Benham, although I cannot agree with him, for his attempt to explain the *rationale* of the process of relief.

I am, Sirs, yours truly,

A. W. MAYO ROBSON.

Hillary-place, Leeds, April 18th, 1893.

DEFINITION OF PUERPERAL FEVER.

To the Editors of THE LANCET.

SIRS,—As you have been kind enough to give expression of opinion as to the duties of a medical officer of health, I should feel much obliged if you could help me out of the following difficulty. Just recently I received the registrar's weekly return of deaths and I noticed that a death had been registered as puerperal septicaemia. The case had not been notified to me in the usual course, so I wrote a friendly letter to the medical man in attendance (who is a medical officer of health of another district) asking him his reason for not doing so. He wrote me a friendly letter in return and the gist of it is this: that the patient died from septicaemia originating from the decomposition of coagula and small portions of adherent placenta and not from any miasm of a zymotic nature. A post-mortem examination was made and he found small portions of placental tissue in a state of gangrene; also he did not wish to speak positively concerning a subject on which there is at present some difference of scientific opinion. He also leans to the opinion of puerperal fever being distinctly of a zymotic nature only. I may add that this gentleman did not see the patient until two days after her confinement and he took every precaution by antiseptic douches until her death, which took place five days after the birth of twins. Now, what I want to know is this: was I justified in inquiring into the case, also in preventing the nurse from attending any other cases for a time? I personally lean to the opinion that such cases distinctly come under the head of puerperal fever and consequently require investigation under the Notification Act. The house where the patient was delivered and died was in a most insanitary condition and is now being thoroughly rectified.

I may add that I have not reported the case to my board; also there is not the slightest tension between the medical man and myself, only a friendly difference of opinion, which I am anxious to be guided upon in future cases should they arise. Apologising for the length of my letter,

I am, Sirs, yours truly,

C. DWIGHT MORRIS,

M.O.H. Staines Rural Sanitary Authority.

Feltham, Middlesex, April 17th, 1893.

"REPORT OF THE LANCET SPECIAL SANITARY COMMISSION OF INQUIRY CONCERNING THE WATER-SUPPLY OF CHICAGO, U.S.A."

To the Editors of THE LANCET.

SIRS,—I read with interest your Chicago water report, as I resided from October, 1892, to January, 1893, in Chicago and contracted typhoid fever within a few weeks of going there, due, I feel sure, to the unhealthy water. On recovery I interested myself much in the matter, and openly and privately declared my opinion that Chicago could never be a healthy city unless proper filtering tanks were formed. I was more impressed still by the fact that just before I left England I had given scientific evidence on a water pollution case in Lancashire.

I am, Sirs, yours faithfully,

New Brighton.

J. G. PURCELL.

"EPITHELIOMA OF BOTH EXTERNAL EARS."

To the Editors of THE LANCET.

SIRS,—Will you allow me to point out that Mr. Ernely Sumpter, who thus characterises a case published in the last issue of THE LANCET, is hardly warranted in so doing by the facts he records. An old man's ears were in an unhealthy condition, seemingly of chronic eczema; nine months since ulceration described as "simple" took place; the sore on the right ear quickly passed into a typical epithelioma; that on the left "remains in much the same condition as at first," and is therefore presumably

still non-malignant. The extreme rarity, to say no more, of a synchronous cancer growth in two distinct tissue areas makes it most important that any case bearing such an aspect should be minutely verified. The congenitally irritable conditions of skin, known respectively as Kaposi's and Dühring's diseases, form the sole instances to the contrary of which I am aware. There is nothing intrinsically impossible in the idea of two different organs or regions exposed to the action of a similar exciting cause becoming cancerous; but in the past seventeen years of special contact with malignant disease I have never seen or heard of such an occurrence. I once, however, had under my care a man who was supposed to have double epithelioma of the upper eyelids and whose case had indeed been so styled in print. He had nothing more than ectropion with extreme hypertrophy of the palpebral conjunctiva on each side, but with no trace of malignant deposit. I am, Sirs, yours faithfully,

Gloucester-place, W., April 15th, 1893.

HERBERT SNOW.

"THE TREATMENT OF HÆMORRHOIDS BY CLAMP AND CAUTERY."

To the Editors of THE LANCET.

