Correspondence.

"Audi alteram partem."

THE TREATMENT OF SPASMODIC TORTICOLLIS BY NEURECTOMY.

To the Editors of THE LANCET.

SIRS,—In THE LANCET of June 18th particulars are given by four different writers of cases of spasmodic torticollis treated by removal of a portion of the spinal accessory nerve. In an editorial note on one of the cases it is remarked: "It is still too early to assign its just position to this operation. It is only when the after histories of the whole have been ascertained that a fair judgment of this method of treatment will be possible."

Having now performed this operation on ten occasions, I may perhaps be allowed to state that, in my experience, the results are extremely satisfactory, as in a large proportion of cases there is no recurrence of the spasm.¹ Several of my cases have been lost sight of, two have been operated upon very recently, but in four which are still under observation, where intervals varying from eight to two years have now elapsed since operation, the relief from spasm which followed its performance has been permanent.

I am, Sirs, yours faithfully,

Manchester, June 20th, 1892.

F. A. SOUTHAM.

DEATH UNDER CHLOROFORM.

To the Editors of THE LANCET.

SIRS,—Enclosed is a very poor account of the case of chloroform death. I have made my house surgeon's notes as readable as I can, but I cannot personally vouch for their accuracy, except as to the order in which attempts at restoration were applied, and as to the short time—about five minutes—which intervened between the commencement of the anæsthetic and cessation of breathing. I was in the operating theatre, but scarcely saw the man until the moment of alarm. I am quite confident that the death began at the brain centre, which presides over respiration, and that the patient was *irrecoverably dead* from the moment when his breathing first ceased. The following is an account of the case.

The patient, aged fifty-two years, was admitted into Queen's Hospital on May 31st, under the care of Mr. Jordan Lloyd, for the purpose of having an exploratory operation on the right kidney for the relief of some painful malady which had disabled him from work and which had persisted for many months. He was a thick-set, muscular man, of middle height, and inclined to be stout. During his stay in the hospital his various organs were examined, and it was noted that the "heart sounds were normal, but somewhat feeble; apex displaced slightly outwards, and that there were moist sounds over the bases of each lung."

On June 11th pure chloroform was administered in the usual way, on a double fold of lint, by the house surgeon, Mr. Stead. For about three minutes the patient took the anæsthetic well, but then began to struggle rather violently. This struggling lasted two or three minutes, and the patient then began to lose consciousness. He breathed quietly and well for about another minute, when respiration suddenly ceased, and he became livid. The whole period of the anæsthesia was not more than five minutes, and the operation had not been commenced. The pulse could be felt, and the pupils were less than a line in diameter. Restorative measures were applied for more than half an hour and in this order: inversion, artificial respiration (Howard's and Silvester's), faradisation, heart puncture, venesection, tracheotomy, and direct lung inflation. During these efforts at restoration patient gave one or two feeble gasps, the pulse was lost at wrist almost at once, and pupils dilated towards the end of the fifth minute.

The post-mortem examination of thoracic organs showed that the blood was fluid; the inferior cava and its tributaries were loaded with blood much more so than the superior cava and its branches; the heart was somewhat fatty, dilated, and flabby; tricuspid and mitral valves dilated; the aorta was healthy; the lungs both intensely

congested with œdema of right base, the left base was bound down extensively by old adhesions.

I am, Sirs, yours faithfully,

Birmingham, June 22nd, 1892.

JORDAN LLOYD.

COPPERED GREEN PEAS.

To the Editors of THE LANCET.

SIRS,—Are you quite sure you are correct in saying, with reference to the use of sulphate of copper in greening vegetables, that "the French Government have prohibited its use in this way so far as home trade is concerned, although they permit the adoption of the *reverdissage* process where the peas are intended for export purposes only"? I am aware that this has been suggested in expert reports, but not that it has ever been officially recognised. More especially also in 1890 I obtained from the British Embassy in Paris a copy of the circular of April 18th, 1889, issued by the French Government, withdrawing the prohibition hitherto existing as the result of the report of M. Grimaux adopted by the Consulting Committee of Hygiene of France, to the effect that "there was no reason for continuing the prohibition on the ground of injury to health." Last year I again communicated with the British Embassy to ascertain if any change in the position had taken place, and was informed that the decree of April, 1889, was the last, and was still in force. As to the present position of this question in this country, it is extremely unsatisfactory, and in my opinion there are only two remedies: either to lighten the burden of proof by making Section 3 of the Adulteration Act read, "so as to render the article dangerous or injurious to health," or by enacting *simpliciter* that no article of food shall be coloured with substances injurious to health, defining such substances so as to include the various metallic and other poisons. This is the straight and sensible method adopted by the German Empire, by the State of Massachusetts and other countries.

I am, Sirs, your obedient servant,

J. B. RUSSELL.

Sanitary Department, Glasgow, June 20th, 1892.

To the Editors of THE LANCET.

SIRS,—*Apropos* of your remarks on this subject in the current issue of THE LANCET, I would instance a case which was lately brought under my notice in which griping pain and diarrhoea were experienced after dinner and on inquiry it was found that the peas in question had been partaken of largely. But it has been affirmed by some that leguminate of copper is insoluble in the stomach and by others that the copper absorbed is so small in quantity as to be practically harmless. The latter supposition can, of course, only be true to a limited extent. Regarding the digestibility of these peas, in the careful research of Drs. Charteris and Snodgrass, to which you refer, it is clearly demonstrated that leguminate of copper is readily soluble in artificial digestants. That leguminate of copper is therefore soluble in the gastric juice is placed beyond reasonable doubt. But in these experiments the peas were (a) digested for one hour, and (b) digested alone. It might no doubt be urged that in the case of human consumption the peas are usually associated with large quantities of food and that they might thus escape the action, or the full action, of the available gastric juice during the time the food mass was permitted to remain in the stomach. Any undissolved leguminate of copper would, however, be further submitted to the action of the pancreatic juices which the above experiments have shown to be equally capable of dissolving it. It would indeed be interesting to learn how in the light of these experiments the digestibility of leguminate of copper in the human stomach can be disproved; and until such can be done, it is legitimate to regard the symptoms referred to as due to copper poisoning.—I am, Sirs, yours faithfully,

June, 1892.

M.D.

RECTAL INJECTIONS OF SALT SOLUTION FOR HÆMORRHAGES.

To the Editors of THE LANCET.

SIRS,—Dr. R. F. Gill recommended (THE LANCET, Nov. 3rd, 1888), in cases of hæmorrhage, the injection per rectum of tepid salt solution at the rate of two or three

¹ Brit. Med. Jour., July 11th, 1885, Jan. 31st, 1891.