

is placed around the edges of the face-piece—the only part of the apparatus that comes in contact with the face, and that is, or ought to be, renewed on every fresh operation.

The objects in view are to administer the agent effectually, without any unnecessary waste, or excoriating the skin; and when we consider this, and the uncertainty of the time that is required to bring a patient under its proper influence, it must be allowed that they are cogent reasons for the adoption of a simple, efficacious, and portable apparatus, furnished with the valves necessary for inspiration and expiration.

In conclusion, I have only to observe, that I have never, in a single instance, failed with the new agent in producing the proper status for operating when an apparatus has been employed; and that it is the surest, safest, and most economical mode adopted, is amply testified by its use by our hospital surgeons.—I remain, Sir, your obedient servant,

Gower-street, Bedford-square, Jan. 1848.

J. ROBINSON.

#### SOURCE OF HÆMORRHAGE ON SEPARATION OF THE PLACENTA.

[NOTE FROM DR. RADFORD.]

To the Editor of THE LANCET.

SIR,—In your two last numbers Dr. Chowne has, in the most temperate and gentlemanly tone, made some remarks on some of my opinions contained in papers published in THE LANCET, &c., and I should not at this stage of his paper, being yet "incomplete," or unfinished, have ventured to make any observations upon it if I had not felt conscious I had made an important omission in one part of the paragraph quoted by him from one of my former papers in the *London Medical Gazette*, vol. xxxvi. p. 1246. It was originally written in my "Essay on the Structure of the Human Placenta," &c., and as it there stood with the context, indicated what I meant; but isolated from its original connexion, not by Dr. Chowne, but by myself, it is indefinite, and calculated to make an erroneous impression of my meaning.

Dr. Chowne observes, "Dr. Radford says, 'I was led to draw, from a number of selected cases (of 'collected facts'), the following inference:—that the child continues to live in cases in which the placenta is completely detached from the uterus, and excluded from its cavity, provided its organization is not broken up.'"

It ought to have stood as follows:—"That the child continues to live for at least a short time in cases in which," &c. &c.

If Dr. Chowne had read the sentence he has quoted in its original place he would have seen my meaning, and the objects I intended to serve by it. At a future time I may take up this subject again, and then endeavour to make my views more intelligible.

In conclusion, I beg to assure Dr. Chowne, that although I cannot agree with some of his deductions, I feel obliged to him for having called my attention to the want of "qualification" in the statement made in the paragraph he quoted.

I have the honour to be, yours most respectfully,

Manchester, January, 1848.

THOMAS RADFORD.

#### ON SUMMONING MEDICAL WITNESSES AT INQUESTS.

To the Editor of THE LANCET.

SIR,—In reference to the comment which you have been good enough to bestow upon my note about summoning medical witnesses at inquests, I beg to say that there had been no medical practitioner in attendance on the lady "up to" or "near to" the time of her death, and consequently I was only called in at the time of the discovery of her death by the servants, for she had been dead several hours; therefore, according to your opinion, I ought to have received the order for a *post-mortem*, and the summons to give evidence.

In communicating the facts of this case to the medical public, my object is not so much to blame the Coroner as to point out how practitioners are sometimes "done out of" the fees, and, as I said before, that which is of much more consequence, the reputational benefit arising from giving evidence to a coroner and jury, by the jobbing which is in the power of the summoning officer, who can generally suggest the name of the medical witness, and who is usually open to the influence of a fee. Let me trace the proceedings in the case alluded to. The beadle comes to me, and soon finds that I can say nothing without a *post-mortem* examination, and of course is sharp enough to know that one medical man can do this as well as another; he leaves me, saying he will let me know when my evidence is required, but directly takes care to summon the parish surgeon. I can prove that he was desired by the friends of the deceased to summon me, and that he said I