SIRS,—In face of Mr. Allingham's disparaging criticism of Mr. Henry Smith's operation for hæmorrhoids by the clamp and cautery, I think those who have had opportunities of seeing numbers of cases treated by him and others by that method should record their experience, an experience which, I venture to say, will differ very considerably from Mr. Allingham's aspersions. As a former house surgeon of Mr. Smith I have had those opportunities. The cases for treatment were not, as Mr. Allingham suggests, they should be, selected; every case of internal hæmorrhoids requiring operation was treated—and is still, I believe, treated at King's College Hospital—by the clamp and cautery, and, I can confidently assert, with eminently satisfactory results, both as regards the operation itself and its after-consequences. What is the use of Mr. Allingham talking, in connexion with this operation, about a burn in the rectum being the most painful of all injuries, about secondary hæmorrhage being likely to occur on the separation of the sloughs and about contraction being by no means absent as a sequela, when everyone who has seen much of this operation knows that there is practically no pain following the operation, that secondary hæmorrhage never does occur, and that contraction, if it threatens, can easily be prevented by a little care on the part of the surgeon. With regard to the mortality (four times as great as any other method) I presume Mr. Allingham obtained his figures from somewhere—I trust not from the record of his own experience; but all I can say is that, though I have seen this operation performed continually during the last ten years, I have never seen or heard of a fatal case.

I am, Sirs, yours truly,

CHARLES P. CHILDE, B.A., F.R.C.S. Eng.

Southsea, March 12th, 1893.

TREATMENT OF ABDOMINO-THORACIC INJURY IN THE SEVENTEENTH CENTURY.

To the Editors of THE LANCET.

SIRS,—As the following case presents many points of interest from a medico-legal side, I ask your permission for its being reprinted.

"The Scots, under Lesly, in their march from Hereford to Newark passed through Warwick; there being guards set at several places to prevent disorders. A Scots' trooper quarrelling with one of the guards, the said captain and his man passing by, the man entreated him to be quiet, for they did but discharge their duty. The Scot immediately leaving them, with his tuck run him in at the left side, which passed between the ribs into mucronata. The man, finding himself wounded, sets spurs to his horse and rid from St. John's Brook to the Castle, the best part of half a quarter of a mile. As he came riding up, with others, standing at the outmost gate of the Castle, seeing him make such haste, with a wan countenance (that always had been ruddy) and the horse side bloody, scarce any thoughts of his wounding being perfected, before he came near me by twenty yards he fell from his horse. With another ran and carried him within the gate, laying him on a form without at the

porter's lodge on his back, by which time an universal coldness had seized him; his pulse was gone and so to all appearance past recovery. I used frictions, till a handful of salt came which I sent for, with which, rubbing his lips for a quarter of an hour, his colour came and he began to look up. Being after carried into the Castle I prescribed this: 'R. Aq. Borag, Buglos, Julap, Norimberg, an ʒj.; aq. Cinam, ʒvj.; Confect. Alker, ʒj.; Syr. Caryoph., ʒj. M. Having taken six or eight spoonfuls at several times, he seemed to revive more, and his pulse got up a little. About two hours after, coming to him with my wife, speaking something to him to prepare for heaven, he understanding cried out for all or most part of that night, 'heaven, heaven.' The next morning finding him in a fever, after I had dressed his wound, which was very small, I opened a vein. Towards the afternoon he spoke pretty plain and knew me. This day I was sent to by the commissioners to know the state of the man, that so General Leven with a council of war might try him. I returned answer that I conceived he was wounded in the mucronata and that he could not long continue. The next morning finding the fever again increased, I repeated the venesection, as also the next morning after that, yet in the afternoon he died. The next day I opened him, there being present his captain, Mr. Trap, minister, and several officers and soldiers. I found the tuck¹ had passed through the diaphragma into the point of the heart, almost to the right ventricle, and the stomach drawn up above the midriff."—*Mellificium Chirurgiæ: or the Marrow of Chirurgery.* By Dr. James Cook of Warwick, who edited Mr. John Hall's "Select Observations on English Bodies of Eminent Persons in Desperate Diseases," at 2s. 6d., for Mr. Hall's widow Susanna, the favourite daughter of William Shakespeare.

I am, Sirs, yours truly,

GEORGE FOY, F.R.C.S. Irel.

Cavendish-row, Rutland-square West, Dublin,
March 11th, 1893.

AN OBSCURE CASE.

To the Editors of THE LANCET.

SIRS,—A few days since I was called upon by the coroner to perform a post-mortem examination upon the body of a youth who had died somewhat suddenly. The history of the case, as told by the father, was that whilst going an errand he fell and struck his head behind the ear. He mentioned this to his father, but did not complain of feeling any ill-effects from it at the time and seemed as usual until midday on the day following; he then felt ill, had severe pains in the head and neck and lay down. He rapidly became worse and died about 6 P.M., no medical man having previously seen him. At the necropsy the body was found to be well nourished. No marks of injury were to be found on the head or neck; there was no injury to the base of the skull or brain (though I fully expected to find a fractured base); I carefully examined the spine and could find no injury there. The heart, lungs and liver were healthy; the stomach contained some fluid and was healthy, and the intestines were also healthy, the large one containing feces. The spleen was enlarged and soft, and upon section it was found to be very congested and friable. The kidneys were congested, the pyramids and cortex not being easily distinguishable; they both stripped readily. The blood was fluid and the aorta and large vessels were stained bright red. From the above conditions I concluded that the boy died from hyperpyrexia due to one of the fevers, and as several cases of influenza had occurred in this district I thought it probably due to that. I should be glad to know whether any of your readers have had any similar experience.

