found ten persons in the country (always excepting incompetent teachers) who would have condemned the Council for removing Mr. PATTISON from the professorships of anatomy and surgery.

Here we take leave of the subject for the present, and, we trust, for ever. It has proved an exceedingly disagreeable one, but we thought it our duty to prove that the Council have been actuated by no vindictive feeling towards Mr. PATTISON, and that it was the imperative duty of the heads of such an Institution, to receive with an attentive ear the complaints of those students *who had won the highest honours which the University had to bestow*. Towards Mr. PATTISON personally, we entertain not the remotest feeling of hostility; we never met him, except on one occasion, when we had reason to be highly gratified with his frank, affable manners, and gentlemanly deportment.

We had almost forgotten to state, that we have received a letter from this gentleman, which will be found in another part of our Journal, and it is not necessary that we should do more than point attention to such a document.

INTERESTING CASE OF STRANGULATED FEMORAL HERNIA.

*By HENRY CLAY, Esq., Surgeon,
Kingston-upon-Hull.*

AUSPICIOUS as is the present epoch for the accomplishment of a "sweeping reform" in all our institutions, civil and legislative, as well as medical, I cannot forego the pleasure of cordially congratulating one who has ever stood foremost in the ranks of its advocates; and who, through the medium of his popular publication, has contributed as largely as any living man towards the attainment of that universally-admitted desideratum. The tablets of THE LANCET will be a lasting memento of your devotion to, and patriotic struggles in, the great and good cause; its pages have ever been characterised by a steady determination to resist the tyranny of, and to wage eternal war against, an odious professional oligarchy,

which, typical of its political chum, has sought to introduce into the fair field of science an analogous system of monopoly, exclusiveness, and oppression; in fact, to render it a barren waste. Your masterly expositions of this system, your graphical delineations of the worthies or bats, who compose this conclave, of their imbecility, acts of wanton outrage to the feelings, and gross injustice and inattention to the interests of the mass of their professional brethren, your oft-repeated and energetic appeals to the much-insulted class of general practitioners, to combine their efforts in cleansing out this moral Augean stable, have undoubtedly operated materially in producing the present tone of popular feeling, and in effecting a train of splendid triumphs.

Addressed, as these were, to men of intelligence and ability, they, like true philosophers, sought to ascertain the *origin* of this depravity—to trace effects to their primary cause, and the result being a conviction that all their grievances as a grade are but ramifications of that accursed political system which has been as withering, as blighting, and as baneful to all within its rage and sphere as the Upas tree itself; they resolved not to be satisfied with partial measures, lopping off a mere solitary twig or branch, not to palliate but to cure, to apply the axe to the root itself; every-where have they so actively bestirred themselves, and so well exerted and directed has been their powerful and extensive influence with the community, that they have, I hesitate not to say, been the main instruments—the chief magi, in evoking that spirit which bids fair to shake to its base the whole fabric of corruption. Accept these remarks as a tribute of gratitude for your important services to the profession, under a hope that your most sanguine hopes will be realised.

I transmit to you the history of a case of strangulated femoral hernia, for insertion in the columns of your valuable and distinguished periodical, should you deem it of adequate interest and importance.

CASE.

On the 22nd of March last I was requested to meet Dr. Alderson in consultation on a case of incarcerated hernia, which occurred in the person of a lady, æt. 73; and over her the hand of time had by no means passed lightly; her attenuated and emaciated frame, her furrowed brow and wrinkled face, her lack-lustre eye, loss of memory, and general intellectual imbecility, too legibly portrayed the ravages of the ruthless innovator. The history given by herself and her attendants was, that she had for many years (on any extraordinary muscular exertion) been subject to a swelling in the groin, to which, however, she attach-