could not be summoned, but that the parish-surgeon must be had. What the real working of all this is I can only guess; but, however it may be, whether the coroner choose to employ one particular surgeon, or the beadle has a peculiar liking to the same gentleman, I know not; but this I can say, that since my letter to you appeared, a practitioner in my parish has taken the trouble to call upon me to say that such cases have more than once occurred to him, and that he is ready to place an account of the cases before any one, with the official correspondence upon them. Another gentleman has told me that he had so often suffered in the same way, by not being summoned, that he now revenge himself by filling up a certificate of death at once, and so preventing an inquest: thus we see how a really serious evil grows out of a little petty jobbing. The gentlemen referred to both authorize me to give their names, if required.

One word with regard to the general question: it need scarcely be hinted that there are in many cases of poisoning certain evanescent signs, such as smell, or stains upon the lip or other parts, attitude, expression of the face, amount of rigidity of the limbs, and such like, which a medical man only can observe properly; these may all be overlooked by ordinary observers, and would be completely destroyed before the nominee of the Coroner even sees the subject; and, moreover, it is quite possible that poisoning by prussic acid, strychnia, and opium, for example, might be overlooked in a *post-mortem* examination made some days after death, and unaided by any circumstances calculated to excite suspicion.

Thanking you for the notice you have taken of the affair,

I beg to remain, Sir, your obedient servant,  
Golden-square, St. James's, January, 1848. GEORGE REDFORD.

To the Editor of THE LANCET.

SIR,—In your last number my name is mentioned in a letter signed "Geo. Redford," in connexion with implied charges of jobbing, bribery, and corruption.

In reply, I beg to state that I am wholly unknown to the Coroner, (except as a medical witness,) and that I am not a fee-er of the beadle.—I am, Sir, your obedient servant,  
Marlborough-street, January, 1848. J. G. FRENCH.

#### EFFECT OF TURPENTINE IN DIABETES.

To the Editor of THE LANCET.

SIR,—In the absence of any medicine having any immediate or certain influence over diabetes, any remedy which can mitigate and temporarily arrest, if not cure, this malady, must demand attention. A patient of mine, aged forty-four, of a scrofulous diathesis, has been suffering from diabetes for ten months, during which period the minimum quantity of water passed daily was nearly two gallons. About six weeks since alarming hæmoptysis appeared, (phthisis having supervened,) to relieve which I administered spirit of turpentine. With the first dose the quantity of water diminished greatly, and after she had taken two or three doses of turpentine the urine was passed in its normal quantity, though not in its normal condition, as I could still obtain sugar by evaporation. I regarded this improvement in the diabetes as a mere coincidence, but on withdrawing the turpentine the water again increased, and that dreadful thirst, which had been absent, returned.

As the quantity of urine passed continued in very large quantity, I again had recourse to turpentine in the form of Ohio turpentine. Instantly, as by magic, the quantity of urine decreased, has remained so, and I well know, that were I to omit the turpentine for one day, two gallons and a half of water would be the result. Would it be worth while for pathologists and physicians to direct attention to the absorbent system in this disease? Is the fact of such excessive absorption of the fluids of the body primary or secondary?

I remain, Sir, your obedient servant,

Devon, January, 1848.

INQUIRER.

#### THE "NEW" POOR LAW BOARD.—REFUSAL OF PAYMENT TO A MEDICAL OFFICER FOR AN OPERATION IN AN "URGENT" CASE WITHOUT AN "ORDER."

