suggested by Sir W. Fergusson, with the trifling difference of extending the left crus of the semilunar incision about two lines lower down, between the rectum and ischium on the left side, "to allow the urine a more easy escape."

The reasons given by Mr. Ransome for adopting this combination of the two acknowledged operations were those so well set forth by Sir W. Fergusson. I have notes of more than twelve cases operated on in this way by Mr. Ransome with very good results. And if my memory serves me well, Mr. Jordan has many times operated in this way; but, as I have not any notes of his cases, this I give from memory alone.

I am, Sir, yours, &c.,

J. OGDEN FLETCHER, M.D., F.R.C.S.

Manchester, Jan. 1868.

THE CONTAGIOUS DISEASES ACT IN CHINA.

To the Editor of THE LANCET.

SIR,—Referring to your annotation on this important subject, allow me to state that in the 1st volume of THE LANCET for 1862, page 631, when writing on the ravages of syphilis at Foochow and other parts of China, I said:—"Were Lock hospitals established in the chief cities of this country, an incalculable boon would be conferred on the natives." I trust our Government will, without delay, co-operate with the colonial authorities, and establish the European sanitary police system both in China and Japan.

By these means, the natives themselves, and our soldiers and sailors, will be greatly benefited. I am sure our consuls and excellent medical missionaries will give their valuable assistance in promoting this benevolent scheme, and that they will be seconded by the executive and medical officers of both services now stationed in those countries.

You are aware that I have for some time, along with Dr. Dickson, R.N., and others, advocated the extension of the Act to the mercantile marine, and the civil population of large towns of this country; and it is satisfactory to notice, that these prohibitive regulations are slowly, though surely, finding favour with the Government and the public.

I am, Sir, yours faithfully,

Kidderminster, Jan. 1868.

JOHN ROSE, M.D.

THE NEW PHARMACOPŒIA.

To the Editor of THE LANCET.

SIR,—A few days since I prescribed "liquor morphiæ hydrochloratis," and my prescription was dispensed by a first-rate chemist at the West-end. The effect of the medicine was such as to satisfy me that my patient had taken more morphia than I intended to administer.

Speculating as to how a mistake could have been made, I surmised the possibility, but could scarcely admit the probability, of the prescription having been dispensed according to the formula of the London Pharmacopœia, which I supposed was now *entirely* cancelled. However, on applying to the chemist, I was surprised to find my suspicion realised, and was told that they always dispensed according to the old forms unless otherwise directed. From this it is evident that for security it is still desirable to head the prescription with Ph. B., a proceeding which ought now to be quite unnecessary.

I am, Sir, yours &c.,

Southwick-place, Hyde-park-square, Jan. 1868.

THOMAS BALLARD, M.D.

TAPEWORM IN BIRDS.

To the Editor of THE LANCET.

SIR,—In THE LANCET of the 4th instant, page 31, I find it stated that Mr. Lawson Tait had discovered in the lungs and mesentery of a swallow "minute yellowish-grey points, which presented under the microscope all the characters of tubercle."

It might interest some of your readers to hear of another disease which seems to afflict the feathered tribe,—I mean Tapeworm.

Last year, whilst residing in Norfolk, I caught in a garden a poor half-starved-looking sparrow. Turning the "puir wee birdie" over in my hand, I found underneath one of its wings a fistula, and hanging out of this fistula was a piece of tape-

worm, about half an inch long. I took hold of this, and drew out a portion of worm nearly three inches in length. Every joint was as perfect as those found in worms expelled from the human body. No doubt the existence of this parasite in the system of the bird was the cause of its thin and wasted appearance.

On account of a certain circumstance which occurred, I was unable to make a post-mortem examination of the little creature. It would have been interesting to have seen if there were any other portions of worm in the viscera; and it would have been still more interesting to have seen how far the fistula penetrated, and what were its connexions. Information as to these points, I am sorry to say, I cannot give. How the parasite got into the system of the bird is, I think, of easier solution. That sparrows are fond of meat we all know; it is, therefore, just possible that the one above mentioned may have picked up some bits of infected meat, and thus, unconsciously, given itself tapeworm.

I am, Sir, your obedient servant,

THOMAS LAWRIE GENTLES, Surgeon.

Derby, Jan. 1868.

LIVERPOOL.

(FROM OUR OWN CORRESPONDENT.)

THE following epitome of cases of recent occurrence may interest your readers. I propose on future occasions, when your space will admit of it, appending a short account of any case of sufficient importance occurring in the practice of our hospital physicians and surgeons. Those given below were admitted into the Southern Hospital, under the care of Dr. Nottingham:—

Traumatic Tetanus; Recovery.—T. L—, a boy of delicate frame, was admitted July 14th, with a lacerated wound of the left foot, on the underpart of the ball of the great toe. Tetanus likely to prove fatal came on seventeen days after admission. Salivation from mercurial treatment was followed by complete recovery.

Strangulated Hernia.—W. J—, a young man of eighteen, brought from a ship with strangulated inguinal hernia on the right side, was admitted and operated upon July 29th. After the fold of intestine was returned, a portion of omentum, of the size of a pigeon's egg, with adhesions preventing satisfactory reduction, was tied and excised. Patient recovered favourably.—A corresponding operation, with removal of a larger portion of omentum, was practised Dec. 3rd upon a female, aged fifty-four, with strangulated femoral hernia, "down some days." She is doing well. Both these patients had neglected the truss. In the after-treatment of both, opium and not purgatives was at first employed.

Ovariectomy (Four Cases).—A. R—, aged thirty-seven, mother of one child, had found herself becoming larger during nearly two years, but was otherwise healthy. When the cyst was compressed laterally between the hands, a pulsation was imparted to it by the aorta behind, which led to some difference of opinion with regard to diagnosis. Ovariectomy, June 13th.—Cyst contained fifteen pints of fluid, no adhesions of importance. The ligature applied to the pedicle on the left side came away after one month had elapsed. The patient has recovered favourably.

CASE 2.—Miss B—, aged thirty-six, had complained during two years before the operation of gradual abdominal increase with progressive decline of health, and seven weeks before it was performed there seemed no prospect of ovariectomy—the patient being then so emaciated and feeble; but to relieve extreme distension and suffering tapping was resorted to, and thirty-five pints of fluid heavily charged with albumen, was let off. Remarkable improvement in health followed the paracentesis, and the cyst again distended was removed August 29th. Adhesions to the parietal peritoneum were met with on both sides; the left side pedicle was secured by a clamp with parallel blades which was removed after five days, and the patient recovered good health, which she now enjoys. This case occurred in the private practice of Dr. Nottingham.

CASE 3.—Mrs. F—, aged forty-seven, a strong woman, mother of one child, had suffered from ovarian dropsy during eighteen months, and had been twice tapped. Ovariectomy was practised Sept. 4. The separation of the cyst, containing fourteen pints of fluid, from the intestines to which it adhered, was followed by considerable hæmorrhage. The parallel clamp employed was removed after five days. The patient seemed to feel no shock from the operation, and made a complete recovery.

CASE 4.—Mrs. W—, aged forty-four, mother of three children.