one, had been treated for rheumatic pains and lumbago for two years by a London surgeon, and even ordered horse exercise within the last two months. Dr. Jamieson observed a slight prominence in the lower dorsal vertebrae, and, considering the symptoms referable to the spine, brought him to me. The case is unmistakably one of advancing caries, and the patient is now losing power in both legs.

Another case, with a similar history as to the long continuance of doubtful symptoms attributed to rheumatism and lumbago, occurring in a young gentleman aged nineteen, was sent to me a few weeks since by Dr. Eton, of Windsor, who considered the case to be one of spinal disease. The last dorsal and two first lumbar vertebrae were affected in this case, and posterior projection commencing.

Fully admitting the difficulty of diagnosis in an early stage, in whatever region of the spine the disease may commence, and remembering that these symptoms differ according to the region in which it occurs, I would desire to direct attention to three symptoms which I have found especially useful in assisting me in the diagnosis of caries of the spine, when situated in the lower dorsal and upper lumbar vertebrae—i. e., corresponding to, or in the immediate neighbourhood of, the psoas muscle; and it is in connexion with the movements of the body in which the psoæ muscles are called into play that the symptoms I refer to are of importance. These symptoms are—

1st. Difficulty experienced by the patient in raising the body suddenly from the horizontal to the sitting or standing position. When the patient wishes to sit up in bed when first rising in the morning, the arms and hands are made use of, so that the patient assists himself up very gradually and gently, taking some time about it, and avoiding any sudden movement. When closely observed, this is very peculiar and diagnostic, and its explanation is at once apparent by the action of the psoæ muscles upon the spinal column at the seat of the disease.

2nd. Difficulty experienced by the patient in turning the pelvis suddenly round when lying down, or of turning the body round from the back to the stomach. If the patient when lying on his back attempts to turn on his stomach, he does so gradually and with difficulty, aiding the pelvis in this rotation-movement by crossing his legs, and assisting his body by using the elbows. The psoæ muscles are therefore called into action in this movement as little as possible.

3rd. Difficulty experienced by the patient in coming down or going up stairs, without resting both feet at once on the same stair. The care which the patient takes to avoid any sudden movement of the pelvis, and the action of the pelvic muscles, is frequently observable in the cautious manner in which he goes up and down stairs.

In the diagnosis of caries of the spine in the lumbar region, it should be remembered that a posterior projection of the spinous processes, or angular curvature, is not to be looked for in this region in so marked a degree, or at so early a period, as when the disease occurs in its more usual seat—about, or a little below, the middle of the dorsal vertebrae.

It should also be borne in mind that pain, on firm pressure or percussion over the seat of disease, is a most uncertain symptom, as it frequently does not exist when disease is evidently advancing.

Then, with regard to the lumbago or rheumatic explanation of the pain complained of, it should be remembered that these affections are not common in young men, and seldom, if ever, occur in children. The continuance or recurrence of the rheumatic or lumbago symptoms, and the fact of these symptoms not yielding to ordinary remedies, should excite suspicion; and then attention to the symptoms and indications which I have mentioned may lead to a more exact diagnosis in many cases.—I am, Sir, your obedient servant,

WM. ADAMS, F.R.C.S.

Henrietta-street, Cavendish-square, May, 1865.

THE COLLEGE OF SURGEONS.

To the Editor of THE LANCET.

SIR,—In less than two months the fellows of the College of Surgeons will be called upon to exercise their privilege of re-electing, or otherwise, the three members of the Council of their College whose time of retirement has come round. The three councillors in question are Messrs. Wormald, Quain, and Shaw; the first gentleman being, in addition, senior vice-president and member of the Court of Examiners. If the fellows follow the precedent of the last two years, there can be little doubt that the Council-days of these gentlemen are numbered;

but I think that there is fair ground for believing that the cases of the three councillors deserve discriminating and judicious consideration before the day of election comes round, and it is for that reason that I now address you.

Mr. Wormald is at the present moment senior vice-president of the College, and has never had the opportunity of being president as yet, but in the ordinary course of events is certain to be elected president this year if he is re-elected to the Council at the forthcoming election. Now as the post which now dangles before his anxious eyes is one to which he may most properly aspire, and as the fact of his not being elected would, under the present vicious system, bring the president's chair one step nearer to Messrs. Lawrence, Arnott, and South, who have already filled it twice, it will be well to consider whether an exception should not be made in Mr. Wormald's favour. Mr. Wormald became a member of the Court of Examiners in 1858, a year or two after the presidency had gone to the top of the list of *examiners* (as it does under the present absurd system, instead of going down through the whole *Council*, as it ought to do); and he has thus, from no fault of his own, been eligible for seven years without a chance of succession. Supposing, however, that the fellows determine not to re-elect Mr. Wormald, Mr. Kiernan will accordingly become president, and it will be necessary for the Council to elect *two* vice-presidents. Mr. Partridge is the next (and last) examiner, and would of course be one; and then will come the question which I earnestly commend to the notice of present and expectant members of the Council—namely, whether the old routine shall be adhered to, and Mr. Lawrence be elected for the (let me say) *n*th time, or whether Mr. Hilton, who is the next senior member of the Council, shall fill the office.

