

Honourable Court's Letter, 5th of February, 1823. officers of your medical establishment" was "fully commensurate with the advantages of your military servants."

11thly.—That the facts stated by your Memorialist in paragraphs 2, 4, 8 and 9, prove how completely this principle was lost sight of in framing the medical retiring regulations of 1842 and 1844.

12thly.—That your Memorialist has served your honourable Court upwards of a quarter of a century, and he believes with fidelity and zeal as in duty bound, and he now most respectfully and earnestly prays—

1. That he may not be deprived of the benefit of the retiring regulations which were in existence when he received his appointment of assistant-surgeon, and on the faith of the permanence of which he entered your service.

2. That he may be allowed the option, in common with your military servants, of retiring on the pension of a major *four* years from the date on which he became entitled by existing regulations to the pension of a captain, and on the pension of a lieutenant-colonel *four* years from the date on which he would thus become entitled to the pension of a major. And your Memorialist feels confident that your honourable Court, guided by the principles of justice and equity, will graciously sanction his prayer.

And your Memorialist, as in duty bound, will ever pray.

Bombay, July 31st, 1854.

M. STOVELL,
Surgeon, Bombay Army

Correspondence.

"Audi alteram partem."

TREATMENT OF GUN-SHOT AND INCISED WOUNDS RECEIVED IN BATTLE.

To the Editor of THE LANCET.

SIR,—Will you kindly afford me a little space in your valuable journal to express an opinion upon the importance of depletion by venesection in the treatment of wounds received in warfare? such as those occurring from puncture, *especially bayonet wounds*; from laceration, as by bullet or any other missile; incised wounds; and in cases of severe contusions, as from spent balls, fragments of shell, &c. &c., and adopted at a time when the system has fully recovered from the shock of such a casualty, and before severe inflammatory action has set in; and particularly in those cases where the nature of the injury has not involved any serious hæmorrhage, which that oracular military surgeon, Mr. Guthrie, states seldom to be the case. It must be ceded to me, that the danger of every wound is enhanced in proportion to the extent and severity of the supervening inflammation; and when terminating fatally, the event is attributable almost solely to the failure in the subduction of that most serious condition; most wounds assuming a benign character before inflammatory reaction occurs, and in many instances are subjects of a favourable prognosis; to anticipate and control which morbid state is my object in advocating timely and sufficient depletion. In a conversation I had with the late memorable Mr. Liston upon the subject of bloodletting, he and a surgeon who was present, I believe Mr. Johnston, both fully concurred with me in the propriety of its adoption in all acute inflammations, and Mr. Liston stated to me emphatically that "he never found the loss of blood any impediment to the success of his operations."

A corroborative case, which occurred in the practice of the late Sir Astley Cooper, many years since, which from its extraordinary character and the miraculous recovery of the patient became a matter of great notoriety, is one of the innumerable instances supporting my theory. It was that of a man who was impaled by the shaft of a carriage passing through his body, upon the retraction of which an unprecedented hæmorrhage ensued, and which was no doubt the proximate cause of his recovery. For what more could Sir Astley do in such a case than cover the external wounds, to ward off the approach of the irritating atmosphere, and attend to the general health of his patient, and leave the *vis medicatrix nature* to complete the cure? Another case more apposite to this subject occurred to a gentleman of the name of Ponsonby, who was lying wounded on the field of Waterloo, when a French lancer riding by perceived him, and exclaimed, "Vous n'etes pas encore mort, coquin," piercing him at the same time with his lance, which wound bled profusely, and his recovery was attributed to that accidental circumstance. Heurnius,* in his "Com-

mentary upon the third Aphorism of Hippocrates," strongly advocates and confirms the propriety of depletory treatment by the example of the Prince of Orange, who, being wounded in the neck, lost pounds of blood daily without any fatal diminution of strength; which, if, as I think does not admit a doubt, it is in the slightest degree competent to mitigate the sufferings and enhance the chances of recovery of the brave fellows engaged in war, more especially our gallant Crimean band, should not be neglected and lost sight of amidst the vulgar prejudices to the use of the lancet, amongst those who are ignorant of its value, from a perfect incompetence to form an opinion, never having properly tested it.

