MOTION AND REST IN THE TREATMENT OF SURGICAL AFFECTIONS.

To the Editor of THE LANCET.

Sir,—I think the following case remarkable from the fact that, although after death so extreme an amount of structural change was discovered, any symptoms which might lead one to suppose such a state of things during life were perfectly absent, and comparative good health enjoyed by the patient, although the diseased structure subsequently discovered must have existed from birth.

A boy nine years old died after a week's illness with symptoms of acute peritonitis and extensive effusion into the peritoneum. With the exception of being troubled once with ascarides, the mother stated that her boy always enjoyed good health, and was remarkably active and cheerful for his age. On examination after death, besides the usual marks of universal decomposition, the entire absence of tubercle from every other organ; lungs, liver, spleen, and kidneys were perfectly healthy. I am, Sir, your obedient servant,

September, 1861.
A NAVAL SURGEON.

PARISIAN MEDICAL INTELLIGENCE.

(FROM OUR SPECIAL CORRESPONDENT.)

In a recent communication to the Academy of Sciences, M. Guyon calls the attention of the profession to a condition already observed in some of the aggravated forms of yellow fever—namely, the suspension of the heart's action, absence of radial pulse, and death-like chill of the cutaneous surface, co-existing with perfect integrity of the intellectual faculties. "English physicians," says the author of this essay, "designate this particular variety of yellow fever as the altid form, and the Spanish writers refer to it as the 'fri-o-marmoreo, or marble-cold type.'

* I give no name of the talented gentleman, because it has been whispered in a sinister way all over the city.

ABSENCE OF SYMPTOMS IN EXTENSIVE DISEASE.

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STOKES NEWINGTON DISPENSARY, Sept. 1861.
CHARLES ROSS.