tures to unnecessary and protracted suffering, and what must necessarily be the consequence in many instances—loss of life? Shame on them if they do not retrace their steps! They must by this time understand that something more than a high order of intelligence is necessary to constitute a good surgeon. Then why have chosen one who had never manifested the other requisite qualities, and which, it is now evident he does not possess, when more gifted rivals were at hand? Proh pudor!—I am, Sir, yours respectfully,

ONE WHO MUCH ADMIRES THE MANY EXCELLENCES
OF THE UNSUCCESSFUL ASSISTANT-SURGEON, AND
NOT A DISAPPOINTED CANDIDATE.

London, Oct. 1848.

To the Editor of THE LANCET.

SIR,—In answer to your query at page 491 of last week. As you have given my address, there can be no objection to my name being appended to my letter, signed "S," (*ante*.) My reason for suppressing both name and address was, that I fancy there is sometimes a little egotism or advertisement in the style of, "I did this and that, ably assisted by" &c. &c. I am, however, glad to take this opportunity of mentioning, that since writing to you last week, I have seen the subject of operation I mentioned, and to my surprise I find that there is a fresh protrusion on the operation side; it is bowel, and very easily reduced, and kept in its place. It did not enter the scrotum. Now I shall be very glad, if, through the medium of your pages, gentlemen will favour me with their experience of cases anything like the one I have related, in which I am greatly surprised that the operation was not a radical cure. The large mass of omentum was removed, and a single ligature embracing its neck applied, (I had reasons for using a single ligature instead of applying separate threads to the vessels.) After a considerable amount of sloughing of omentum above the ligature, healing went on rapidly, and the stump of omentum became incorporated with the surrounding parts. However, three months have since elapsed, and notwithstanding this, as I supposed, most efficient plug, the bowel protrudes, and teaches me the lesson that I should have applied a truss for a few months. There was a considerable amount of pressure applied, but the man having hernia on both sides, when he arose from his bed I applied a truss to the opposite side of that of operation; he did not feel the slightest pain or inconvenience in the neighbourhood of the wound any more than as though he had never been the subject of hernia, and, indeed, did not feel any inconvenience from the fresh protrusion. He has a brother with inguinal hernia of both sides, and I understand that another brother died in the same condition. The survivors are broad-shouldered and peculiarly broad-hipped men.—I am, Sir, your obedient servant,

Meriden, October 30, 1848.

ARTHUR SARJEANT.

THE INCORPORATION OF THE GENERAL PRACTITIONERS OF ENGLAND WITH THE UNIVERSITY OF LONDON.

To the Editor of THE LANCET.

SIR,—In your editorial article of the 7th October, when remarking upon the present position of the University of London, you observe "that the graduates, and, we believe, some of the best men in the senate, are diligently striving to make it in reality what it is in name, 'The Metropolitan University.'" I beg to suggest the practicability of making this institution still more decidedly a "Metropolitan University," by an increase of its members, as an act of grace. Let the senate admit, upon application or petition, to an *ad eundem* degree such M.D.'s as have graduated by examination in any British university, and as M.B.'s, such medical practitioners as possess the double qualification, and hold such other position as the senate may reasonably require.

I entirely coincide in the correctness of your opinion, "that all the most able and aspiring students—the youth of talent and genius who enter the profession—naturally direct themselves to the University of London, as the place where the most honourable degree can be obtained." This disposition is as it should be: and it is to be hoped that in any legislative enactment which may be passed in favour of medical reform, the possession of a university degree will be rendered necessary to every man who enters the profession; but should this unfortunately not happen, my conviction still is, that the emulation of many students will prompt them to obtain this position, and thus to some extent render nugatory the error of inefficient legislation.

As "the subject of medical reform is now actively engag-

ing the attention of the senate," may not the question advantageously form one subject of their deliberations. To what extent, or can any proportion of English medical practitioners be put into the possession of the degrees of the University of London, without an objectionable infringement of the rights of those gentlemen who are already members of this institution by virtue of examination? Would there be any impropriety or difficulty, if most who possess the double qualification, and who are of a certain age, were conditionally admissible to the degree of M.B., without further examination? the possessors of the degree of M.D., obtained by examination in other British universities, being also admissible to a similar status upon corresponding terms?

I am aware that the present regulations of the senate admit, with restrictions, persons of mature age to the respective degrees, by undergoing the prescribed examinations. Very few, however, have availed themselves of the opportunity of graduating; and the reason must be clear, if not self-evident. When men have arrived at forty or fifty years of age, whatever be the amount of practical information they possess, or the degree of confidence which they most deservedly may enjoy with the public as trustworthy and talented practitioners, neither their habits nor the usual direction of their thoughts and pursuits can be such as will render the ordeal of examination in scholastic science an easy or perhaps a justifiable requirement. This view ought to have been regarded with great consideration. Is it not hard that those gentlemen should even appear to suffer (admitting that the inconveniences are not real) from the altered or additional institutions of an age of transition and change, and doubtless of great progress also, and that they should be presumed, in public opinion, (but which is not very correctly cognizant of such subjects,) to fail in comparison with much younger men, and of whom themselves probably have been primarily the teachers?