Mr. Quain and Mr. Shaw have, I fear, no such grounds for exemption from the salutary rule which the fellows have so satisfactorily enforced, and must give way to gentlemen in whom the fellows have greater confidence. Were it possible, I should be only too happy to see published abroad the great feats which they may have performed in the Council-chamber—the mighty wrestlings they may have had with the old men of the sea who sit as life members at the head of the table, and crush by their weight those who venture to mention the dreaded word *progress*. Mr. Quain is, I believe, entitled to the credit of proposing that the minutes of the Council's proceedings should be published (which has never been done); and to Mr. Shaw may be accorded the negative virtue of invariably following the lead of a former colleague—thus favouring unanimity! *Et voilà tout*.

I am, Sir, your obedient servant,

May, 1865.

F. R. C. S.

"THINGS NEW AND OLD."

To the Editor of THE LANCET.

SIR,—The writer of a letter in last week's LANCET would seem to think that he has discovered some new thing by his having observed that many insane became more rational while suffering from small-pox, and that some quite recovered their reason. The fact has been frequently observed and commented upon, and has been witnessed not only in the case of small-pox but of other acute diseases. It has even been made use of for the cure of insanity. M. Dumesnil, in whose asylum scarlatina broke out, deliberately placed a patient suffering from acute melancholia in the infirmary with two patients who had scarlatina. The patient caught scarlatina; and before the appearance of the rash his gloomy ideas had disappeared, and never returned.

While I am writing, would you allow me also to express some surprise at the way in which the very familiar facts recorded in Dr. Weber's interesting paper on Insanity after Acute Disease have been received, as though another new thing had been discovered. In the best known European manual of Insanity occur the following passages, after some preliminary remarks on the outbreak of insanity after acute febrile diseases of different kinds—typhus, intermittent fever, cholera, acute exanthemata, pneumonia, and acute rheumatism:—

"After typhus, and indeed after a severe or after a slight course of it, cases of mental disorder not unfrequently occur, which one may place by the side of the various slight affections of other parts of the nervous system—the incomplete anæsthesia, the transitory paralysis of the extremities, &c. The patient, already feverless or convalescent, either preserves some re-

mains of his former febrile delirium, or he utters, independent of that, all sorts of perverse and erroneous views about one thing and another—now and then even about his own personality; hallucinations even occur, with mental exhaustion, but without particularly severe emotional excitement. This form of mental disorder, a sort rather of fragmentary delirium, admits of a very favourable prognosis, and almost always disappears as nutrition and strength increase—even when, as now and then happens, some maniacal excitement is associated with it. These are rather cases of the slow return of the cerebral functions, and do not come into asylums. But there are also severer cases of real chronic insanity that begin with convalescence," &c.

The author of the manual (Griesinger) points specially to the cases which happen after pneumonia, observing of them that they are mostly of short duration, and frequently a result of hereditary predisposition. "The mental disturbance sometimes disappears so rapidly that a palpable brain disease is extremely improbable, and the disturbance is rather to be attributed to acute cerebral anæmia."

I am, Sir, yours obediently,

Queen Anne-street, May, 1865.

HENRY MAUDSLEY, M.D.

THE AUTOBIOGRAPHY OF SIR BENJ. BRODIE.

To the Editor of THE LANCET.

SIR,—I have read the above work with the deepest interest, and admire the profound skill displayed by its author in the acquisition of wealth and honour. As an anatomist and surgeon Sir Benj. Brodie will not bear to be compared with Sir Astley Cooper; yet he acquired honours which were never conferred upon Sir Astley Cooper, and, if report is to be trusted, Sir Benj. Brodie was on the point of being elevated to the peerage. As a physiologist the name of Sir Chas. Bell is scarcely once mentioned in the autobiography, nor the name of Marshall Hall.

To those who desire to know in what manner Sir Benj. Brodie discharged the duties which devolved upon him as chairman of the Committee of Physiology of the Royal Society, I must refer the reader to the pages of THE LANCET for 1846.

I am Sir, your obedient servant,

March 27th, 1865.

EUBULUS.

NEWCASTLE-ON-TYNE.

(FROM OUR OWN CORRESPONDENT.)

