

The word "Nature" having repeatedly occurred in the course of the previous observations, it is but fair to our distinguished author to explain, in his own language, the meaning which he affixed to it.

"In the last place, I shall subjoin a short note, lest, perhaps, my opinion of Nature be taken in a wrong sense, or, at least, be not sufficiently understood. In the foregoing discourse I have frequently made use of the term Nature, and ascribed various effects to her, as if I would thereby represent some one self-existing being, but everywhere diffused throughout the machine of the universe, which, being endowed with reason, governs and directs all bodies,—such a one as some philosophers seem to have conceived the soul of the world to be. But as I neither affect novelty in my sentiments or expressions, I have made use of this ancient word in these pages, if I mistake not, in a qualified sense only, and as it is understood and applied by judicious persons. For, by Nature, I always mean 'a certain assemblage of natural causes, which, though destitute of reason and contrivance, are directed in the wisest manner, whilst they perform their operations, and produce their effects.' Or, in other words, that Supreme Being, by whose power all things are created and preserved, disposes them all in such manner, by His infinite wisdom, that they proceed to their appointed functions with a certain regularity and order, performing nothing in vain, but only what is best and fittest for the whole frame of the universe, and their own peculiar nature; and so are moved, like machines, not by any skill of their own, but by that of the artist."

The spirit of this passage naturally leads us to notice a peculiarity in the writings of Sydenham, the more general adoption of which would be not unprofitable to the medical literature of the present day. I allude to the religious feeling which pervades them. His chief work, the "Observationes Medicæ," closes with the ascription of glory to God: *Δόξα τῷ ἐν ψήφοις Θεῷ*; and such expressions as "Summi Numinis favore,"—"favente Numine,"—"modo Deus vitam concesserit,"—"solus novit Qui novit omnia,"—"ut Deo, rerum omnium Architecto et Moderatori, debita veneratio cum profundissimâ animi prostratione exhibeatur,"—"Divinum Artificem summâ animi demissione adorandum, dum stupendum Ejus artificium contemplamur." &c., scattered throughout his pages, cannot fail to strike the attention of the thoughtful reader. But by far the most remarkable passage, breathing such a spirit, that we meet with in the writings of our author, is the whole of the preface which he prefixed to the *first* (mark that) edition of his earliest and most important work. My limits prevent me from transcribing it in full, and I am unwilling to mar its impressive solemnity by mutilation. I can therefore only strongly recommend its studious perusal to the reader, and express a sincere hope that its pure and elevating spirit may find a response in the breast of every medical man. It is not contained in the common English translation of our author's works; but, as might be anticipated, finds a place in the excellent edition by Dr. Greenhill, prepared for the Sydenham Society.

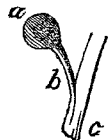
Fitzroy-square, October, 1846.

ON A NEWLY-DISCOVERED GANGLION, OF VERY SIMPLE FORM AND STRUCTURE.

By T. WHARTON JONES, Esq., F.R.S., &c.

THE other day, whilst examining, under a magnifying glass, the lenticular ganglion and ciliary nerves of a dog, two or three months old, I noticed a minute roundish body, (somewhere about one-sixtieth of an inch in diameter,) connected, by a short pedicle, to the largest of the ciliary nerves, at a point nearer its entrance into the eyeball than its origin from the lenticular ganglion.

From the appearance of the body, suspecting it to be a ganglion, I subjected it to careful microscopical examination, and discovered it to be indeed a small collection of ganglionic corpuscles, from among which there proceeded nervous fibrils, which being collected into a fasciculus, constituted the pedicle by which the body was joined to the ciliary nerve.



The annexed is a magnified diagram of the structure: *a*, the ganglion; *b*, the fasciculus of nervous fibres forming the pedicle

joining it to *c*, one of the ciliary nerves. The ganglion of the right side, here represented, had a longer pedicle than that of the left. We have thus, here, a ganglion cæcum,—if I may use the expression,—a ganglion into which no nervous fibrils enter and again pass out, but from which only nervous fibrils arise. Such a structure, so far as I know, hitherto unobserved, is an exemplification of what alone is essential in the structure of a ganglion—viz., a mass of ganglionic corpuscles and nervous fibrils proceeding from it.

It is scarcely necessary for me to observe, that the ganglion, which I may name *ganglion cæcum ciliare*, has nothing in common, as regards structure, with a Pacinian body.

In the cat, the only other animal in which I have yet looked for the same ganglion, I have found, at the corresponding part of the corresponding ciliary nerve, a small ganglionic mass, not, however, connected by a pedicle to the nerve, as in the dog, but closely applied to its surface.

George-street, Hanover-square, November, 1846.

INSTANCE OF SEVERE WOUND OF THE THROAT.

SPEEDY RECOVERY, AND UNION BY THE FIRST INTENTION.

By MUNGO PARK, Esq., M.R.C.S.E., London.

I HAVE observed in THE LANCET of September 5th and October 31st, some remarks by Messrs. M'Whinnie and Todd on wounds of the throat inflicted for the purpose of self-destruction; and as there exists a difference of opinion on the treatment of these cases, it may not be uninteresting to the profession to relate the particulars of a very successful case of the kind which I have lately attended.

