As Dr. Losterfer ceased speaking, a burst of genuine enthusiasm escaped from the assembled physicians, while Prof. Skoda rose to greet the hero of the evening, as the proclaimer of what was destined to prove one of the most important discoveries of the age. He regretted that it was not customary in Austria to give medals or other rewards of merit in such cases, stating that, had this statement been made in Paris, he would have been crowned, as he deserved.

Prof. Stricker detailed the precautions taken to avoid error or deception in each of the trials to which Dr. L. was subjected. The latter's selection of diseased blood was always correct, and decided, except in the few ruined specimens. To ensure the purity of the healthy blood, he had taken his own and that of his servant. After a while, Dr. L. distinguished between these two, inasmuch as the professor's was thicker and "dirtier."

Prof. Hebra confirmed all that had gone before, and said he had been so much struck with the discovery, that Prof. Stricker's blood "contained more filth (schweinerei) than that of any other living man," that he had instituted researches for similar peculiarities among his patients, but, thus far, without result. No words are needed to show the immense field for research, thus suddenly thrown open to investigators, nor can the practical results likely to proceed from this study be overestimated. Microscopes all over the world will now be turned toward these new constellations, and their every freak recorded.

Theories of unity and duality will soon cease to vex the earnest student and practitioner, and half the skill and learning of dermatologists is made of no value by this simple and certain indication of the presence of the syphilitic virus. The testimony of two such renowned and incredulous men as Professors Stricker and Hebra is a convincing proof that these corpuscles are not bubbles to be pricked by the next impatient microscopist. I trust I have not omitted nor misstated any of the main points of Dr. Losterfer's paper, but if so, will send you in expiation of my offence a copy of his article, as soon as printed.

I am yours, &c.,

JAMES R. CHADWICK, M.D.

CATS AND DOGS are proved to be insusceptible to the vaccine disease.

VOL. IX.—No. 6A

Selected Papers.

HÆMOPTYSIS IN CONSUMPTIVE PATIENTS.

By D. FRANCIS CONDIE, M.D., of Philadelphia.

HÆMOPTYSIS, in the description of tubercular consumption given in the books, is very generally enumerated as among the most common of its prodromes, and as a predominant symptom during some period of its course. This, so far as my own experience goes, is an error, and one very liable to mislead those who have not studied with close attention the disease at the bedside of the sick. It is true that the deposition of tubercular matter in the lungs may be preceded and accompanied by hæmoptysis, but by no means so generally as to warrant its being ranked as among the premonitory, much less as a diagnostic symptom of tubercular phthisis.

Of three hundred and sixty-nine cases of tubercular consumption, very full notes of which I have kept, hæmoptysis occurred in eighty-seven (that is, in about 24 per cent.). In two hundred and eighty-two of the cases it neither preceded nor was present throughout the attack. The absence, therefore, of hæmoptysis, is not to be received in any case as an indication of the absence of pulmonary tubercles, nor can the occurrence of pulmonary hæmorrhage be received as an indication of a future or present tuberculosis of the lungs.

In eighty-seven cases of consumption in which pulmonary hæmorrhage occurred under my observation, the hæmorrhage preceded in forty the first symptom of the deposit of tubercular matter some considerable time—say two, three, five, six, or even twelve months; in some cases, however, it preceded the indications of tuberculosis only a few days, in others, again, it occurred at the very onset, so far as I was enabled to judge, of the tubercular deposit. In twenty-nine cases, the hæmorrhage occurred at different periods during the progress of the disease, and in its latter stage in eighteen cases in which the presence of cavities in the lungs was detected upon auscultation. * * * * *

As to the cause of the hæmoptysis which is met with in those who are laboring under tubercular consumption, or who are predisposed to an attack of the disease, it varies, according to my observations, in different cases, and certainly at different stages of the disease. In some cases it is evidently the result of a state of hyperæmia

or congestion of some portion, of more or less extent, of one lung or both, the overloaded vessels relieving themselves by a percolation of blood or by a rupture of the coats of one or two of them. In other cases, the hæmorrhage is caused by the opening, from ulceration in its neighborhood, of an artery; in others, again, we have traced it to a slow but constant exudation of blood from the mucous coat of the more minute ramifications of the bronchial tubes. In the latter case, the matter expectorated consists of a mucoid fluid intimately mixed with blood, giving to the sputa a color like that of the rust of iron—sometimes the sputa have very much the color and consistence of currant-jelly. So far as I could judge, hæmoptysis from the first-named cause was most generally found to precede the deposition of tubercular matter or to occur in the early stage of tubercularization, or when the circulation in some part of the lungs is impeded by a large cluster of unsoftened tubercle. Hæmorrhage from ulceration may occur at any time in the course of the disease, while the bronchial hæmorrhage is most generally confined to cases of tubercular bronchitis or pneumonia, though it may be met with in the latter stage of uncomplicated cases of pulmonary phthisis.

Occasionally, the hæmorrhage which precedes the attack of pulmonary consumption, or which occurs towards its close, is quite profuse, and has a tendency to recur again and again, at shorter or longer intervals. During the course of the tubercular attack, the hæmorrhage met with is seldom to any great extent, and when once it ceases, seldom returns.

What influence, for good or for bad, the occurrence of pulmonary hæmorrhage in cases of consumption has on the latter, the data in my possession are not sufficient to allow me positively to determine. Judging, however, from what facts I have been enabled to collect, I should infer that the influence exercised by the hæmorrhage, one way or the other, upon the character or duration of the disease, was by no means very decided. It may be, that a moderate hæmorrhage occurring just preceding the development of tubercles may have a tendency rather to retard than to promote such development. On the contrary, however, when the discharge of blood is considerable and repeated, an injurious effect may be anticipated. When hæmorrhage occurs during the course of tubercular phthisis, even if only to a moderate extent, it cannot fail, indirectly, to have an injurious

effect, by standing in the way of the patient taking that amount of active out-door exercise which is so important an item in the management of all cases of tubercular deposit, and at the period when most benefit is to be derived from such exercise. Profuse hæmorrhage from the lungs occurring in the latter stages of tubercular consumption—which fortunately is rarely the case—could not fail by its debilitating effect to accelerate a fatal result.—*American Jour. of the Medical Sciences.*

Medical and Surgical Journal.

BOSTON: THURSDAY, FEBRUARY 8, 1872.

THE OFFICE OF CORONER.

WE are indebted to a friend for a copy of the petition presented to the Legislature a few days ago, which has in view the reorganization of the laws relating to the office of coroner, and the appointment of thoroughly reliable men. The views presented in the petition are so sound, and express so fully the feelings of medical men, that we copy the petition in full.

At various times during the past few weeks the attention of the public has been called to the statement that a certain unnamed but well-known coroner of this city had been guilty of gross malfeasance of office, and had fraudulently obtained money from the public treasury as compensation for services never performed.

These very serious, yet vague and indefinite charges, though directed against an individual, coupled with the fact that fraud could be so easily perpetrated, have aroused the suspicion of the community against all coroners, and have impaired the public confidence in the integrity and ability of a respectable class of our citizens, which includes several of the best known and most respected physicians of our city. The nature of these accusations subject all coroners to public odium, and thus many are obliged to suffer reproach by reason of the misdeeds of a few.

Actuated by a desire to discover the guilty parties who have thus abused their official privileges, and to place the responsibility where it properly belongs, as well as to remove the stigma which attaches to the name of coroner, your petitioners request