Whilst I utterly disclaim the most remote wish of obtaining that which by some, perhaps, may be considered to be an unfair participation in university honour, (for to myself the adoption or rejection of the proposal is of no consequence,) I cannot but think that the senate would do themselves much credit by making a judicious extension of their institution in this manner; not only would their own hands be strengthened by the proceeding, but a great boon would be granted: a true scientific home would be obtained for the practitioner, one of which he would ever feel proud, and an end be put to the present agitation for the presumed requirement, a new college. Surely this proposal is a strange inconsistency. One of the chief errors of medical politics, of which, as a body, we complain, is admitted to consist in the present plurality of examining corporations; and because nineteen different curricula from which the student may select are objectionable, we most sagaciously propose a remedy by adding a twentieth. Is this wise?

I will not occupy your valuable columns, or the time of your readers, by making any remarks upon the advantages which would result to the profession at large, if an extensive admission to university honour could be made compatible with the future arrangements of the senate. They may, however, be summarily included under—increased respectability of the members of the profession in their present and future relations with the public, and unity of sentiment and feeling towards each other, many of the artificial distinctions, the causes of bickering and quarrel, being destroyed.

I am, Sir, yours most obediently,

October 14, 1848.

X. P.

NAVAL ASSISTANT-SURGEONS AND MR. WAKLEY.

Bay of Naples, Sept. 27th, 1848.

THE Assistant-Surgeons of the Royal Navy, serving in the Mediterranean Fleet, beg leave to offer to Thomas Wakley, Esq., M.P., their grateful acknowledgments of his services in their cause.

They cannot be too thankful for the advocacy which their claims have found in the influential pages of THE LANCET, for by the forcible arguments and style of the editorial articles which have appeared from time to time, their grievances and claims have been brought home to the mind of the profession at large, from whose sympathy they expect more than they hope to obtain by their own unaided efforts.

But while they are thankful for this aid within the bounds of the profession, they feel a pride in reflecting that the senate contains members of that profession, whose voices, when raised in the denunciation of abuses, or in the endeavour to obtain redress of grievances, never fail to gain a respectful attention; and whose opinions are re-echoed

throughout the length and breadth of the empire. With great satisfaction, then, they anticipate the "motion" regarding the position of the assistant-surgeons of the royal navy, which Mr. Wakley is said to be about to bring forward for the consideration of the House of Commons in the ensuing session of parliament; for they are sanguine in their hope that by its means such an expression of public opinion will be elicited as will render it impossible for the executive of the navy to retain the junior medical officers of the service in their present undignified and deteriorating position.

The assistant-surgeons of the Mediterranean, united in sentiment with those on distant stations, subscribe this address, with a hearty desire that Thomas Wakley, Esq. (whom they have the honour to acknowledge as a medical man) will be successful in the noble enterprise he is about to undertake, "to vindicate in parliament the rights of a widely-scattered, but not undeserving branch of the medical profession."

Signed by request of twenty-eight assistant surgeons of the Mediterranean Fleet.

FRED. JAMES BROWN, M.D. Lond. et Edin.,
Assistant-Surgeon R.N., H.M.S. "Howe."

To Thomas Wakley, Esq., M.P.

TREATMENT OF THE CHOLERA BY CHLOROFORM &c. IN PECKHAM HOUSE (POOR) ASYLUM.

(FROM "THE TIMES" OF OCTOBER 30.)

To the Editor of the Times.

SIR,—You will oblige me by allowing me, through the medium of your columns, to bring under the notice of the profession a new method of treating this dire malady, and which has proved pre-eminently successful. I allude to the use of chloroform, which was first suggested by Mr. Francis Ferguson, the assistant-surgeon to this asylum, and has been employed by us conjointly in ten cases of malignant cholera with perfect success, and has likewise received the sanction of Dr. Clutterbuck, the visiting physician, and Mr. Fidler, the visiting surgeon of the establishment.

The disease first broke out here in a malignant form on the 19th inst. (one mild case having appeared two days before), when four cases occurred, two of which proved fatal, the one in seven and the other in eleven hours. On the following morning a new case occurred, in a very aggravated form, characterized by incessant vomiting and cramps, violent purging, universal coldness and blueness of skin, and general collapse.

Seeing that the most approved methods of treatment were of no avail, either in this case or in those attacked the previous day, (another of whom was fast sinking,) and that this patient must likewise assuredly sink ere long, unless relief were obtained, Mr. Ferguson suggested the employment of chloroform by inhalation, under the influence of which she was then placed, (in one hour after being attacked,) with the abatement of every bad symptom; the nervous system being immediately tranquillized, the vomiting and cramps ceasing, the purging being checked, and the heat of the body returning.

This success encouraged us to persevere; and we have now employed it in ten cases of malignant cholera with complete success, six having perfectly recovered, and four being convalescent.