On the 1st of June, 1846, at one o'clock in the morning, I was called on to attend Mrs. M—, fifty-four years of age, of melancholic temperament, residing in St. Luke's parish. On arrival, I found the patient lying on the floor of the apartment in a state of syncope; a large quantity of blood in an ewer and on the floor; and I picked up close to her, a large table-knife, besmeared with blood, and which had evidently just dropped from her hand. I had her laid on the bed, and examined the wound in her throat, which was of considerable extent, being about four inches in length, and gaping very much. An opening appeared in the larynx, betwixt the os hyoides and thyroid cartilage, into which the point of a finger could be easily introduced. The upper part of the cartilage was much hacked, the knife not having been over-sharp, or else the determination with which it had been used must have proved instantly fatal. Having cleansed the wound, and adjusted its mangled parts, I proceeded at once to stitch it up, and to strap it closely with adhesive plaster. I applied a layer of lint and a bandage, and placed the head elevated upon the pillow, so as to keep the divided parts in juxtaposition. The pulse was so feeble, that I administered a little brandy-and-water, which revived her; and after giving the necessary instructions to the attendants, I left, and sent the following mixture:—Tincture of opium, forty minims; tincture of henbane, a drachm; camphor mixture, four ounces: mix; to take a fourth part every four hours. The wound was dressed daily, the general health attended to; and it was surprising to witness how speedily the wound healed. On the first day, she could not speak at all; the second and third, she could, but in a low, husky whisper; and on the fourth, she articulated very well. I was careful in requesting the attendants to watch and keep her perfectly quiet; and thus the case proceeded most favourably for fourteen days, when I pronounced her convalescent, and ceased to attend. I have visited Mrs. M— twice since; and although she has been subject to occasional attacks of despondency, yet she has not given any indication of being disposed to repeat so deplorable an act. She became very penitent, and reflected on her unhappy state of mind in committing so rash a deed, pleading the poverty of the family as a reason, which, indeed, was a delusion on her part, adding that she could not control her feelings. On inquiry, I learned that two members of her family had committed suicide, and another had attempted it.

Remarks.—In the account of the preceding case, I trust the question, whether union by the first intention in these cases can take place? will be completely set at rest; for, notwithstanding the magnitude of the wound, there was very little suppuration, and that merely superficial; and the short space of time ere the wound had perfectly cicatrized bears out the assertions, and confirms the opinions, of Sir Charles Bell and Mr. Fergusson. Of course, in all cases of this description, it will be essentially necessary for the surgeon carefully to

watch the effect of closing the wound on the organs of respiration, whether the epiglottis be injured, &c. It occurs to me, that the reason why those particular wounds are so difficult, or rather unsuccessful, in treatment, arises from their peculiar nature as regards the condition of the patient, who in most cases is more or less violent, the attendants being unable to keep him quiet; consequently, the position of the head, which is of so much importance, cannot be maintained, and he will often, as soon as he can seize an opportunity, violently tear the dressings from the wound, with a fearful determination to effect his purpose. Then there is also the act of deglutition, which is a hindrance to the healing process. In the present case, it may be remarked that every circumstance was extremely favourable; the patient was of a good constitution; no resistance whatever was manifested during the treatment; and the attendants were particularly attentive and judicious.

Old-street, St. Luke's, Nov. 1846.

CASE OF PLACENTA PRÆVIA.—DEATH FROM FLOODING.

By B. TALLAN, Esq., Surgeon, Lancashire.

MARGARET W—, the mother of five children, was attacked with slight flooding on the morning of Wednesday, the 14th of October, up to which period she had been quite well, and following her usual occupations. She was on that day visited by her usual medical attendant, who, as I learn, did not make an examination per vaginam, but ordered rest, and to take some medicine which he would send. On Thursday he again saw her, and the hæmorrhage had ceased. She continued to do pretty well, with the exception of a slight discharge of blood occasionally, until eight a.m. of the morning of Wednesday, the 21st instant, when labour commenced with slight abdominal pains, each pain accompanied by a gush of blood. Her friends became alarmed, and sent for her attendant; but he, having inquired whether the pains were strong, and being answered in the negative, said there was nothing unusual, and that they need not send for him until real labour pains had come on. The consequence was, that the poor creature continued to flood up to the hour of twelve at night, when the gentleman above mentioned having refused to go, I was sent for at half-past one on Thursday morning. The house being situated in the country, and very bad roads, I did not arrive until near two.