ed no importance, and did not employ any restraining or counteracting means, as it produced neither pain nor inconvenience, and had been at all times reducible on assuming the recumbent posture and practising gentle manipulation. The exception took place on the 19th. In the forenoon of that day, whilst dandling a child, she felt, to use her own apposite phrase, "a something giving way" in the abdominal parietes, and on examining the groin was surprised and alarmed to find a tumour far exceeding in size any former one, and pertinaciously resisting all her wonted efforts at reduction. The train of symptoms consequent on strangulated intestine set in during that evening and the ensuing day, with singular violence and intensity, and on the morning of the 22nd, Dr. Alderson being applied to, he at once saw that the case demanded prompt and decisive measures, and desired that a surgeon might be called in. On my arrival I found the unhappy old lady such a subject as I have before described her, her pulse ranging between 120 and 130, small and thready, tongue thickly coated, and of a dark-brown hue, countenance expressive of extreme anxiety, great oppression at the præcordia, respiration laborious, and vomiting of stercoraceous matter; on examining the site of the hernia, I discovered a turned-up femoral, the size of a large orange, tense and elastic, but not very painful; abdomen generally swollen, but free from tension, and little pain on pressure. We were informed that her bowels have been constipated, and that it is now fourteen days since they were acted upon. I employed the taxis assiduously for some time, rotating the limb inwards, and adopting the various suggestions which have been supposed to be calculated to facilitate and accomplish reduction; but such was the tenseness of the tumour, and so tightly begirt was the hernial sac at its cervix, that I failed in effecting a favourable impression, and such was the prostration of the *vis vitæ*, that we deemed the energetic collateral adjuvants—bleeding, tobacco enema, and even the warm-bath, inadmissible, and confined ourselves to the application of the frigorific lotion of muriate of ammonia and nitrate of potash, and the use of terebinthinate and fetid enemata. At 3 P.M., accompanied by Mr. Higson, house-surgeon to the Hull Infirmary, I again visited the patient, had recourse to the taxis, and was again unsuccessful; we were told that the enemata had returned without feculent matter, and found all the symptoms aggravated in degree. As a dernier resort the operation was now proposed; but neither the patient, for she had sufficient intelligence to comprehend this point, nor her friends, would consent to it. Ordered her a thebaic with the effervescent saline.

March 23, 9 A.M. She was apparently *in articulo mortis*, her countenance in expression was truly Hippocratic; we then obtained permission to operate, and although none other than a fatal result could be anticipated, we determined to give her the advantage of the "forlorn hope."

OPERATION.

The usual T incision being made through the integuments, the flaps reflected and the various lamina of fasciæ divided, the hernial sac was at length exposed, which being in its turn incised, the contents consisting of a portion of omentum in front, and a large knuckle of intestine behind, appeared to view. There was no serum in the sac; the adhesions were light and easily broken up; the vessels of the omentum were extremely turgid, and of a dark-purple colour, whilst the intestine generally was of a deep-chocolate tinge, and studded with gangrenous spots. Tracing the protruded parts to the crural ring, I found the stricture, as usually, formed by the superior part of the iliac portion of the fascia lata (where it is inserted into Gimbernat's ligament) which embraced the omentum and intestine so rigidly that the director could not be passed to the anterior or upper side, and not without some difficulty on the outer; the slightest touch of the bistoury sufficed; a few fibres were divided, and the hernial contents were returned with facility. During the operation not a tablespoonful of blood was lost; a small cutaneous arterial ramification was divided, but it at once retracted, and at the conclusion we were astonished to find that the old lady had in some degree rallied. Saline aperients with enemata ordered.

3 P.M. Copious alvine evacuations procured, pulse of a bolder character; no vomiting since the operation, the countenance has lost its extremely anxious expression, the tongue still retains its thick brown coating, and the abdomen is tender on pressure. Ordered 20 leeches to the abdomen with subsequent fomentations, and an effervescent saline julep to be taken at short intervals.

9 P.M. Abdominal pain and tenderness much mitigated. Ordered calomel and opium bolus.

March 24. The patient has had comparatively a tranquil night; no abdominal pain; pulse 90, and has better volume; tongue not so thickly coated; bowels not acted upon during the night. Ordered *oleum ricini*, ʒss. Cont. haust. salin.

25. The bowels have been freely evacuated; pulse improved in calibre; tongue clean; informed that the urine has been retained some hours—introduced the catheter and drew off a pint.

