ing the position of a fractured leg, or the infinite varieties in the aspect or expression of countenance in a patient passing through the changes from disease to health. At the same time I do not wish to impress on your minds the belief that lectures are useless. Considering them as the *only* source of medical instruction, I think them useless; but they must be viewed as forming a part of instruction, and a part only. Unless the knowledge there acquired be confirmed by its application, it will form but a useless compound of undigested material which could merely qualify its possessor for commencing the study of *practical* surgery.

I cannot conclude this introductory lecture without directing your attention (not for the first time, however, I believe) to the necessity of cultivating some qualities, without the possession of which you cannot hope, whatever success may attend your path, to possess your own self-esteem, or that of your professional brethren. It is most wonderful, how little reliance can be placed on the simple statements of professional men. They appear to see everything with a jaundiced, or at least a prejudiced eye. If he relate a successful case, its peculiarities are almost instinctively magnified, for the purpose of exciting admiration, or obtaining approbation at the success of his treatment.

All speculative men have some theory to support, or some views to maintain, to which the symptoms and circumstances of the case are made to bend. They enter not on the consideration of their subject with minds simply animated by a love of truth; or, rather, the love of truth is overwhelmed by that of some more paramount thing; but men appear desirous to obtain a fictitious importance, by identifying themselves with something wonderful, — something uncommon and beyond the reach of others; this is not honest. The fact is, that the line which circumscribes the boundary of truth is perfectly defined, though easily transgressed; and so prone are we to deviate beyond it, that its barrier ceases to become an obstacle in our path, and is trampled, unheeded, underfoot, becoming more and more indistinct, until it is a positive effort to detect it. Thus truth is confounded with fiction, and the narrator can only obtain the credit of his auditors to the extent of truth, by a compound increase in his deviation from it. There is, there can be, but one course which a perfectly honourable mind will pursue, and that is neither to amplify or embellish, but to adhere to the strict letter of truth.

This was the course adopted by one among the remarkably few exceptions to the general rule, I mean Mr. Hey of Leeds, whose single and unsophisticated mind, eminently distinguished for its love of truth, combined with remarkable talent for observation, afforded him the means of an unreserved communication with the progress of disease,

and to lay up an immense collection of important facts in reference to their treatment. I consider his works as one of the best models of surgical literature; not elegant, perhaps, but they possess an air of truth that should be doubly cherished, because, unfortunately, they stand pre-eminent in this particular. For requisites such as these, the graces of style, and the sacrifice of truth to a well-turned period, form but an indifferent substitute.

In conclusion, gentlemen, let me recommend a systematic pursuit of study, and perseverance in its acquirement. A few cases, say three or four, are amply sufficient to engage the attention of the early student, of which notes should be taken. These notes should be made in the most condensed manner possible, but should be at the same time comprehensive, because they should embrace all the important facts which really bear upon the case, and these only. Practice in this part of your duty can alone enable you to give effect to this most desirable system, by perseverance in which you will possess a text-book for your future practice. Let me assure you, in the words of Lord CLARENDON, "that there is no art or science that is too difficult for *industry* to attain. It defends us against all strokes and assaults of fortune. It is that only which conducts us through any noble enterprise to a noble end. What we obtain without it is by chance—what we obtain with it is by virtue."

CASE OF

ACUTE PHLEGMASIA DOLENS.

To the Editor of THE LANCET.

SIR,—The following interesting case occurred in my practice, and I beg to forward it to you for publication in your useful periodical. I have the honour to be, Sir, your obedient servant,

JOSEPH HODGSON, M.R.C.S.
Spitalfields, Sept. 22, 1835.

April 4, I was engaged to attend Mrs. Horner, of B. G., in her first confinement, which she expected would happen at about the end of June. Age 39; tall in stature; fair complexion; very irritable in temper. Says, to use her own language, that she has had so many attacks of inflammation, that scarcely an organ in her body has escaped. Desired her to pay great attention to the bowels, which were inclined to be constipated, and to keep her mind as quiet as possible.

11. Has a severe attack of pneumonia, which required three bleedings from the

arm, leeches freely applied to the chest, and nauseating doses of *Ant. Tart.* and *Ipecac.*, before it was subdued. Blisters and expectorants restored her to health by the 28th. She went on very quietly until the

6th of July, when I was called to her at half past seven a.m., and before nine o'clock she was delivered of a full-grown girl.

7, 8, and 9. Symptoms favourable.

