Correspondence.

"Audi alteram partem."

SMOKING AS A CAUSE OF OPTIC ATROPHY, ETC.

To the Editor of THE LANCET.

SIR,—I am desirous of saying a few words on this subject, as Mr. Wordsworth has broached it in your columns.

Since I have learnt that Mr. Wordsworth was inclined to connect a definite lesion of the eyeball with the habit of smoking, I have given attention to the question. The results at which I have been able to arrive are, however, much opposed to the views which he last week enunciated. I hope that, for the purposes of this inquiry, we may be allowed to discard the term "amaurosis" which has been imported into it. That is a phrase originating in the darker ages of ophthalmic science, and has been well defined as describing a condition in which the patient saw nothing, and the surgeon just as little. It included all those "obscure diseases" of the fundus of the eye in which the existence of disease was inferred from the loss of sight, but was beyond the reach of diagnosis.

Fortunately the fundus of the eyeball is no longer concealed from inspection, but with the aid of the means which modern physicists have placed at our disposal we can examine the optic papillæ, the retina, the choroid, and vitreous as readily as the cornea, and can read off their pathological changes. When, therefore, authors speak now of "tobacco as a cause of amaurosis," we may expect that they will be good enough to define the form of disease to which they apply that very indefinite term. Mr. Wordsworth, when speaking of amaurosis as the consequence of smoking, is of opinion that tobacco produces white atrophy of the optic nerve.

I have been unable to trace the connexion in any case of white atrophy which has come under my notice, and I cannot see that he supplies any satisfactory evidence which can be considered to support that view.

It will be observed that the tobacco disease of which he speaks in the clinical histories is in no way distinguishable from ordinary white atrophy; it seems, indeed, to be avowedly identical with that condition. Now in the first place, to those who will think over the pathology of that affection, it will not seem a very probable suggestion that tobacco-smoking should produce this specific degeneration, without first *very seriously* affecting the other parts of the nervous system, on which it undoubtedly acts more powerfully and directly.

Among the known causes of white atrophy of the optic nerve are cerebral effusion, tumours of the brain, structural changes of the thalami and corpora striata, &c. In order to ascertain whether tobacco-smoking has any claim to be ranked among the unknown causes, I have been examining with the ophthalmoscope all the inveterate smokers on whom I could lay hands among my patients and in a considerable acquaintance. I have not in any case found the least trace of or tendency to white atrophy. On the other hand, white atrophy is found in children and females as well as in adults and males. Of the six cases which have come under my notice recently, and in which I have investigated the question, not one was a regular or considerable smoker; two did not smoke at all. In a very distressing case of double white atrophy now under my care, in which the disease is gradually approaching its last stage and the sight nearly extinguished, the patient has been a very moderate smoker, only smoking when a friend dropped in. He has not derived any benefit from total abstinence. I invite Mr. Wordsworth to reconsider this question, and I believe that a further review of clinical evidence will lead him to the same conclusion as myself.

I am, Sir, your obedient servant,

Wimpole-street, Cavendish-square,
July, 1863.

ERNEST HART.

WORKHOUSE TREATMENT OF DELIRIUM TREMENS.

To the Editor of THE LANCET.

SIR,—A respectable tradesman and freeholder of the parish of Paddington, who was suffering from an attack of delirium tremens, was sent *pro tem.* by his friends to the workhouse, because he was unmanageable at home. After being in the

infirmary there some hours, the patient, who was a large and powerful man, and who during that time was placed under the immediate care of an *elderly* man, became restless and violent. He was, upon thus becoming unruly, placed in the padded room, and left to his own devices from about eight A.M. till noon, when he died.

It transpired in evidence at the adjourned inquest, at which the writer was present, that the medical officer of the union, Dr. F. W. Mackenzie, knew nothing of this case till he went to the workhouse—at, I believe, his usual time of attendance—in the middle of the day. The Doctor, however, stated that the master of the workhouse never sends for him (a distance of about two miles) unless the patients in his judgment appear to require immediate attention. Dr. Mackenzie also approved of the course adopted towards the deceased, and spoke of it as the "new system" of treatment now successfully pursued (especially at the Paddington Workhouse) with patients who are suffering under the influence of delirium tremens. This new system, he said, is, "to allow the patients to get into a state of quietude before medicines are given." "Exhaustion" was the term once used by Dr. Mackenzie in his evidence. (Pray, Sir, is this "new system" the same as that adopted by Watson, Stokes, and others?)

The jury returned the following special verdict:—"That the deceased lost his life accidentally from a blow or fall; and the jury further say that when the deceased was brought into the Paddington Workhouse in a state of excitement from delirium tremens, he ought to have received medical attendance directly, and not to have been allowed to remain ten hours without any properly qualified medical attendance."

It was stated, as I understand, that the attendance of the medical man was but seldom required at the workhouse out of the usual course, because poor people went to hospitals, dispensaries, or any other place, rather than the workhouses, when requiring medical treatment. After what transpired at the above inquest, need we be much surprised that they only go to such places under the pressure of the most dire necessity?

I am, Sir, your most obedient servant,

Queen's-road, Bayswater, July, 1863.

A. R. POWELL.

P.S.—It should be borne in mind that the deceased was admitted into the house by virtue of a certificate stating the nature of the case.

THE

RIGHT HON. SIR CRESSWELL CRESSWELL.

AT seven minutes to seven on the evening of Wednesday the distinguished Judge of the Court of Probate and Divorce, Sir Cresswell Cresswell, suddenly expired. It is well known that he had recently met with a severe accident; but the injury which he then received, although it may have accelerated his decease by the severe shock which it undoubtedly inflicted on the system, does not appear to have had any direct share in the fatal result which has unexpectedly occurred. When violently thrown over by the runaway horses which broke from Lord Aveland's carriage, Sir Cresswell was found, on being raised from the ground, to be suffering from fracture of the knee-pan. This was not, however, a fracture from direct violence; but when examined by the surgeon summoned—Mr. James Lane, of St. Mary's Hospital—he found that from the nature of the fracture it was evidently one of those rare instances in which the knee-pan is rent by the sudden and violent action of the extensor muscles of the thigh, commonly in the effort to recover the balance of the body, and avoid falling. There was but little bruising—much less than might have been anticipated, and no other apparent injury. The fractured part was healing favourably; and Sir Cresswell bore the confinement with great equanimity, and was in good spirits throughout. Mr. James Lane and Mr. Charles Hawkins were in continuous attendance, and everything promised a speedy recovery. Properly devised splints having been adjusted, Sir Cresswell was able, with assistance, to shift himself from the bed to a couch, and had done so in the course of Wednesday. As he was being lifted in the evening from the couch again to the bed, with the assistance of his brother, the Rev. Oswald Cresswell, he complained of feeling faint, asked for wine, and