

Ricardo, Mr. Dendy, &c. Mr. Pattison, M.P., took the chair; looked rather ashamed of the little knot. About forty more persons then arrived: about one hundred altogether. The public as well as the profession spy a job.

Dr. SMITH read a dull and tedious defence of the scheme; his manuscripts confused and misplaced, and obliged to make awful pauses to regain the thread. The audience so tired in an hour that room was left for half a hundred more. One gent., seemingly queer or drunk, showed excitement or interest in the proceedings, though whether for or against the San. was not very clear. After this, five or six other speakers addressed the handful that remained. One, a brazier, lamented the difficulty of obtaining warming-pans in common lodgings, and promised that in the San. every man should have his own. Mr. Grainger showed that existing relations between medical men and their patients were not to be disturbed. Mr. Pilcher, the probable future surgeon, not present. At half-past three the speakers stopped. Several gentlemen present who did not move an amendment, but left the affair to die a natural death. Shall watch the committee. The profession should know who are working for and who against them.

"Fœnum habent in cornu."

OLD REPORTER.

James-street, Bedford-row,
March 10.

KALI PURUM.—STRICTURE OF THE URETHRA.

To the Editor of THE LANCET.

SIR:—THE LANCET of the 22nd ult. contains a report of a discussion in the Westminster Medical Society on the treatment of stricture, headed, "New Mode of treating Stricture." Now, it certainly cannot be very new, for by referring to the 1st vol of the "Edin. Med. and Surg. Journal," published in 1805, at page 214, there is a review of a work on that subject by Mr. Whately; and it is a singular coincidence that Mr. Whately's mode of application of the kali purum, as it was then called, and his arguments in its favour, and those of the reviewer against it, should be nearly similar to those used in the discussion in the Westminster Society. I am, Sir, your humble servant,

CHRIS. BOWES.

Richmond, March 5, 1840.

DEFORMED INFANT.

To the Editor of THE LANCET.

SIR:—The following description of a *lusus naturæ* may be worthy a place in

your Journal. I am, Sir, your obedient servant,

EDWYN GURNEY.

Camborne, Cornwall,
March 12, 1840.

Ienofer Treccela, of Camborne, aged 24, was delivered of her first child on Wednesday afternoon, March 11th, 1840, at about five o'clock. The labour was natural; the child's head was a little larger than usual, and the child altogether of about the average size. On looking at its right hand, I found it deformed; the humerus was of the same length as that of the left arm; but the radius and ulna were very short, straight down from the elbow, in which there was very little motion. The hand turned up at right angles, like a foot, with four fingers; the fore and middle fingers were webbed; the ring and little fingers were perfect; there was no thumb. The right thigh was very short, as was also the leg, which was crooked; the foot was clubbed, and the great toe like a thumb: the whole length of this limb was about the length of the opposite thigh. On inspecting the genitals, nothing was to be seen but an elongation of skin, on reflecting which, a glans was exposed, the whole, in length, half an inch. There was no scrotum, no labia, no vaginal orifice, no septum, no anus, not a mark of any kind, not even an orifice in the penis; all the rest of the child, externally, was perfect. The child breathed for a few minutes, and expired. No dissection allowed.

FEES AT INQUESTS.

To the Editor of THE LANCET.

SIR:—As a doubt on the subject exists in the mind of the Coroner for this district, I should feel obliged by your informing me whether the surgeon of a Union workhouse is entitled to his fees for giving evidence touching the death of a pauper in such workhouse? I am, Sir, yours,

Richmond, March 16, 1840. M. O.

* * He is entitled.

DIAGNOSIS OF HERNIA.

M. LANGIER thinks that the following sign will enable us to determine whether a portion of the intestinal canal (and what portion) is contained in the hernial sac. This sign is furnished by the meteorism, when studied before the appearance of peritonitis. The extent, form, and seat of this meteorism vary according to the species of the hernia. If the contents of the sac be epiploon, then the abdomen is souple, and no meteorism exists; while on the con-