10. Complains of sharp pain in the uterus; lochia suppressed; pulse 120, and hard; tongue clean; bowels open. The nurse says that these symptoms came on yesterday evening, immediately after she had shown a good deal of temper about a very trifling matter. Apply *Hirud.* xij to the part in pain, to be succeeded by fomentations and poultices. *Hyd. Sub.* gr. j; *Pulv. Dover.* gr. v, sextis horis sum. Enema commun. cras mane, si opus sit.—*Evening.* V.S. ad 3xx.

11. Rather easier; pulse softer; tongue clean; bowels open; blood of yesterday cupped and buffy. Contin. medicament.—*Evening.* Pain returned. Apply *Hirud.* xx to the hypogastric region.

12. Pain gone except on pressure; skin perspirable; tongue clean; pulse 115, and soft; bowels relieved by the enema. Apply *Hirud.* xij, and continue the medicine.

13. Passed a comfortable night; lochia returning; other symptoms as favourable as yesterday. *Tinct. Hyoscyam.* ℥ xxx; *Tinct. Digitalis* ℥ x; *Liq. Ammon. Acet.* 3ij; *Mist. Camph.* 5x. M. f. haust. ter in die sumend. *Ol. Ricini* 3ss, cras mane.

14 and 15. Going on well, which she continued to do, except being annoyed by what she called "rheumatic pains in her hips," for which some anodyne liniment was ordered. I was making my visits rather far between, with the intention of leaving her, when I received a hasty summons on the 28th. Right leg and thigh twice the size of the left; tense, and exquisitely painful in the course of the femoral vein. Says that "she felt the pain and swelling gradually proceed from the womb into the thigh and down the leg." Pulse 115, and very incompressible; tongue remarkably clean; bowels confined. V.S. ad 3xx; apply hirudines xxx along the course of the veins, to be succeeded by hot fomentations and poultices. *Haust. Cathart.* c. *Pil. Cal.* gr. v statim sum; *Pulv. Dover.* gr. v; *Hyd. Sub.* gr. j; *Extract. Hyoscy.* gr. v; *Ant. Tart.* gr. 4. M. f. pil. ij, 4tis horis sum.—*Evening.* Blood sizy; pain diminished.

29. Pain returned; says "it is excruciating, particularly about the calf of the leg;" pulse 120, and very firm; bowels freely opened. Venesection ad deliquium, which produced immediate relief. Contin. med. ut heri.—*Evening.* Pain returning; applicatur hirudines xxx. The thirty ounces of blood taken this morning were very much cupped, and very buffy.

30. Limb easy; skin moist; bowels open;

has slept four hours without waking.—*Evening.* Pain about the calf of the leg. Applicatur hirudines xx. Med. &c. ut heri.

31. Progressing.—*Evening.* Slight pain in the calf of the leg. Applicatur hirudines xii; med. &c. ut heri.

August 1. Passed a good night; leg and thigh quite easy; swelling subsiding; *Mag. Sulphat.* 3j; *Infus. Rosæ* 3xj; *Tinct. Hyoscyam.* ℥ x. M. ft. Haust. ter in die sumend.

2. Leg and thigh rapidly decreasing; appetite good; allowed a generous diet. Med. and poultices to be continued.

3. Doing extremely well; pulse about 96; tongue, as it always has been, very clean. *Quininæ* gr. iij; *Infus. Rosæ* 3iss. M. f. Haust. ter in die sum. *Pil. Plummer.* gr. v omni nocte. *Ol. Ricini* pro re nata. Has nursed the whole of the time, and I am much astonished that she does not show the discipline she has undergone.

15. Patient gone on improving since the 3rd; appetite exceedingly good; bowels regulated; both legs of the same size; complains of weakness and pains in both legs; bandages to be well applied to the thighs and legs; recumbent posture for some time; and sent into the country.

Sept. 14. I hear that she is doing remarkably well; but, as she cannot walk much, she is very irritable. I think I may say that I never had a patient with whom I had more influence.

ULCERATION OF THE LARYNX.

To the Editor of THE LANCET.

SIR,—I beg to transmit to you the following case and observations for publication in your excellent journal.

January 6, 1834. Thomas W., residing near Middleton, was affected for a considerable period with soreness of the fauces, attended with difficulty of deglutition and hoarseness, and followed by pain on pressure over the cartilages of the larynx, or when that organ was forced from side to side. During these symptoms he was teased with a short dry cough. In this state he continued during several weeks, when the former symptoms became more aggravated, the cough being very troublesome, and attended by a fetid odour and purulent expectoration. He had been treated by several surgeons in the surrounding neighbourhood for consumption, but without benefit. When I saw him, he was much reduced in health and strength, and complaining of pain in the larynx from pressure or motion, particularly in attempting to swallow. Deglutition, indeed, was very difficult, and quite impossible if the food was solid. The cough frequently expelled fluids through the nares on attempting to swallow them. There was