26. This morning dressed the wound and found the entire extent of the transverse in-

cision healed by the first intention. The abdomen continues free from pain, and the patient is in every respect doing well. Ordered a generous and nutritious diet with occasional aperients.

I shall transcribe no further from my case-book ; it will suffice to say that from this date her improvement was rapid ; in the course of three weeks the wound was completely cicatrised ; a week afterwards she could bear the pressure of a truss ; was soon capable of resuming all her customary avocations, and is at the present time enjoying a better state of health than previous to the operation, inasmuch as her bowels now act regularly.

Thus, Sir, was a case where hope appeared to be extinct, and which the best authorities and precedents would have justified us in abandoning, as irremediable by the interference of surgery, brought to a successful and happy termination.

ENGLISH CHOLERA.

ON THE USE OF OPIUM AND THE MUSTARD CATAPLASM.

By JOSEPH A. SMITH, Esq., Surgeon,
Manchester.

I PRESUME the disease termed English cholera has offered few varieties in character. Its severity may have been instigated or determined in individual instances chiefly by the age, sex, and previous habits of the patient ; beyond this, as far as my observation has gone, I cannot detect any difference between the epidemic which has been prevalent in this town, and the affection so elegantly described in your pages by Mr. Garner of Nottingham.

I cannot, however, coincide with the suggestions of that gentleman respecting the use of prussic acid. It is certainly true of many forms of epidemic, that after a time those disordered actions which, in their assemblage, constitute its history, seem as it were to have worn themselves out ; the subsidence of the disease, not unlike (excepting in definite duration) many of the exanthemata apparently depending upon the passing away of a certain train of morbid associations having no disposition to permanency, and necessarily terminating in health. With such affections it requires but little tact to grapple ; they may and will subside under any form of treatment not positively injurious, nor do I doubt but that many cases of what is termed cholera have been of this harmless character.

Severer forms are, however, occasionally met with. Violent vomiting, preceded by pain and oppression in the epigastrium, in-

tense irritability of the mucous gastric surface continued during several hours, and perhaps as the consequence of this ; spasms of the gastrocnemii and muscles of the foot, coldness of the extremities and skin, and an almost imperceptible pulse. Purging, alternating with sickness, in the early stage, with copious evacuations, subsequently, of a thin frothy mucus tinged with blood ; in fact the patient seems, in many instances (to quote the words of one who has described the affection well), to be dying, or in the last stage of acute abdominal inflammation.

Are these the cases to which so deadly a sedative and depressant as prussic acid is applicable ? It appears that, in the case cited by Mr. Garner, pills of calomel and opium had been regularly administered during the day without benefit, the vomiting remaining unrelieved. Admitting that the sedative action of the acid was beneficially established in this instance, no deduction, no inference can be made from this case to others, inasmuch as the case was not one of well-marked severity. I will not say the acid was useful, but I am confident that it is only fitted for the relief of comparatively trifling cases. That *it produces good may be true, but that good is effected at an immense expenditure of the living power*—such a sacrifice in fact as cases resembling those I have witnessed would never bear. Nor do I attribute Mr. Garner's success to the calomel and opium which probably had been given in minute doses. I think I have reason to believe that calomel exasperates the sickness, especially when from one to three grains are repeatedly given. After stating to you that I have tried the acid unsuccessfully in the case of an elderly female whom I found in a sinking state from vomiting, cramp, and tenesmus, allow me to lay before your readers a mode of practice which, though it lays no claim to novelty, has never disappointed me. Finding that fluids of the mildest description, even in the minutest quantities, are rejected, or useless attempts at vomiting are excited, I direct two, three, or four grains of powdered opium to be swallowed in form of pill, enjoining abstinence from liquids during the succeeding hour. The epigastrium is to be well washed with vinegar, and a large cataplasm of mustard and hot water instantly applied. I can truly say that in many instances the poultice has acted like a charm, the skin is shortly reddened and painful, and just as this action is established the vomiting ceases, the pulse rises and becomes full, the surface regaining warmth, and the stomach its power of retaining liquids. Purgatives form the after treatment, and although there may have been severe tenesmus and scanty evacua-