tient only supposed he had been bitten, and the dog, though reputed, was never proved to have been mad; the animal, I mean, that had merely licked a part, which was believed to be infected. Predisposition of brain, however, and durable impressions of mind, served to excite a paroxysm (the attention, be it observed, directed forcibly to the muscles of deglutition,) and he expired under the calamity, in spite of large and repeated doses of laudanum. Dissection, after death, as might have been expected, threw no light whatever on the malady, and served but to confirm the opinions I have ventured to entertain of it. To be brief—if wounds or ulcers prevail under such circumstances, treat them promptly, as of other origin, regard being had to the extent and degree of inflammation, the secretion and freedom of the alimentary passages, and, moreover, fortify the mind against undue mental impressions, and suggest an appropriate regimen, and, generally speaking, I would guarantee the convalescence of the patient.

“Virtus in actione consistit.”

LIBRARY AT ST. THOMAS'S HOSPITAL.

To the Editor of THE LANCET.

SIR,—I wish to set your readers right with respect to the arrangements of the library at this Hospital.

One of your Correspondents, in a letter inserted in the last number of your publication, insinuates, that a “borough pupil” is prevented from subscribing to our library unless he have previously entered to the Hospital.

Now, Sir, no pupil, whatever school he may belong to, is prevented from becoming a subscriber, nor indeed is any person; the only difference is, that the pupils of St. Thomas's Hospital, are considered subscribers for a more unlimited term than others, for the same amount of subscription; of course the subscriptions may be renewed annually, by pupils not attached to the hospital practice or lectures.

With respect to what is said by your correspondent in the same sentence, about picking pockets, there is so much ignorance, illiberality, and nonsense, displayed, that it requires no further comment.

I am, Sir,

Your obedient Servant,

H. MEYMOTT,

Librarian to St. Thomas's Hospital.

St. Thomas's Hospital,

July 6, 1828.

ST. BARTHOLOMEW'S HOSPITAL.

CARCINOMATOUS ULCERATION OF THE LEFT THUMB, WITH ENLARGED AXILLARY GLANDS—AMPUTATION OF THE HAND—SUBSEQUENT REMOVAL OF THE DISEASE IN THE AXILLA.

READ FULLER, æt. 55, was admitted into the hospital, July 12, 1827, under the care of Mr. Lawrence. The patient has always been employed as a labourer, in Sussex, living regularly, and enjoying good health. About sixteen months since a seedy wart, situated on the back part of the thumb, and similar to some others in different parts of the same hand, inflamed, swelled, and, as he says, festered, and afterwards discharged a thin watery fluid. It slowly increased, being rubbed and irritated in the course of his ordinary occupations, and had attained the size of an egg three months before his admission, being, at that time, free from pain, and not ulcerated. A neighbour, who had been a servant in some hospital, had applied caustic to it every morning for a month, since which the part has ulcerated; the patient, however, does not think the disease grew worse from the application of the caustic. He applied to a surgeon, who gave him a wash, under the use of which it grew worse, and became painful; since that he has discontinued his work, but the disease has been gradually increasing.

July 12. The disease now covers the first bone of the thumb, (the first metacarpal bone of some anatomists,) and the joint between it and the second phalanx, stopping a little short of the carpal extremity of the radius; it occupies one half of the bone of the thumb, and reaches nearly to the metacarpal bone of the forefinger. It consists of a red, hard, uneven, and tuberculated swelling of the skin, partially ulcerated on the surface, and immoveably fixed by a hardened base on the subjacent parts. There are several excoriations in this indurated mass, about equal in size to a sixpence or shilling: some of these are ulcerations, with a clean red surface, but no granulations, eating into the part, and forming rather deep holes, with sharp abrupt edges; others have a fibrous warty character. All of them discharge a thin yellowish clear ichor, with a very peculiar odour. The edge of the mass is tuberculated, and the disease extends by the successive ulceration of these tubercles, which enlarge, become soft, and then form fresh excavations. The integuments are red, hard, and fixed, beyond the limits of the active disease; the radial artery of the affected hand