of compression. As a case somewhat similar has lately fallen under my observation, you may, perhaps, consider the following brief particulars acceptable. During the latter part of the summer of 1826, I was sent for to visit a boy of fourteen years of age, who, I was given to understand, had been kicked by a horse on the skull. On examination, a very extensive laceration of the scalp presented itself, the wound commencing an inch above the left frontal sinus, extending across the left parietal bone, and terminating opposite the posterior part of the squamous suture of the temporal bone on the same side, thus forming a flap which hung back. Without the aid of a finger, an extensive fracture was readily seen, and on the upper and lateral part of the frontal bone a considerable portion was depressed. The symptoms under which the patient laboured, did not manifest any degree of compression, neither had he been insensible since the occurrence of the accident, save and except being stunned for a few moments after the blow had been received. He had had no vomiting, was able to converse rationally, and, almost unsolicited, gave an accurate detail of the nature of the accident, and of what his sufferings then were.

The pupils were not unnaturally dilated, but were seen to contract readily on the admission of light. In this state he was removed a distance of six miles, in order that I might have an opportunity of visiting him as often as necessity might require.

It is unnecessary to remark on the treatment of the case beyond observing, that the edges of the wound were without difficulty brought in contact with each other, without the aid of sutures. The dressings being allowed to remain untouched for four days, at the expiration of which time they were removed, and lighter ones substituted, with directions for poultices to be applied externally. The result of the case was most favourable, as, during the period he was under treatment, no untoward symptoms supervened, and in the short space of 26 days the wound was perfectly healed. The occurrence took place in Ireland, about six miles from Naas, a town situated fifteen miles from Dublin.

I have the honour to remain,
Your constant subscriber,

M. J. B.

Gosport, Aug. 5, 1828.

BLISTERS IN THE EARLY STAGE OF MEASLES.

To the Editor of THE LANCET.

SIR,—I have had extensive opportunities of witnessing a great many cases of

measles with its attendants, viz. inflammation of the lungs, and continued chronic cough, and have seen it treated according to common principles, with variable success. I am therefore induced to recommend a plan of treatment which, for its simplicity and utility, I think, cannot be surpassed, having more than a hundred times adopted it, and with a success which has entirely exceeded my most sanguine expectations. I am, therefore, convinced, that the disease may be cut considerably shorter, and many valuable lives saved, to the comfort of numerous families. I do not mean to put it forth as a novelty, but so far as I have any knowledge, it has not been employed in the manner I am about to mention. It is simply this—As soon as the first symptoms of the complaint show themselves, such as sneezing, with defluxions from the nose and eyes, and *before the eruption appears*, the prompt application of a blister to the chest, (of course with other suitable remedies,) seems to act like a charm, in most cases entirely preventing any affection of the lungs supervening. I have lately treated three cases, two according to the plan already laid down, and one upon the common principles of our best physicians, the parents of the child being averse to blisters. The latter is now scarcely recovered, after being ill six weeks; the two former were perfectly recovered in a fortnight. I shall not attempt to explain the *modus operandi* of blistering early, but the conclusions, I think, to be drawn, are these:—

1. That the disease is rendered shorter and milder;
2. That the disposition to inflammation of the lungs, and its consequences, if not entirely prevented, is very much mitigated;
3. That the patients are not more predisposed to colds or coughs, than others in whom no disease had taken place; and,
- 4th. That the recovery is more rapid and lasting.

Your constant reader,

ARTHUR MATTHEWS.

Member of the Royal College
of Surgeons, &c.

Chelsea, Aug. 18th, 1828.

MEDICAL APPRENTICES.

To the Editor of THE LANCET.

SIR,—Knowing the laudable anxiety you have ever shown in redressing the numerous grievances of the medical profession, has induced me to address this epistle to you. It is the custom of many general practitioners who dispense, to employ their pupils in the menial office of