"THE Prudhoe Convalescent Home"—such is the title of the sea-side hospital proposed to be erected in some accessible situation on our coast in memory of that philanthropic nobleman, the late lamented Duke of Northumberland. To promote this object, a most influential meeting, numerously attended by the nobility, clergy, and gentry of the town and surrounding counties, has been recently held, under the presidency of the Mayor, in the Assembly-rooms. Our own profession was well represented at this meeting, Dr. Charlton making a telling speech in furtherance of the objects in view. At the conclusion, the subscriptions amounted to upwards of £3000. The Lord Bishop of Durham, in the course of his speech, said, "Every clergyman must know that the medical men of this country are men of the greatest kindness of heart; that they are men of honour, as ready to administer to the poor, who cannot repay them, as to the rich, who can give them a good fee." From the last annual Report of the Convalescent Society, it appears that patients going out of the infirmary have received food and wine 665 times, and the small temporary hospital at Marsden has received 132 convalescents, who have all, more or less, benefited by the change. The number of applicants for admission has been far in excess of the accommodation for patients; but now, from the key-note which has been struck at the late meeting on the 1st ultimo, there is every prospect of a structure arising that will receive convalescents "from the Tees to the Tweed"—one in every way worthy of association with the title of "Algernon the munificent."

There has been an increase of small-pox in some parts of the town since my last letter, but the cases, except in the unvaccinated, have been generally mild. From the district registrar's returns, it appears that upwards of 3300 children have

been successfully vaccinated during the last twelve months ending December, 1864; but this can only be an approximation, as many surgeons in private practice make no returns, objecting on the principle that it is unfair to make a demand upon their time for which no remuneration is offered. The Newcastle Eye Infirmary, a very useful and old-established institution, extending its aid, without recommendation, to all poor persons with diseases of the eye, has held its annual meeting. The total number of cases cured during the year has been 1003; relieved, 89; incurable, 30; remaining, 182; total, 1304.

Another useful institution, the Hospital for Sick Children, has held its annual meeting, and, from the Report, it appears to have been doing a considerable amount of good in a very quiet manner; and, although a period of three or four years only has elapsed since it was opened in the way of an experiment, it has already attained a prosperous position among the medical charities of the town. 1400 cases have been under treatment during the year, consisting chiefly of bronchitis, diarrhoea, glandular and skin affections. As might have been expected, the Report attributes many of the affections of children to overcrowding and want of ventilation in the dwellings of the poor; but has not overfeeding a good deal to do with the disorders of childhood? A surgeon here was lately called to see a child, aged two years, in "a fit;" he went, and found the "fit" to be one of alcoholic intoxication. The manner in which tender infants are allowed to gorge themselves with anything that comes in their way is perfectly horrible.

The jerked-beef question has received some attention here. The specimens which I have seen offered for sale might be classed as good, bad, and indifferent. It must be admitted that the appearance of the article is anything but appetising before cooked, and it would be a pity if popular prejudice was further directed against its use by the sale of samples unfit for human food. A gentleman at North Shields, interested in the matter, having taken care to procure a supply of the best quality from Liverpool, as a practical demonstration of its qualities, invited the members of a mothers' meeting, about one hundred in number, to a supper made up exclusively of palatable dishes of jerked beef. The gentleman in question, A. S. Stevenson, Esq., after supper distributed simple directions for the preparation of the food. I think by such means he is likely to have the matter talked about, and tried in the homes of the working people.

At Gateshead, on the 7th of March, a woman died of typhus fever. Dr. Wilson recommended the bed and clothes to be destroyed. Before this could be done, the clothes were removed, and washed by six women, five of whom contracted the fever; and other cases of typhus have since occurred in the neighbourhood. The *Gateshead Observer* called for the appointment of a medical officer of health, and said "something must be done to stay the progress of plagues whose existence in this age of sanitary knowledge is a disgrace, not only to Gateshead, but to every town in the kingdom."

Urged by the press and the public, and startled into activity by the presence of fever and fears of plague, the Gateshead town council has appointed an officer of health for their borough. I do not exaggerate the feelings of the profession when I say that this appointment has given pain to all honourable-minded practitioners in Gateshead. An economic member of the council proposed that circulars be forwarded to the resident practitioners, acquainting them with the vacancy, and the willingness of the council to receive offers for the appointment, at a salary of *twenty-five pounds* per annum. This application was all but unanimously regarded as an insult to the profession. *Nine shillings and sevenpence* a week for the responsibility and work attending the appointment in a town of nearly 40,000 inhabitants! This will equal anything in Mr. Griffin's experience.

At the present time, when so much is said about the want of education and refinement among the mining population of Northumberland and Durham, it may be well to notice that I looked into the shop of a Newcastle bookseller a few days ago, and saw a very excellent achromatic microscope standing on his counter. On inquiry, I found that it was entirely manufactured by a working collier of the name of Knight, who labours in one of the Northumberland mines. He turned his own eye-pieces, made his own stand and stage, and, what is more remarkable than all, he ground his own object-glasses and eye-pieces, and they are nearly free from chromatic and spherical aberration. The instrument would be a credit to any amateur maker, and is superior to the microscopes used by Leuwenhoeck during the time he made his great discoveries.