vessel. Could the last manœuvre adopted have been foreseen and used first, I think laceration and stretching of the sheath and cellular tissue might have been avoided.

The peril of secondary hæmorrhage from the vessel divided by the ligature was avoided by acupressure.

It may be noticed in the first case reported, that flexion, for a few hours only, altered the sac so that consolidation took place promptly. In the second case, flexion was pursued over four days and nights constantly, but without effect. The difference in result, I think, is due to the fact that the first tumor was very small, fusiform, and easily compressed; the second was very large, flattened, and tending to become diffused.

Flexion so long in the second case may have enlarged the collateral vessels, and put them into a better state to sustain the circulation after acupressure of the femoral artery.

One month after leaving the hospital, the patient continued perfectly well.

RE-VACCINATION.

By ISAAC G. PORTER, M.D.,* of New London, Conn.

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WHILE we honor the ability and learning of Drs. Cotting and Buckingham, and admire their facile pens and the courage which they show in controverting the practice of re-vaccination, now so nearly settled, as a legitimate and established principle in the profession, yet may we not inquire whether they are not needlessly disturbing a healthful sentiment in the community? They do not, it is true, entirely discountenance it, but they discourage its universal, if not its general adoption.

The language of Dr. Cotting is as follows:—"Re-vaccination is not always the trivial affair it is usually represented to be. On the contrary, disasters from this source are frequent and damaging. This is not always properly revealed to us; not certainly in statistical reports in favor of the practice. Very likely a full statement would appal even its advocates. Severe illness is often thus produced, and a fatal termination occasionally the result of it. Possibly there have been as many deaths from repeated vaccinations as from varioloid after first vaccinations." Whatever may be true respecting the general principle embraced in the foregoing, how few practitioners, judging from the results of their experience, can endorse and sanction the hypothetical opinion expressed in the last sentence. What is there, in the nature of things, that can render pure vaccine matter inserted in a healthful constitution so much more noxious

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in subsequent operations than it was in the primary? Does not everything depend, in either case, upon the measure of health enjoyed at the time, the collateral circumstances, and the purity or impurity of the matter used? For nearly thirty years I have never hesitated to re-vaccinate any who desired it, and such has been the universal practice of the physicians in this vicinity; but, so far as my knowledge extends, no danger, or inconvenience beyond a trivial and local inflammation has occurred. During the late war, I re-vaccinated, at Fort Trumbull, hundreds and probably thousands of soldiers, preparatory for the field, and in no instance did evil results follow. Is not this, with few exceptions, the general voice of the profession throughout the country and the world? The practice in question has been nearly universal throughout the European armies, and in all the statistics thus furnished, embracing hundreds of thousands of cases, I do not remember to have seen the report of a death clearly attributable to the operation. But Dr. Buckingham endorses an opposite opinion and says:—"I have known two cases of re-vaccination to terminate fatally." How small the number in the populous city of Boston! and, from the proximity of the residences of the two physicians named, and the notoriety which deaths from such a cause must obtain, is it not probable that both have in mind the same cases?

Within the last few years, two physicians, practising in this city or its immediate vicinity, vaccinated in infancy, and repeatedly in attendance upon patients severely ill with smallpox, and escaping all harm, were, much to their chagrin, when called again after the interval of a few years to attend variolous cases, severely visited with varioloid. Does not this show that in the interval alluded to, and just prior to the last cases, their blood had acquired new susceptibility to diseased action, and that there had been generated within it a material *something*, which was capable of being converted into a substance identical with the variolous poison casually introduced?

I lately attended a man very ill with variola. In the family was a lady nearly 70 years of age, who had been vaccinated successfully in childhood, and was now much exposed to the infection. She was at once re-vaccinated, although traces of a former operation were apparent, and with an amount of success, judging from the stages of the vaccine disease, which could not have been surpassed had her age been seven months instead of seventy years, and she entirely escaped the variola. In all probability, what would have been the result, as regards varioloid, had the two physicians who had it, been carefully re-vaccinated a few weeks prior to their last exposure?

These facts are not adduced as possessing any novelty, since such cases are "known and read of all men."

But the respected writers referred to dwell upon the fact that aside from inconvenience and suffering resulting from re-vaccination, death itself may occasionally be attributed to it. So rare is this

incident, or indeed any serious ill result, while on the other hand the operation is so very common, that it does not seem irrelevant to quote the language of Sir Benj. Brodie on another subject. In a clinical lecture he says:—"A man died in this hospital from the consequences of the sting of a bee, and another from the consequences of the bite of a leech. A lady had a small encysted tumor on the head not larger than a pea. A surgeon removed it, and she died from erysipelas of the scalp. In these cases the danger is so small that it is not to be put in comparison with that which will arise from allowing a disease to remain, which is itself a source of danger. We must be contented to incur risks in many of the common concerns of life. You may go out on horseback, or on the top of a stage coach, and may be thrown off and killed; or you may be smashed on a railroad or drowned from on board a steamer. As these very trifling hazards are to be overlooked under other circumstances, so they are to be disregarded in the smaller operations of surgery." Is not re-vaccination a parallel case, so far as danger is concerned? Nothing in this world is so far perfect as to leave naught to desire respecting it. "*Exceptio probat regulam.*" Drawing an illustration from another profession, the scheme of free agency, the product of infinite wisdom, has sin as an incidental evil.

While we would not needlessly or thoughtlessly re-vaccinate, any more than we would apply a leech to our hand or invite the sting of a bee, the evils and dangers of the practice in question are so very small in comparison with the probable protection thereby afforded, that true wisdom, as regards the best good of the human race, demands that they be practically ignored.

P. S.—Since writing the foregoing, I have seen the article by Dr. Seaverns, which is referred to by Dr. Buckingham. While pleased with the thorough knowledge of the literature of the subject which it exhibits, and, as I believe, the soundness of its views; if it be proper, I would say, that the profession at large must be pained at witnessing, in a scientific paper, such personalities as mar its otherwise fair proportions. They savor of those feuds, based on private interests, which too often arise between village practitioners, and which dishonor the profession by making it a by-word and a synonym for disagreement. Such is human nature, that they operate against the cause which they aim to advance, since we cease to appreciate arguments in our sympathies for the man attacked.

M. MAISONNEUVE, at the Hôtel Dieu, Paris, in the treatment of wounds depends very much upon an entire exclusion of air, asserting that nine cases in ten of amputation of the thigh may be cured by it. In the case of ulcers, his favorite treatment is repose, rest in the horizontal position—not allowing a patient with an ulcerated leg to get up at all for any purpose whatever.