

What I have done was to publish cases of the following nature:—In two the precise situations of the fragments were at the time of operating unknown; presumably they were in the vitreous. The electro-magnet was introduced and the interior of the eye searched without success. Both globes were subsequently enucleated, and in each the fragment of metal was found firmly fixed in the optic disc, from which, I believe, the magnet would have been quite unable to have stirred them. One is recorded and discussed at length in my book on the "Electro-Magnet in Ophthalmic Surgery," page 48, and the other in the *British Medical Journal* for Nov. 8th, 1890, with a figure showing it embedded in the optic papilla. A third case is also recorded in the same number. In this case the vitreous was searched without extracting a foreign body. The condition of the eye was subsequently improved very much, and three months after the vitreous had become so clear that what was thought to be the foreign body was seen in the fundus not far from the optic disc and vision =  $\frac{2}{7}$ . In neither of these cases did I attempt to remove a foreign body from the retina, for the very excellent reason that I did not know that the first two were fixed in the optic papilla, nor that the last was situated in the retina. As Dr. Thompson says, I have removed a fragment which had presumably become detached from the place where it was seen in the retina, and at the time of extraction was, it was thought, lying free in the vitreous. It is recorded in the same number of the journal mentioned above. The patient recovered sight enough to distinguish fingers. The case in which I removed a foreign body from the retina is published among my series of electro-magnet cases, but is also dealt with at length in a paper published in the Transactions of the Ophthalmological Society for 1886, in which also Stevens' case will be found mentioned. Reasons are there given for believing the fragment was at the time of removal still situated in the retina. Cataract subsequently developed.

The paper just referred to is worth, perhaps, recalling here, because it dealt fully with the subject under discussion. It was entitled "Foreign Bodies in the Retina and Vitreous with Preservation of Sight," and I recorded five cases of fragments embedded in the retina, one of which was the case above mentioned. Reference was also made to the several cases published by others, which have been added to since this time, showing clearly that a splinter of steel or iron may be fixed in the background of the eye with retention of vision varying from perfect to less complete preservation, either permanently or for a lengthened period. I have four others at least to add to those then published as occurring in my practice. Some of these cases are undoubtedly suitable for attempting extraction with the electro-magnet. Dr. Thompson's was of this nature; but as by the record of many cases it has been proved that a fragment of metal may remain embedded in the retina with as little disturbance of vision as has been mentioned, it is desirable to consider each case as to its suitability or not for operative interference. A general resort to attempts at removal will, in my opinion, result in the sacrifice of more eyes than if they had been let alone. I hope at some future time to discuss this subject again, with the record of additional cases. An instance recently under observation was suitable for attempting removal with the electro-magnet, but an acute attack of erysipelas supervened after instilling on one occasion a drop of atropine, and valuable time has been lost. There is literature respecting the use of the electro-magnet which Dr. Thompson would have done well to have more carefully studied.

I am pleased to notice that Dr. Thompson now recognises that what he had described as a modification of my instrument is in reality not one. The description appeared some months ago in the lay, not medical, press, and there also the case of removal of a splinter from the retina did duty. It only recently, by accident, came under my notice. My interpretation of our conversation to which he refers is not altogether in harmony with his; and if I had then understood his object, I should have stated what I say now, that both the makers and myself have for many years been familiar with this so-called modification, and, further, that a magnet with such a "collar" has been in my own consulting-room for fully ten years. It was never my intention to put on record the various steps through which we passed in arriving at the instrument which was brought before the profession by me more than ten years ago. My object was rather to set forth the value such an instrument has in

ophthalmic surgery. I have myself put on record seventy-seven cases in which the electro-magnet has been used for splinters of iron or steel in various parts of the eye, and my subsequent cases will bring the number close up to 100. The electro-magnet as is generally supplied after my pattern has been shown after many years, in all parts, to have so well answered its object that it has hardly seemed to me to be worth while to publish any other observations on magnets somewhat differently constructed. Instead of a simple iron core or a hollow iron cylinder, experiments were made with magnets consisting of strands of iron wire to supplement the core and fixed to a collar. A magnet like this was made for me ten years ago.

I am, Sirs, yours truly,

November, 1890.

SIMEON SNELL.