On entering the room, the first object that met my eye was a pool of blood under the bed. The patient was lying on her back; the mouth open; eyes staring; nostrils dilated; breathing gasping; pulse barely perceptible; and the brow covered with cold sweat. I immediately withdrew the pillows from under the head, opened the windows, &c., hot water to the feet, and spoonfuls of brandy continually. I then proceeded to make an examination, to effect which I had to remove several blankets, and took from between the thighs five or six towels soaked in blood. The blood extended from the knees up to the armpits; in fact, she literally swam in gore. The vagina was filled with clots, through which a continued dribbling was going on. With one finger I was not able to reach the os; but with two I could perceive it was dilated to at least the size of a crown-piece, with the placenta partially attached: there were no pains. I therefore plugged the vagina, and continued my endeavours to rally her; I also gave some strong doses of ergot along with the brandy. I was now joined by Dr. Doyle, who agreed that it was a desperate case, and advised her being delivered. She being now rather improved by the stimulants, though the hæmorrhage continued, I introduced my hand, separated the placenta all round, and turned. Having brought down the feet into the vagina, I rested, and continued the ergot and spirits. No pain, however, coming on, I removed the child, which was closely followed by the placenta. Dr. Doyle continued to keep up pressure with his hands on the uterus, which contracted; but our patient gradually sank, and died in about three-quarters of an hour from the removal of the child. From the time I saw her until her death she did not lose much more than four ounces of blood. The following questions present themselves to my mind:—Should I have contented myself with plugging the vagina, &c., and not have delivered? or should I have contented myself with merely separating the placenta? As it was, I do not think anything would have saved her; but what would be the best plan in a case not so far gone?

Colne, Lancashire, Oct. 1846.

ON THE EFFECTS OF SEA-BATHING AND CLIMATE ON THE HUMAN CONSTITUTION.

WITH REMARKS ON THE CLIMATES OF VARIOUS WATERING PLACES ON THE COAST OF ENGLAND.

By THOMAS HUNT, Esq., M.R.C.S. Eng., Herne Bay.

No. I.—HERNE BAY. (*Continued.*)

THERE are fewer sudden changes, as well as less extreme variations of temperature, on the northern coast of Kent, than on the southern coast of England. At Herne Bay, for instance, the inhabitants generally, who number less than 2000, are remarkable for their robust health, their longevity, their general exemption from typhus and intermittent fevers, and other epidemics of grave character.

Mortality.—The annual mortality in England is about one in fifty-eight; in Herne Bay, it is about one in 174, or three times as small, taking the average of the last five years, the inhabitants numbering about 1740, the deaths fifty, or ten per annum. The parochial register of Christ Church gives seventy-six baptisms to thirty-deaths in five years, but this is only an approach to the true proportions, many of the children being christened at Herne church, some at the dissenting chapel, and some not at all, while a few are buried at Herne.

Pulmonary consumption is comparatively a rare disease. In my own practice, I have not met with more than ten or twelve cases in as many years, and in these the disease has generally occurred in persons from a distance, or in connexion with circumstances illustrative of the etiology of the disease. For instance, during the last year, two cases have occurred in young females, one of whom had been mistress of the national school, the other a straw-bonnet sewer, both victims of a close and vitiated atmosphere, doubtless the exciting cause of phthisis in a large proportion of cases. The proportion of cases of consumption in Herne Bay is about ten in 100 deaths; in London, it is about fifteen in 100 deaths. But as the mortality at Herne Bay is probably four times less than in London, being, in fact, three times less than in England generally, it is fair to conclude, that in proportion to the population, the number of deaths from consumption in London, as compared with Herne Bay, are as six to one. This is, at least, a sufficiently near approach to the truth, to show the protective power of pure air even on a northern coast.

Scrofula, as a glandular disease, is still more rare. Among the fixed population, I do not know a single individual disposed to strumous suppuration of the glands, although strumous cases are sent hither in large numbers. The scrofulous cases occurring in the Duke of York's school at Chelsea, to the amount of ten or upwards, annually, have regularly been transferred to Herne Bay, during the summer months, for the last twenty years; a similar detachment of strumous children from the London Orphan Asylum has been ordered hither in the summer for the last ten or twelve years, and not one of these has ever died here. The committee of the Blind School, and of the Hebrew Episcopal School at Bethnal-green, have likewise severally selected this spot for the invalid inmates of their respective establishments.

Ague, in a severe form, never occurs here, and few districts are more free from intermittents in any form; but as the place has been described as aguish and malarious by ignorant authors, the following particulars may serve to explain, as well as correct, the errors into which they have fallen. In the years 1830 and 1831, it is notorious that intermittent fever prevailed generally in England, over hill and dale, and in districts where it had never been known previously, and where the recognised sources of malaria were not found to exist. At that period, several cases occurred here. Two children of one family, visiting the Bay, suffered severely from the disease, and died after their return home. This gave the impression, that the place was highly malarious—an opinion apparently corroborated by the fact, that a small marsh, bounding the hamlet on the west and south, was occasionally washed by the sea, and might possibly be miasmatic. Whether it ever was so or not, cannot now be determined, as it has long since been drained, and protected by a sea wall; and the locality has certainly been for several years past perfectly innocuous. Since the period above alluded to, the ague has been a rare disease; and during the last few years, I do not remember above one well-marked case actually breaking out in the place. About four or five miles to the eastward, beyond the towers of Reculver, a large marsh, containing hundreds of acres of land intersected with dykes, is bounded on the west by a small hamlet called Marsh Side, extending towards