redness and tension are perhaps a little diminished; the foot and ankle are œdematose; tongue pallid and flabby; bowels freely moved; pulse 100, tolerably full.

14. The pain, redness, and tumefaction, have rapidly diminished since the use of the spirit lotion. Tongue clean; bowels open; pulse 88.

17. The limb is perfectly easy whilst the patient remains quiet, but in the slightest attempt at motion, the pain returns as severely as ever. Tongue clean, but flabby; bowels open; pulse 80, full.

18. The patient was seized with rigors about an hour ago, and still continues shivering. The limb, too, has rapidly swollen since that time, particularly in the groin, and he cannot bear the slightest touch; tongue furred; bowels open once; pulse 120; twelve leeches to the groin; ten grains of Dover's powder exhibited immediately.

Eight o'clock p.m. Pain relieved by the leeches, but the swelling remained unreduced; the pain, however, returning as severe as formerly. Venesection to 16 ounces was had recourse to, and proved effectual in removing the pain.

19. The limb has remained easy since the venesection, but the intumescence has rather increased. Erysipelas has made its appearance in the leg from the foot to the knee, and appears to be occasioned by the leech-bites. Tongue pallid; bowels open once; pulse 102, full and hard. A strong purging draught with alkali to be given; to continue the antimonial mixture.

20. The erysipelas is subsiding; swelling of groin smaller; pain less severe; tongue furred; pulse 80, full and soft; countenance cheerful; to repeat the alkaline purge.

23. The swelling in the thigh, and the erysipelas in the leg, are gradually disappearing; tongue clean, but flabby; bowels open; pulse 84, full. The patient can move the limb without pain. He sleeps well, and his appetite is reviving.

24. A resuscitation of the erysipelas on the dorsum pedis; bowels constipated; the thigh is still rather tumefied, but there is no pain; six leeches to be applied to the foot, and an alkaline purging draught to be swallowed immediately.

Aug. 3. The erysipelas has nearly gone; the tumefaction still unremoved; the pain and inflammation have subsided; the emunctories apparently act well, but the *ensemble* of the patient presents an unhealthy leucophlegmatic character.

10. The patient's general condition has improved; his appetite is good; the pain

and tumefaction of thigh-bone abated, and are scarcely appreciable, but the œdema of the leg has very much augmented. The use of the evaporating lotion is continued, and occasional purges are administered; his colour is slightly improved.

This is a case somewhat analogous to those described by Sir Henry Hallford at one of the evening conversations in the College of Physicians. The exciting cause, viz. the sudden application of cold, was the same, but in the present case no remarkable slowness or intermission of pulse has been observed, probably because no obliteration of the veins has taken place, although a suspicion of such a fact is excited by the increased œdema of the affected, and a certain hardness perceptible in the course of the femoral vessels. This is a circumstance, however, which remains to be proved by the subsequent history of the case.

LONDON HOSPITAL.

STRICTURE OF THE URETHRA, PRODUCED BY EXTERNAL VIOLENCE.

H. I., seaman, ætat. 34, was admitted into the hospital about three months since on account of difficulty in voiding his urine. The patient stated, that about ten weeks previous to his admission, he fell across a plank, which passing between his legs, struck the perineum violently, there was considerable hæmorrhage from the urethra immediately after the accident, which was arrested by means of cold applied to the part, and he continued for some time to pass blood with his urine. In a short time he found considerable difficulty in passing his urine; this gradually increased. At the time of his admission the urine flowed in a very small spiral stream. There was a very firm stricture at the membranous portion of the urethra.

After considerable difficulty, Mr. Scott succeeded in introducing a catheter (No. 2) through the stricture into the bladder, which was kept in the bladder by tapes, and withdrawn at the expiration of two days, when the next size was introduced, continuing to increase the size every second or third day, each catheter being allowed to remain in the bladder until succeeded by a larger, until No. 12 was introduced with ease, and the man left the hospital with the obstruction apparently quite removed.

FRACTURE OF THE OLECRANON FOLLOWED BY ERYSIPELATOUS INFLAMMATION.

ON the 26th May, H. L., a stout muscular man, about thirty-eight years of age,

came to this Hospital, and was admitted under the care of Mr. Scott, labouring under fracture of the olecranon, with erysipelous inflammation of the arm.