## WANT OF ISOLATION ACCOMMODATION IN SOUTH HORNSEY.

*To the Editors of THE LANCET.*

SIRS,—In the first paragraph of his letter to you last week, Mr. Thomas S. H. Jackman acknowledges that the action of his board has hitherto been futile. With your permission, I will dispose of the personal matters very shortly. And, first, let me inform Mr. Jackman, since his deputy must surely have failed to do so, that I called upon that gentleman again, and very civilly told him that as he could do nothing, and as the matter was one of public importance, I should write to THE LANCET. His reply was that "he didn't think it would do much good"; he never hinted at any desire that I should regard our conversation as confidential, and I confess I fail to see in my action either lack of professional courtesy or breach of confidence. Next, as to my responsibility as a Poor-law official. My distinct instructions from the guardians are that it is no part of my duty to provide for the isolation of infectious disease, and that any pauper cases occurring in my district are to be reported immediately to the medical officer of health. I have invariably done this within six hours of my first visit to a case. Thirdly, I did suggest another method of procedure, and though Mr. Jackman's deputy pooh-poohed it, Mr. Jackman's board last week announced its intention of adopting it. Lastly, Mr. Jackman has omitted to point out which of my allegations are exaggerated; when he does so it will be time enough for me to withdraw them and apologise.

So much for the trumpery little side issues on which Mr. Jackman chooses to sail away. As to the main point, I trust he may yet find that the publication of my letter has been of assistance to him. It has brought me many interesting communications on the subject. Dr. F. Wallace, who is a member of the Hackney Board of Guardians and of the Metropolitan Asylums Board, has brought to the notice of both bodies "this very anomalous and dangerous state of things," and this afternoon he introduced to the latter board a deputation, consisting of the chairman, clerk, and medical officer of health of South Hornsey, to discuss the subject. The Rev. L. E. Shelford, rector of Stoke Newington, also a Hackney guardian, has supported Dr. Wallace at that board. Mr. Shelford puts the gist of the whole matter in nine words: "South Hornsey ought to be in the metropolitan area." Many doctors and laymen in the neighbourhood have expressed to me their satisfaction that the matter has been referred to THE LANCET; and I think Mr. Jackman may rest assured that by this means the somewhat original methods of South Hornsey sanitation, and the existence of this want—which "has been made no secret whatever of,"—will soonest attain that world-wide publicity which, according to his letter, the South Hornsey Board so ardently desires for them.

I am, Sirs, yours faithfully,

South Hornsey, N., Dec. 8th, 1891.

G. ANGUS HUNT.

## BROWN V. DUKES AND ANOTHER.

*To the Editors of THE LANCET.*

SIRS,—An appeal against the decision of the jury at the last Guildford Assizes, in the case of Brown v. Dukes and another, was heard on Tuesday last by the Master of the

Rolls and the Lords Justices Lopes and Kay.<sup>1</sup> All the judges emphatically condemn the action of the plaintiff's legal advisers in prosecuting this appeal. The same course could have been followed against any medical man in the kingdom. It is probable that the emphatic condemnation of the judges will, to some extent, stop such proceedings in future. This, however, is not much balm to those who have to bear the brunt of the plaintiff's action. Although the appeal was dismissed with costs, and the verdict for the defendants upheld, we are advised that there is no chance of recovering anything. If I were alone interested in the case, I should not now write to you; but my colleague feels it heavily, and, in my opinion, we ought not to bear this heavy charge without an attempt being made on the part of the members of the medical profession to lighten the burden thrown upon us. There is a case somewhat similar reported in yesterday's papers which ought to be treated in a similar manner, as until the law is altered the medical profession should surely determine to defend its members from the possible ruin which such proceedings might entail as a consequence of honestly performing a professional duty. I am not aware of the result of the appeal of Drs. Sutherland and Austin in your columns, but I thank them for having made it.

I am, Sirs, yours obediently,

Heath Lodge, Croydon, Dec. 5th, 1891. ALFRED CARPENTER.

\* \* It is impossible to deny that the case of the defendants in the above action is very hard, and such as to call for a wide expression of sympathy in the profession. It is little satisfaction to get verdicts and costs against plaintiffs and to have no chance of recovering the latter. We earnestly appeal to the profession to contribute to the expenses of these gentlemen. Dr. Carpenter does not write in his own interest so much as out of consideration to his colleague, who, he says, feels the burden heavily. As we have before intimated, we shall be glad to receive any sums in furtherance of this object.—ED. L.

## UNILATERAL PAROTITIS.

*To the Editors of THE LANCET.*

SIRS,—During the last six years three cases of unilateral parotitis have occurred in Westminster Hospital—two under my own care and one under that of a colleague—during strict treatment by nutrient enemata for gastric ulcer. In all there was some pyrexia and in one severe constitutional disturbance with suppuration of the gland. It is the belief of some that secondary parotitis may arise from retained and decomposed secretion owing to blocking of the ductus stenois in connexion with dryness of the buccal mucosa. I am unaware of any reported instances of parotitis appearing during rectal feeding, and, being inclined to think that the above-mentioned causal association may be illustrated by these cases, I write with the object of obtaining information from others on this point. I am, Sirs, yours truly,

Harley-street, W., Dec. 7th, 1891.