In two of the fatal cases it was also used, but in them the patients were both sinking before the remedy was thought of.

In the asylum we have had in all seventeen cases of malignant cholera; of whom five have died, eight have recovered, and four remain under treatment, but are now convalescent.

The following is our usual mode of treatment:—Place the patient in bed in warm blankets; give a glass of brandy in hot water, with sugar, and spice; apply friction to the body by means of warm flannels; and an embrocation composed of liniment. saponis comp., liniment camphoræ comp., tinct. opii, and extract. belladonnæ; apply to the whole surface of the body bags filled with heated bran; place the patient under the influence of chloroform by inhalation, and keep him gently under its effect as long as the bad symptoms recur, (which they frequently do on its effect ceasing and his regaining consciousness.) Give in the intervals small quantities of brandy-and-water, and thin arrowroot or milk for nourishment, along with milk-and-water, or soda-water with a little brandy for drink. Avoid everything else in the shape of medicine, and trust to the efforts of Nature in rallying from the poison of the disease.

Of course great caution is necessary in administering the chloroform, and in not pushing it too far. In some instances

the patient will sleep for twenty minutes or half an hour—in others, for several hours; and on awaking will again be seized with a return of the vomiting and cramps, when the chloroform must again be resorted to, and the patient kept in a great measure under its influence till these symptoms abate. One of our cases required its use at intervals for twenty-four hours. Again, the reaction after its use may be so great as to require gentle bloodletting; which occurred in two of our cases, both being persons of full habit of body and sanguine temperament, the one a nurse, and the other a male farm servant.

Should the simple apparatus commonly used in the hospitals for administering it not be at hand, a small teaspoonful may be poured upon a towel, and will answer very well.

That which we use is of great purity, and procured chiefly from Messrs. Gifford and Linden, chemists, 104, Strand.

I am, Sir, your obedient servant,

JAMES HILL, M.D., Resident Surgeon.

Peckham-house Asylum, Oct. 25."

ON SPASM OF THE HEART.

To the Editor of THE LANCET.

SIR,—The absence of any remarks from yourself, as Editor of THE LANCET, in reply to the letter of Mr. Ward, in the last number of your journal, on the subject of "Spasm of the Heart," has probably been the consequence of a wish to leave the matter in the hands of the members of our profession, who, as a general rule, will be competent to decide on the existence or non-existence of such a lesion. For my own part, believing that there are those who will not take the trouble of investigating the truth, but on whom the *ipse dixit* of an authority acts like a dose of chloroform; and being unwilling that an erroneous dogma should pass in silence, I take the liberty of making a few remarks on Mr. Ward's communication. I have paid some attention to what has been said and written on the subject, and I willingly bear testimony to the fact, that if Mr. Ward's professional neighbours have taken advantage of what has been said in THE LANCET, to assail his skill or knowledge, he has no one to blame but himself for not having at once accepted the courteous invitation which was given to him, to explain his views on the subject matter in question.

This, however, is going from the point. Is there, or is there not, such a thing as "spasm of the heart?" Mr. Ward answers, "Yes."

First, on the ground of authority. "The disease is as old as the hills." Not quite; yet granting that it may be supposed to be so, it (the supposition) is none the more likely to be true for its antiquity. The knowledge of heart disease is of very recent date. Old authorities are of little or no value in the case. Let us come to the modern writers, "Cruveilhier, Budd, Williams." Cruveilhier describes the concentric hypertrophy, which Dr. Williams quotes as an example of spasm, as nothing more than the natural state of contraction of the heart, death having taken place at the moment of this action. He observed it in the bodies of individuals who had been executed, or who had died a violent and sudden death.* Dr. Budd is quoted by Dr. Joy, as stating his belief that this same concentric hypertrophy is merely "a passing condition, originating at or after death."† Dr. Williams refers to this contracted state of heart, and says, "that it was long mistaken for concentric hypertrophy, until Cruveilhier and Dr. G. Budd pointed out its true nature."‡ Is there anything in the statements of the two last-named gentlemen to justify their being quoted as authorities in support of the opinion which has been assigned to them in connexion with spasm of the heart? And though there is no one to whose opinion I should more willingly submit than Dr. Williams, I must on this occasion ask for complete histories of the cases on which the opinion is founded.

Secondly. Mr. Ward, adducing the fact that spasm occurs in other muscles, asks—"Why not in the heart?" For this reason, that the heart is not subjected, like the glottis, to the action of "foreign bodies;" or the muscles of the alimentary canal, to that of acrid secretion or articles of food; or the bladder, to that of unhealthy, irritating urine. Neither, like the muscles of the calf, is it influenced by various "twists or turns," by irregular pressure on its nerves, and so on. Fortunately not! Though Mr. Ward does not appear to think so, when he asks, "Are not its muscles" [those of the heart] equally voluntary

* Dict. de Méd. et de Chirurg. Pratiques, tom. x. p. 223.

† Library of Medicine, vol. iii. p. 343.

‡ Principles of Medicine, 2nd edition, p. 454.