I am, Sir, yours respectfully,

JOHN LANGLEY.

Upper Albany-street, Regent's-park, December, 1854.

IS THE ASIATIC CHOLERA CONTAGIOUS?

To the Editor of THE LANCET.

SIR,—My attention was drawn to a letter, in last week's LANCET, from Mr. Waddington, headed "Is the Asiatic Cholera a Contagious Disease?" I for one quite agree with the sentiments he expresses, that the Asiatic cholera is neither "contagious nor infectious." I had ample opportunities of witnessing the disease in all its forms when it was raging in 1849, and the conclusions I then formed were, that the cholera did not spread by contagion, but the greater number who fell victims to its ravages were influenced by fright and a dread of the disease, which, acting upon the weak, the ill-fed, and the ill-clothed, rendered the body predisposed to receive the complaint. I have no hesitation in affirming that the disease spreads from place to place from some unknown atmospheric cause acting upon the nervous system, and not from infection. It is a well-known fact, that lunatic asylums are exempt from this direful enemy.* During last year, when the disease made such havoc in Newcastle and the neighbourhood around, the inmates of the lunatic asylum did not suffer; whilst workhouses, prisons, and barracks, are always visited by this unwelcome guest, simply because they are informed that the disease is making great havoc on the outside of their domiciles, which produces an alarm and shock to the nervous system. But the inmates of lunatic asylums are in that state of mental derangement as to be incapable of receiving an impression or shock upon the nervous system. I am not aware that the disease has ever entered any of the lunatic asylums. Now, if it is a contagious disease, why are these places exempt? and why are so few medical men and nurses taken off by the disease? Those medical gentlemen who have fallen a sacrifice to this affection are those who have been in constant attendance upon the sick, producing thereby an enervated state of the system, and rendering the body predisposed to receive the disease. The first case, which occurred at Jessore, could not have arisen from contagion, neither did it spread by contagion. Could the vessel which arrived at Sunderland, in 1832, containing cholera cases, have been the cause of the outbreak in that town? Certainly not: the few cases of cholera which occurred on board that vessel could not have contaminated the whole atmosphere of Sunderland. The disease broke out in parts of the town a long distance from where the vessel touched, and where no communication had taken place between the healthy and those suffering from the affection. The landing from the vessel happened to be a coincident, but the medical men referred the cause and the contagious nature of the disease to that event.

I am, Sir, your obedient servant,

Brynmaur, Breconshire, December, 1854.

HENRY HANCOX, M.D.

THE JOURNAL OF THE PROVINCIAL MEDICAL AND SURGICAL ASSOCIATION.

To the Editor of THE LANCET.

SIR,—If I address the following replies to the Editor of the Association Journal, who does me the honour to ask my

hoc est, larga sanguinis emissione. Videmus ex corporibus bene habitis, per vulnera, incredibilem interdum sanguinis copiam efferri sine noxa. Illustrissimus Auran- tie Princeps Guilielmus Nassovius Antverpiæ à latrone læsus sclopeto in collo, it aut iugularis vena magnailla maximam copiam sanguinis funderet, per plurimos dies, cum cottidie plures libras sanguinis emitteret, salvis veribus evasit. Non enim potuit fistiilla fluxio. Tandem quidam strepto digestivo illito ac involuto colcothareid perfectit.—HEURN., *Comment. Hip.*, p. 32.

* This is not correct. The inmates of the lunatic asylum at Peckham, amongst others, were visited severely by cholera.—Sub-Ed. LANCET.

* Laxabimus talem habitum copiosa evacuatione, maximeque Phlebotomia,