IN relation to the Croydon case the following important correspondence has been published in *The Times*:—

SIR,—The poor-law medical officers are really very awkwardly situated. One, as in the case of Mr. Berncastle, of Croydon, reported in *The Times* of to-day, is subjected to a painful reprimand for not attending a poor woman to whom the guardians and

relieving-officer had refused a medical order, and one, as instanced in myself, is denied the payment of his legal fee on the plea of his having presumed to operate on a patient to whom "no order was given, either by the guardians, their relieving-officer, or an overseer." Last March I was sent for, late one evening, to visit Mrs. Shepherd, who I found had been suffering from strangulated femoral hernia during three days. I remained with her all night, using every endeavour to reduce the strangulation, without success. Very early in the morning, the symptoms indicating very imminent danger, I sent my carriage for Mr. M'Whinnie, of Bridge-street, Blackfriars, to assist me in the operation, which was attended with unusual difficulties, and it was performed about nine o'clock. Gangrene and erysipelas supervened, but after several weeks of severe and dangerous illness the patient perfectly recovered. I have made several applications to the board of guardians for my fee, with what degree of success the enclosed copies of letters will show. The husband of Mrs. Shepherd is an ostler, and his entire earnings probably do not exceed 14s. a week.

The fact is, the present system of medical relief is thoroughly vicious; the medical men should not be placed under the control of relieving-officers, as they now are.

If a sick person is to be attended, an "order" must be first had from the relieving-officer. If a patient is adjudged to require a bit of meat or a drop of beer, it rests with the relieving-officer to give the same or not, as he pleases, setting aside the doctor's opinion altogether. If any instrument is needed by a patient, the relieving-officer's "order" must be first obtained, although the medical officer is bound to provide all instruments at cost price. And if any operation is to be done, the relieving-officer must first grant his "order" if the surgeon have an eye to the fee or reward for the same. I assert this to be a deeply degrading position for medical men to be placed in. As medical men should be the most competent judges in all these matters, give them all the authority and all the responsibility; and if, when called upon to assign good and sufficient reasons for their conduct in any particular instance, they cannot do so, let them be reprimanded accordingly.

The guardians and the relieving-officer of Croydon miserably misinterpreted their duty when they rejected the poor woman's solicitation for a medical order, on the ground that she and her husband earned conjointly a guinea a week, as her condition inevitably cut off for a length of time all that portion of income derivable from her exertions; she might therefore, very properly, be considered to have been at that time within the pale of the poor law. Is the exercise of humanity to be expected from the medical officers, and not to be looked for in the guardians and the relieving-officers of the new poor law?

I am, Sir, your most obedient servant,

Upper Tooting, Jan. 12.

WILLIAM BAINBRIDGE.

Clapham-common, Jan. 6.

DEAR SIR,—I am directed by the guardians of the Wandsworth and Clapham Union to transmit to you a copy of a letter received by them from the poor-law board, in reference to your claim for a fee of 5*l.* for performing the operation for strangulated hernia in the case of Mrs. Shepherd.—I am, dear Sir, yours truly,

W. Bainbridge, Esq., Medical Officer,  
Upper Tooting.

BENJAMIN FIELD, Clerk.

(COPY.)

Poor-Law Board, Somerset-house, Jan. 5.

SIR,—I am directed by the poor-law board to acknowledge the receipt of your letter of the 24th ult., in which you request their opinion with reference to the claim of Mr. Bainbridge, medical officer for the Balham and Upper Tooting district of the Wandsworth and Clapham Union, to a fee of 5*l.* for performing the operation of strangulated hernia in the case of Mrs. Shepherd.

I am to state in reply, that the board see no sufficient ground for making the payment claimed by Mr. Bainbridge in the above-mentioned case. The patient was not a pauper, and no order was given to Mr. Bainbridge to attend her, either by the guardians, their relieving-officer, or an overseer.—I am, Sir, your most obedient servant,

EBRINGTON, Secretary.

To B. Field, Esq., Clerk to the Guardians,  
Wandsworth and Clapham Union, Clapham-common.

## POOR-LAW SURGEONS, AND DISADVANTAGES OF POOR-LAW UNIONS.

To the Editor of THE LANCET.