I am, Sirs, yours truly,

J. W. SMITH, M.R.C.S., L.R.C.P. Lond.,

Assistant Medical Officer, Lambeth Infirmary, S.E.

April 18th, 1893.

PAPILLOMATOUS GROWTH OF OVARY.

To the Editors of THE LANCET.

SIRS,—I, and doubtless many more, will be exceedingly interested in knowing the future history of the case reported by Mr. Bland Sutton in THE LANCET of April 8th, and I trust he will at a later period be able to report on

it. The case strongly reminds me of a patient, under the care of Dr. Purcell at the Cancer Hospital, from whom a large papillomatous growth, springing from the left ovary, was removed. There was a great amount of straw-coloured fluid present in the abdomen and a few small raised nodules were noticed on the fundus of the uterus. The patient made a rapid recovery and was discharged from the hospital six weeks after laparotomy was performed. Dr. Purcell described the case and showed the specimen at the British Gynaecological Society in the early part of 1891. The same surgeon informed me that the patient remained in excellent health for a time, but that she died about twelve months after the operation, when the peritoneum was found to be studded with growth.—I am, Sirs, yours truly,

Colney Hatch, N., April 17th, 1893.

CECIL F. BEADLES.

“VENESECTION.”

To the Editors of THE LANCET.

SIRS,—In reply to Mr. Redford's letter in the last issue of THE LANCET, relative to bleeding and the Duke of Kent, may I refer him to the "Life of the Duke," published forty or fifty years ago, in which there is an account of his last illness. If I remember rightly, he was bled to a far greater extent than 120 oz., but how much blood he lost at one time I am unable to say. I have not the book to refer to, but perhaps some of your readers have and can give particulars; at any rate, the book can be seen at the British Museum or other public library.—I am, Sirs, yours truly,

Tenterden, April 17th, 1893.

JESSE H. NEWINGTON.

BIRMINGHAM.

(FROM OUR OWN CORRESPONDENT.)

The General Hospital.

AT a recent meeting Mr. Albert Lucas was elected assistant surgeon. It was resolved to appoint an assistant obstetric officer owing to the increased work of this department. Already there are several candidates in the field.

Action against the "Birmingham Daily Post."

In the case of *Evans v. Jaffray*, recently reported, a verdict was given with £75 damages for the plaintiff. On appeal this has been set aside and both sides have been ordered to pay their own costs. This is not satisfactory to the medical plaintiff.

Skin and Lock Hospital.

The twelfth annual meeting was held on the 19th inst. The report showed that the new cases treated in the outpatient department during the year were 4469, as compared with 3692 for the previous year. There had been 127 in-patients, as against 77. The growth had been very great, an increase of 120 per cent. in five years. The financial position was also satisfactory: Income, £2116; expenditure, £1845.

April 19th.

NORTHERN COUNTIES NOTES.

(FROM OUR OWN CORRESPONDENT.)

Cholera Precautions on the Tyne.

A CASE of supposed Asiatic cholera was observed at one of our Tyneside towns a few days ago and caused much concern to our sanitary authorities, but the particulars were kept quiet. The dejecta were examined at the bacteriological laboratory of the College of Medicine in this city by Dr. George Murray, who was fully satisfied that the characteristic bacilli were not present. A special meeting of the Tyne port sanitary authority was held on last Saturday to meet Dr. Thompson of the Local Government Board, who said that his visit to the Tyne was a very pleasant one, but he had very little to say in the way of criticism. The River Tyne port sanitary authority had been fully alive to their duties, and the members and their officers had done their utmost to meet the danger. He was perfectly satisfied that every precaution that was considered necessary would be repeated this year. A discussion of some interest took place on the subject of cremation, should it be necessary, of the bodies of persons who had died from cholera, and the use of the many riverside

¹ Tuck—a rapier. "Dismount thy tuck, be ware in thy preparation, for thy assailant is quick, skilful, and deadly."—TWELFTH NIGHT, act 3, scene 4.

"You bow-case, yow vile standing tuck."—KING HENRY IV., P. 1, act 2, scene 4.