OBSERVATIONS ON THE INQUEST AT
HAMPTON, BY DR. HARE.

To the Editor of THE LANCET.

SIR,—As I consider the midwifery case at Hampton to be of the utmost consequence to the profession, I take leave to offer a few brief observations upon it. The conduct of Mr. Bowen in resisting a consultation in a case of so much difficulty and danger, I consider as unwise and reprehensible as his practice. If in the whole medical profession a single educated and respectable man can be found hardy enough to justify him, I can only say I am sorry for it.

He has great reason to congratulate himself upon the escape he has had, by the finding of a packed jury, and by the luminous and scientific observations of a non-medical coroner.

It ought to be held out as a beacon, illuminated with gas, and floated to the whole profession, to warn them of the danger of following such an example.

I remember to have seen a man with a lighted lantern placed at the entrance to certain ladies' apartments, in order to apprise unwary customers of their danger, this was called burning them out, hence, I suppose, the phrase, "a burning shame." Now is it not "a burning shame" that such a case should occur, in the nineteenth century, so near a metropolis famed for science and scientific men?

L. HARE, M.R.C.S.L.
13, Upper Gower Street, Bedford Square.
November 1st, 1830.

ST. BARTHOLOMEW'S HOSPITAL.

OPERATION FOR CATARACT.

On Friday last, Mr. Lawrence performed the operation for the extraction of cataract on the right eye of a man about sixty years of age.

The patient, being laid on the operating table, his head supported by a pillow, the upper half of the cornea was divided, and the lens lacerated in the usual manner. After a short time, the lens not being protruded by the efforts of the eye, slight pressure was made on it by means of Daville's curette. This had the effect of throwing the lens upwards and forwards against the posterior surface of the iris. The operator then introduced a needle through the pupil, and succeeded in removing the lens from the situation it then held; and pressure being again employed, a portion of the vitreous humour was discharged. Foiled in this

attempt, Mr. Lawrence introduced the curved needle a second time, and carried it behind the lens, which he endeavoured to transfix, but in vain. Recourse was again had to pressure, which was followed by a further escape of the vitreous humour, and the needle was then introduced a third time, but could not be made to pierce the lens, on account of the facility with which it slipped away under the slightest pressure against it. At length the curette was passed through the pupil, and the lens was immediately extracted. It was of an amber colour, and about half the usual size; to which Mr. Lawrence said the difficulty he had met with might be attributed. The patient was then removed to a room that had been darkened, a lotion was applied to the eye by means of linen rag, and a strict antiphlogistic regimen enjoined. About one third of the vitreous humour was discharged during the operation. The patient is going on well.

J. Reeve, whose case is recorded in *THE LANCET* for October the 16th, went on very well until last Friday, when the stump became very painful and swollen. At 4 o'clock P.M. on that day, a slight hæmorrhage took place, which was suppressed by means of cold cloths; a tourniquet was applied loosely round the limbs. Ten P.M. There has been no recurrence of the bleeding; the stump feels hot, and fluctuation can be distinctly felt in it. On Saturday morning at three o'clock, hæmorrhage again occurred, and the house-surgeon was sent for, and being unable to find the vessel that was bleeding, he tightened the tourniquet and sent for Mr. Vincent, who arrived in a very short time. The man had lost about a pound and a half of blood. Mr. Vincent separated the adhesions which the severed edges of the stump had formed, and found a cavity containing a large quantity of coagulated blood. None of the ligatures had separated. Mr. Vincent found that the posterior tibial artery had ulcerated above the ligature, and immediately cut down and tied the artery just at its origin. The bleeding then ceased, he became very pale, and his pulse could with difficulty be felt. Some wine was given him; his pulse rose, he slept well the remainder of the night, and has since gone on very well.

LONDON HOSPITAL.

EXTIRPATION OF THE RIGHT SUPERIOR MAXILLARY BONE AFFECTED WITH OSTEO-SARCOMA.

A MAN, the subject of this operation, apparently about 40 years of age, was brought into the operating theatre on Wed-