SIR,—The large union districts which have superseded the old system of parochial surgeonships, have not proved so advantageous to the medical practitioner as some persons at first expected would be the case; and my impression is, that all parties were better off under the old system than under the new, in so

far as regards medical relief. Formerly each surgeon took charge of such parishes as were conveniently situated in respect to his private practice, so that he could attend the paupers with very little extra toil, and with no addition to his expenses but the cost of the larger quantities of medicines &c. requisite for increased numbers. Hence he could attend the poor of several parishes, perhaps, and at a small salary for each, obtain a sufficient amount to cover his augmented outlay, and enable him even to reckon something in the shape of gain at the year's end. He cannot, however, do so under the union system, for the districts are now too extensive, and rather arranged for the convenience of the relieving-officers than the surgeon; and the latter, who might be anxious to take charge of the parishes in which his private practice chiefly lies, must, if he do so, take charge also of several other parishes, perhaps quite out of his beat, and that entail upon him such an additional amount of labour and mileage as obliges him of necessity to keep an extra horse, and perhaps also an extra assistant. In this way his expenses are greatly increased, so that instead of making a small profit of pauper practice, he actually loses money by it, seeing that the salaries in the aggregate are not higher than formerly, whilst the expenses attending the practice are seriously augmented. The more extensive the district, the larger of course will be the amount of toil and time requisite for the fulfilment of the duties of the office, and consequently, the time that can be devoted to private practice will be proportionally diminished, so that if a surgeon to a country district is so fortunate as to obtain so large a stipend as eighty or ninety pounds, (which is an unusually large sum,) he will find ample employment for himself, without private practice, if he faithfully performs his duty; whilst his druggist's bill, his horse and his groom, will absorb the whole of his salary. Hence, the extended districts appear to me in every point of view undesirable, either for the established practitioner or the junior candidate for practice, and instead of being better worth the attention of surgeons, as it was said the commissioners anticipated, they have manifestly proved decidedly prejudicial to the profession, as the prevalent dissatisfaction of the generality of union surgeons sufficiently testifies. The formation of such districts has at the same time, in many instances, added greatly to the distance the poor man has to travel in order to obtain medical aid, and at the same time it has not benefited the ratepayers, seeing that the present aggregate salaries are about equal to those formerly paid by the separate parishes. How, then, are these crying evils to be remedied? I would suggest, as a beginning, that the profession should contend strongly for the establishment of union dispensaries for the supply of all medicines and appliances for the sick poor of the several unions, medical officers, &c., and for a competent dispenser to be provided at the cost of the union: then let the guardians offer to the district officers such remuneration for their professional services as may be just and equal to the services required; in such an event, however small the amount of his salary, the surgeon will be able to reckon it as something in the shape of a payment for professional services, whereas the present salary, though appearing nominally larger, in reality yields hardly anything for professional services, by reason of the large deductions for drugs &c.

January, 1848.

A QUONDAM UNION SURGEON.

## INFANTILE MENSTRUATION.

To the Editor of THE LANCET.

SIR,—A short time since, I had a little patient, aged three years, and when I was prescribing for her, the mother hinted to me the necessity there was not to administer violent medicine, as the little child was "poorly." I found, on inquiry, that for twelve months this child had been regularly menstruating; and with the permission of the mother I stripped off the clothes, to observe the external organization of my patient.

The mammae were as healthily developed as in an adult of twenty years; the nates were also developed, the pubes having a slight flush of hair upon them; the labiae &c. as in a matured young person; the hymen was perfect, and the vagina anteriorly, was of large size. The countenance was antique, and, altogether, this babe of three years had the appearance and gait of a little old woman.

I observed the child for a few months; she menstruated regularly, and suffered all the concomitant uterine, lumbar, and other divers aches and pains, as is usual in those who perform this function, as evidencing a capability of utero-gestation. I gave the mother an earnest caution to guard her child; and I transmit a brief report of the case for your valuable columns, should you deem it worthy of insertion.

I am, Sir, obediently yours,

Brompton-row, Oct. 1847.

THOMAS EMBLING, M.R.C.S.L.