He stated that about four days previous to his applying here, while walking on the pavement he fell down, and putting out his arm to save himself, fell with the point of the elbow on the stones; he thought very little of the accident, and continued to follow his employment; the arm was very painful, but not so much so as to cause him to lay by until the day previous to his admission, when it became much inflamed.

On his admission the limb was greatly swollen from just above the elbow-joint to near the wrist; the integuments of the swollen parts were at the same time of a bright-red colour, tense, and when touched excessively painful, there were also red lines extending in the course of the absorbents towards the axilla. Owing to the swollen state of the integuments the fracture was not so distinct, but the crepitus could be felt. The constitutional symptoms were severe; countenance anxious; face flushed; pain in the head; tongue furred; skin hot and dry; pulse 120, full and strong. Was ordered calomel and jalap half a drachm immediately; to take two grains of calomel every six hours, to have 30 leeches to the arm, and afterwards the spirit lotion.

27. Swelling of the arm not at all diminished; the pain is very severe; the inflammation is extending up the arm; bowels freely opened; pain in the head is not so severe; pulse full and strong; tongue less furred.

To repeat the leeches and continue the spirit lotion; continue the calomel.

28. Pain in the head much diminished, and the constitutional symptoms are much relieved, but the pain and tension of the arm are much the same as yesterday. To repeat the leeches, &c.

29. The arm continues very much swollen and painful, but the redness is rather diminished; his bowels are confined, and complains of pain in the head; skin hot and dry; tongue furred; to have a dose of calomel and jalap immediately.

30. Bowels freely opened by the powder; mouth affected by the calomel; the feverish symptoms present yesterday have subsided, but the local symptoms are much the same as on his admission. Mr. Scott considered it a fair case for incision, and consequently made three or four incisions with a scalpel the length of the part inflamed, and directed the arm to be enveloped in flannels wrung out of hot water, after which a linseed-meal poultice to be applied.

31. Passed a much more comfortable

night than any since he has been in the hospital; the pain in the arm is much relieved, and the redness on the anterior part of the fore-arm considerably less; the swelling around the back part of the fore-arm, elbow, and lower part of the upper arm, much the same as yesterday; bowels open, tongue clean; pulse soft and compressible; to have three grains of the sulphate of quinine three times a day, and eight ounces of wine.

June 1. Had several hours comfortable sleep during the night; bowels open; tongue clean; the tension and redness of the arm much the same as yesterday. Mr. Scott made two incisions about six inches in length, commencing above the elbow through the inflamed integuments, and directed the arm to be again enveloped in flannels wrung out of hot water. To continue the poultice.

3. The arm decidedly improved; tension, pain, and redness, much diminished; pulse quiet; tongue clean; bowels open; in every respect doing well. To continue the quinine and wine, and to have a pint of porter in addition.

3. Sleeps well, and is free from any unfavourable constitutional symptoms; the arm looks well.

4. In every respect doing well.

6. Continues to improve, and spirits excellent; wished to be allowed to get up; bowels open; tongue clean; pulse good; the limb is nearly of the natural size. Mr. Scott ordered it to be gently rolled. To continue the quinine with the wine and porter.

12. Going on extremely well; appetite good; spirits excellent; bowels open; is allowed to walk about the ward with the arm in a sling.

19. Has continued doing well, and is about to leave the hospital at his own request to attend as an out-patient.

INFLAMMATION OF THE TONGUE.

J. A., weaver, ætat. 29, was admitted on the 29th of July, under the care of Mr. Andrews, labouring under inflammation of the tongue. The tongue is very much hypertrophied, so much so as almost to prevent the patient articulating; has considerable difficulty in deglutition, and there is a constant flow of viscid saliva. The patient has been in this state for about seven days, and cannot assign any reason for the attack; has not taken any mercury, or any other medicine, excepting a dose of salts, which he took the day previous to his applying here. The glands beneath the tongue are not much enlarged; he was ordered a blister to the throat, and to use the following gargle:—

℞ *Myrrha* ℥ss ;
Aceti ℥ij ;
Aque ℥vj. *Ft. gargarisma* ;
Calomel and jalap ℥j *statim*.

The following day he appeared relieved ; the blister rose well ; there was less salivary discharge ; the powder opened his bowels freely.