H. B. DONKIN.

## "A CASE IN MEDICAL JURISPRUDENCE."

*To the Editors of THE LANCET.*

SIRS,—Dr. Martindale C. Ward will find a parallel to his case of complete disappearance of the viscera (in a corpse which had long lain dead in an empty house) in the famous Arran murder case. The body of Mr. Rose, the victim, was found to be completely eviscerated, presumably by the action of maggots. The amount of material which these growing larval insects consume is marvellous, and their huge relative increase is a familiar biological fact. Little wonder that the viscera should disappear completely from any body in six months' time, with generation after generation of maggots feeding on its viscera. "Post-mortem digestion" surely could not act on the whole of the organs, and putrefaction alone will not account for the total clearing out of the cavities. Besides, the body in Dr. Ward's case must have lain in the house all through the summer, when the generative processes of flies are in full swing.

I am, Sirs, yours truly,

Edinburgh, Dec. 5th, 1891.

ANDREW WILSON.

P.S.—If Dr. Ward will refer to the reports of the Arran

murder trial, he will be able to compare the condition of the victim's body set forth by Drs. Littlejohn and Gilmour with the details he himself gives of the case at Teddington.

## THE CENSURE OF A MEDICAL OFFICER OF A WORKHOUSE BY A JURY.

*To the Editors of THE LANCET.*

SIRS,—Perhaps you will allow me the opportunity of correcting some misconceptions into which you have fallen in commenting on the above case in your last issue. They have doubtless arisen from the kind of reporting which, in my experience, is so common in dealing with medical matters. It is not surprising, however, in this instance, from the manner in which the inquest was conducted, that the reporters had some difficulty in discriminating between the evidence given by witnesses and the loudly expressed foregone conclusions at which a portion of the jury had obviously arrived. The first point I should like to correct is that I am stated to have thought the patient actually dying, and thereupon gave warning to the friends. What I did think was that from the patient's general condition a rapid alteration for the worse might be expected, and this I endeavoured to avert by treatment. The reports in the public prints which you have evidently consulted make much of the bruising of the patient's face and neck, and the conflict of evidence about them. As a matter of fact, there were no bruises of any description about either face or neck, and one can only conclude such had been conjured up in the inflamed minds of the jury. All that was seen on the face and neck by the friends and myself were some scratches, doubtless caused by the finger-nails of the patient before he was restrained. Unfortunately, the coroner did not view the body, and so was carried away by the exaggerated expressions of the jury. The coroner thought fit to take me to task about the writing of the certificate, but I may say that he afterwards admitted that I was perfectly within my right in doing so, and such is my present conviction. The fact is that the whole case was recklessly exaggerated for some reason or other; and not only was the result arrived at, as you say, carrying matters to an extreme, but, one can only imagine, was premeditated. As to want of attention on my part, the press do not state (which was given in evidence) that I saw the patient four times in the twenty-four hours preceding my last visit; and he was seen also by the assistant medical officer.

I am, Sir, yours obediently,

Bancroft-road, N.E., Dec. 9th, 1891.

A. H. ROBINSON.

## TREATMENT OF ENTERIC FEVER.

*To the Editors of THE LANCET.*

SIRS,—In the current number of THE LANCET there is an interesting account of the treatment of enteric fever by Dr. Pearson. As he is now in this country, I should like to ask him, through the medium of THE LANCET, what was the cause of the sudden outbreak of the epidemic which he mentions? Was it traced to its usual sources—pollution of the water or milk which was consumed? There is a peculiar interest attaching to this question, because it so happens that at the very time of this outbreak in Cape Colony we in England experienced our first visitation of influenza—viz., November, 1889. I am now writing on this subject, and should be glad if Dr. Pearson will give us more particulars. Strange that both he and I should have owed our success in the respective treatment of these two diseases to the use of a compound of chlorine, he giving chlorinated soda for one, and I the chloride of ammonium for the other.

Since writing the above I have read the remarks of Dr. Leeson on influenza, also in THE LANCET, and find that he looks upon isolation as sufficient to prevent its spread. He mentions that the 300 children in the orphanage thus escaped. Will Dr. Leeson kindly tell us whether he had any children under treatment outside the orphanage? In the first epidemic of influenza I do not remember a single case where a child suffered from it.

I am, Sirs, yours faithfully,

London, Dec. 7th, 1891.

GEORGE HERRING.

<sup>1</sup> See THE LANCET, p. 1315.