finger, and with the point of it drew down the chin. Then, using the finger as a director, I passed one end of a long elastic tube, one-fourth of an inch in diameter, well into the mouth, and taking the other end into my own mouth, I blew briskly through the tube two or three times, and immediately I had the satisfaction to see respiration established. Muscular efforts followed, and as these stimulated the uterus to stronger contractions, the labour soon came to a happy conclusion. The tube was kept in the mouth of the child until delivery was accomplished."—*New York Journal of Medicine*.

EXTRAORDINARY CASE OF VICARIOUS MENSTRUATION.

M—C— has had her arm swollen to an enormous size at five separate and distinct epochs, and always after an attack of dysmenorrhœa. The swelling has invariably continued until the restoration of the catamenial discharge, immediately after which it begins to subside, and continues gradually to diminish until the arm is restored to its normal condition. It is now seven years since she was troubled with it, and she has been as long as two years without its recurrence. Almost every variety of emmenagogue treatment has been pursued, and generally with very undecided effect. The arm has now been swollen since the month of September [this was on Nov. 18], and is so large as to measure fifteen and a half inches round the elbow, where it is largest; the fingers and hand are likewise much enlarged and disfigured. The general health of the girl is good, and she experiences but trifling pain in her arm. She states that she is married, but has never borne children. The first invasion of the accident is attributed to having put her hand into very cold water immediately after using some that was hot. Having her menses at the time, this imprudence checked them, and in a short time afterwards the arm began to swell. So serious was the malady supposed to be by the surgeons who first saw it, that they are said to have recommended amputation. It is stated, that the menstruation being established, the arm has again returned to its former size.—*Idem*.

IRISH NAMES AND IRISH NOTIONS OF DISEASE.

The Irish name of phthisis is very significant and expressive, *seilgean as*—a shrinking of one's self. *Cnai*, or *cnasidh*, a wasting or decay with or without disease of the chest, is the Irish term for marasmus. When the disease presents itself in the form of *tabes mesenterica*, or general atrophy, many superstitious notions are entertained by the peasantry respecting its probable cause, such as the child being under the influence of spirits or fairies, the "gentry," or the "good people;" and hence the term in such common use, "back-gone," or "fairy-stricken:" more than one of the A. forms gave these returns, and one, "the fairies tuck him away." These superstitions, though not unpoetical, yet naturally suggest an inquiry into the amount of education-grants to Ireland.—*British and Foreign Review*.

ACUTE GLANDERS COMMUNICATED BY THE BITE OF A HORSE LABOURING UNDER CHRONIC DISEASE.

An individual, whilst administering medicine to his diseased horse, was accidentally bitten on the cheek. Two days subsequently, symptoms of acute glanders manifested themselves. The patient died after an illness of thirteen days, having presented during life the usual symptoms of this disease, and in addition there appeared one not heretofore described—opacity of the cornea.

"It was further remarked, as the horse had been five months ill, and as the case was one of acute glanders, communicated by a bite from an animal then chronically diseased, that the distinction which some persons had attempted to establish between acute and chronic glanders was not warranted."—*Veterinarian*.

RUSSIAN MODE OF CASTRATING HORSES.

"A Russian who wished to castrate a horse seized him by the thighs and hocks, held him firmly in his nervous grasp, and then, by a sudden movement equally rapid and cruel, tore off the testicles with his teeth, which served him at once for bistoury and instrument of torsion. This extraordinary man required no assistants—no apparatus wherewith to fix the horse before he commenced his strange and cruel operation. He practised it repeatedly, and always with success, and stated that such was the mode in which it was uniformly practised in his native country."—*Idem*.

NOCTURNAL INCONTINENCE OF URINE.

To the Editor of THE LANCET.

SIR,—I perceive in your number for to-day, (page 44,) that you quote from the "Northern Journal of Medicine," a paragraph in which Professor Romberg is made to claim the authorship of "an ingenious suggestion" for the cure of enuresis nocturna, or incontinence of urine during sleep; which, however, of right belongs to the late Sir Charles Bell. If you turn to page 16 of that great man's "Treatise on the Diseases of the Urethra, Vesica Urinaria, Prostate, and Rectum," you will find that he, more than a quarter of a century ago, advanced the self-same explanation of the infirmity, and recommended precisely the same remedy for it that, it seems, has been very recently done by the professor in question. "This occurrence"—viz., that of passing urine in bed, Sir Charles says, "never takes place but when the boy is asleep upon his back; and the cure is a simple one: he is to accustom himself to sleep upon his face or side; the urine is not passed, nor is he excited to dream of making urine while he keeps this position."

"The circumstance is unaccountable, until we reflect on the position of this master-spring of the muscles of the bladder; the sensible spot a little behind and below the orifice of the bladder. When a person lies upon his belly, the urine gravitates towards the fundus; but when he lies on his back, it presses upon this sensible spot, and distends that part of the bladder which is towards the rectum &c."

I am, Sir, your obedient servant,

WM. MACLURE.

Harley-street, Oct. 5th, 1844.

THE LANCET.

LONDON: SATURDAY, OCT. 12, 1844.

MEETINGS of medical practitioners continue to be held in different parts of the country. Reports of the proceedings of several, and the resolutions that have been passed at them, will be found in our columns of this week. We are surprised to find that the objects and tendencies of the bill are, in two or three places, so imperfectly understood. We deeply regret to observe the influence of names and titles. The "Council of Health," for instance, appears to be a very seductive and captivating designation. As it is becoming the practice to allege that some portions of the bill are "good," that other parts are "excellent," and that it is highly satisfactory to find that Government has introduced such a measure with a view to re-model the medical law of this country, we shall forthwith bestow upon the bill a complete and thoroughly searching dissection. We shall enter fully into a defence of the general practitioners of this kingdom against the attack of the Government, and in performing that duty we shall dissect the bill of the Home Secretary clause by clause. We hope to prove to the conviction of every medical practitioner in the United Kingdom, that the bill is altogether of so objectionable, nay, of so scandalous a nature, that even the proposal for re-introducing it into the House of Commons ought to be opposed with the most resolute pertinacity.

At the late meeting of the British Association for the Advancement of Science, at York, circumstances occurred, with reference to the medical section, to which we think it our duty to draw the attention of our readers. It appears that for some time past great discontent has existed among the members of the Association who are interested in this section, on account of what we may term its general inefficiency, and that the dissatisfaction has gone so far as to threaten the very existence of that department. Thus at the meeting a proposal was made to the committee, tending to extinguish it entirely, and to substitute for it a physiological or a chemico-physiological section.

For the division of the British Association which represents medical science to have fallen into such general disrepute, is so