Aug. 1. Going on well ; his bowels not having been relieved, to take a dose of house-medicine.

3rd. The patient suddenly refused to remain in the hospital any longer, and under the pretence of taking a walk in the garden of the hospital, walked himself home. When he left the hospital he was much relieved.

NOTE FROM DR. LATTA.

To the Editor of THE LANCET.

SIR,—In the "index" on the cover of THE LANCET of August 4th, I was much surprised to see noted, "Quarrel between Drs. Latta and Craigie, of Leith," which, by the accompanying statement, is represented as having originated in consequence of Dr. Craigie not mentioning me in his newspaper communications as having first practised venous injection. Now all this is quite a mistake. In the first place, the quarrel is not mine, but Dr. Craigie's and Mr. Mitchell's, and originated, not from any complaint on my part, but in consequence of Dr. Craigie applying to a remark made by Mr. Mitchell, the offensive terms of "utterly false." As for my name being coupled with venous injection, that is an honour I have not been remarkably fastidious about. Nay, the good Doctor mentioning me at all in his lucubrations, is what I did not look for, the omission, therefore, could not be the ground of very serious quarrel.

The matter is too insignificant for you to revert to, or you would find I did not write to complain of the want of courtesy on this point, but was compelled to come forward in vindication of Mr. Mitchell's integrity (who, unknown to me, made the remarks in the *Observer* which called forth the Doctor's ire), and in defence of my own conduct and practice, both of which have been misrepresented in Dr. C.'s pamphlet.

I have the honour to be, Sir,

Your most obedient servant,

THOMAS LATTA, M. D.

Aug. 8, Leith, 1832.

DR. AYRE'S LETTER.—Dr. Ayre has requested us to add the following note to *Rosanna Curry's* case, page 616. As it reached us, however, too late to be ap-

ended to the case itself, we insert it here :
 "The unusual quantity of the medicine given in this case arose from two causes ; first, from a mistake in intermitting the medicine during some hours when the urgency of the symptoms rendered its continuance most important ; and, secondly, from an officious friend giving her some orange, when the disease, which was subsiding, relapsed into all its violence."

CORRESPONDENTS, &c.

"MR. EDITOR,—Can you inform me if medical officers of the army and navy, who entered the public service before 1815, are entitled to practise and recover their bills by law, as apothecaries, without undergoing any examination at old Rhabab Hall?"—They are not entitled to practise, as apothecaries, and consequently cannot recover the amount of their charges. The "Declaratory Act" of 1822, was passed in order to remedy this gross and flagrant injustice, but as it was enacted for only one year, naval and military surgeons are left in the same unprotected state as they had been in from 1815. The laws relating to practitioners in medicine will never undergo any really beneficial change, except through the interference of the LONDON COLLEGE OF MEDICINE, and every physician or surgeon who may be the victim of the existing defects in our statutes, becomes, by withholding support from that institution, the voluntary instrument of his oppression, degradation, and poverty.

Jachin is not legally qualified, and could only be admitted on examination.

A Care-worn Student.—This part of our journal does not admit of the insertion of such a lengthened notice as a full reply to his question requires, but if he will obtain a copy of the regulations, to be had at the Company's Hall, he can ascertain all that he wishes to know.

A Medical Pupil.—Such an occurrence is, we imagine, impossible. From very trifling causes, such as the mere shutting of a drawer by slight pressure on the thigh-bone of an aged person, an accident of the kind may take place, but not during "perfect quietude."

M. S.—Gregory's "Practice of Physic" is the best elementary system he can study. By-and-by he may read Abercrombie on the Head and Abdomen, and Laennec on the Chest. He may finish with the recondite Mason Good.

ERRATA.—Dr. Girdwood's paper on Venous Injections, in No. 467.

The paragraph at the end of Case 4, page 506, beginning "Continual vomiting," &c. should be transferred to Case 5, and come in five lines from the bottom, directly after the words "the collapse was very great."

Page 595, col. 2, lines 17, 18, for "and she wasted in flesh," read "used in washing flesh." Lines 19, 20, 21, alter the word "all" to "until," and transpose the sentence "No urine was passed until the day after the bleeding," to line 44, and place it after the words "She is now out of danger."

Dr. Girdwood's address is "Paddington," not "Islington."