Dempsey for damages for non-attendance as a witness. The case was heard at Guildhall, before Mr. Justice Byles, who summed up in favour of the defendant, and said, had it not been Saturday, when he might be charged with shirking his work, he would have stopped the case and directed a nonsuit. The jury, in spite of this, found for the plaintiff, with £50 damages. Mr. Justice Byles remarked, that it was a proper case for appeal. It is, therefore, the intention of Mr. Dempsey to appeal. He has had to give two securities for £400, and the costs are more than he can bear. He has only been in practice in London about a year, and unless he can get help he will be entirely crushed. I, therefore, venture to bring his case—which I believe to be one of unusual hardship and injustice—before the profession, and I think there are many members of it who will render him timely assistance.

I am, Sir, your obedient servant,
Kensington, July, 1860. J. T. ARLIDGE, L.R.C.P. Lond.

* * Dr. Arlidge's letter is descriptive of a species of hardship to which a respectable medical practitioner would appear to have been subjected. If Mr. Dempsey committed an error, it was evidently one of judgment, and scarcely merited the severe punishment which has been inflicted upon him. If we cannot entirely exonerate him on the ground of prudence, his case is, under the circumstances, entitled to the consideration and sympathy of his professional brethren.—ED. L.

HYPODERMIC INJECTION OF MORPHIA.

To the Editor of THE LANCET.

SIR,—May I beg for space for a few lines, to warn those of your readers who have not yet tried the hypodermic injection of morphia, against its indiscriminate or incautious use?

Moved thereto by the enthusiastic admiration of some friends, I purchased one of Coxeter's syringes, and made my first trial on a lady who has suffered very severely from neuralgia under the left breast, shooting down the left arm, unconnected with any heart disease. She is unable to take opium in any form by the mouth. She had had no sleep for two nights in consequence of this pain. I injected, first, three minims of a solution containing five grains of acetate of morphia to the fluid drachm. No immediate effect was produced, but during the night she had not a moment's sleep; she had a most unpleasant itching of the face, and severe headache. Thinking that perhaps I had not used enough, I doubled the strength of the solution the next night, but only with the effect of increasing the unpleasant symptoms. The infra-mammary neuralgia was quite unrelieved on both occasions.

The second case was one almost exactly similar, but the symptoms produced by the injection were much more severe. The patient is subject to epilepsy, and one of her fits followed the injection, whether *post* or *propter* I cannot say. She was delirious all night—not a moment's sleep; intolerable headache, with injected conjunctivæ, in the morning. The neuralgia was, however, much relieved. The pupils were still (fifteen hours after the operation) contracted.

In both cases the injection was applied to the seat of pain.

I think it right to put these cases upon record, as it is only fair that the profession should hear of the unsuccessful as well as the successful ones. I shall try the plan again, but not on any delicate persons of either sex.

I am, Sir, your obedient servant,
High-street, Deptford, July, 1860. R. H. BAKEWELL, M.D.

THE DIFFICULTIES OF A MINOR.

To the Editor of THE LANCET.

SIR,—On reading over the minutes of the proceedings of the Medical Council, I find a statement that my name is ordered to be erased from the Register, without any reason being assigned for so doing. I do not deny the justice of the step, (which, by the way, is almost without parallel,) but at the same time I think the public and the profession ought to know the reason of this proceeding, and more especially so when I find that erroneous ideas respecting it are prevalent amongst my professional brethren. I therefore hope you will allow me to explain. I passed at the Faculty on the 6th of Sept. 1859, at the College of Physicians on the 6th of October, and at the Hall on the 10th of May last. I shall not be twenty-one years of age until October next, and for this reason my diplomas are recalled. They are recalled because I did a thing which is

done every year. I know several, and think every member of the profession will be acquainted with others, who have done this.

I may now state how the matter was brought before the boards. In October last I entered into partnership with a Mr. Robert Dowell, of this place, who knew my age. After being together a month, he wished to remove from Hinderwell, to which I agreed, though it was very disadvantageous to me professionally. I paid him for his share in the practice before he left; but after being away six months, and not succeeding elsewhere, he returned, and, with the assistance of Mr. Henry Dodd, surgeon, of this place, and Mr. F. Collins, of Lofthouse, he has informed the several bodies of my age. The real cause of annoyance to the above-named parties is, that I have acquired a practice equal to theirs *unitedly*, which doubtless is hard to bear; but, under existing circumstances, little alleviation to their grievances can be expected from me. I have engaged a doubly-qualified assistant till I am through this trifling difficulty, which will be quite temporary.

Trusting you will give the same publicity to this explanation that you gave to the proceedings of the Council,

I am, Sir, obediently yours,
Hinderwell, Yorkshire, July 10th, 1860. J. V. LAVERICK

INJECTION OF ICED WATER INTO THE CAVITY OF THE UTERUS IN POST-PARTUM HÆMORRHAGE.

To the Editor of THE LANCET.

SIR,—Dr. Tyler Smith, in his "Lectures on the Principles and Practice of Obstetrics," (which appeared in THE LANCET in 1846,) recommends the injection of iced water into the cavity of the uterus in cases of uncontrollable post-partum hæmorrhage.

I have recently had a patient, in whose instance I followed this plan with very notable success. Anticipating a severe and dangerous labour, I was prepared for every emergency; but the administration of large doses of ergot previous to the birth of the child, and the introduction of the hand into the uterine cavity after the removal of the placenta, failed to induce any contraction of the womb, and I believe I should have lost my patient if I had not stopped the flooding by acting on Dr. Tyler Smith's suggestion.

Your obedient servant,
Bath, July, 1860. JOHN K. SPENDER, M.R.C.S.

PARTIAL DISLOCATION OF THE HIP-JOINT.

To the Editor of THE LANCET.

SIR,—Having noticed that one of your contributors has published in your journal some account of obscure injuries of the hip-joint and adjacent parts, I think it may be well to forward you a short statement of a case that has just occurred in my practice, and which I consider an injury not described, at least it is not to my knowledge, and which I cannot believe to be anything else than an imperfect dislocation of the hip-joint.

On the 29th of May, 1860, I was requested to see a young woman, whose male associate had violently kicked her over the right hip, both the parties being more or less intoxicated at the time. This had taken place about twelve hours before my seeing her. She was on her back, unable to move, crying out, on the limb being touched, in a manner, to a practised ear, significant of a very grave injury. The position was just that of a dislocation on the dorsum ilii, but, if I may use the expression, more subdued in its outlines. I manipulated by extension and rotation, but with comparatively very little force relatively to what is required in regular dislocation, and suddenly the parts resumed their natural positions; all the movements could be performed both actively and passively, and the pain almost entirely ceased. I left the case with some doubt on my mind as to its nature, and merely ordered a few leeches and a liniment.

The next day, I was again summoned, the statement being, that in turning over in the night she had *got it wrong again*; and indeed I found her precisely in the condition described as existing on my first visit. I immediately performed the same manipulations, and, with a snap distinctly audible to all the people in the room, and which was so loud that it might have been heard in an adjoining one, the parts were restored to position and use. I bandaged the hips and pelvis, being more careful in my directions as to position and quietude, and

in about a week she was able to walk, and very soon recovered perfectly.

I cannot believe this to have been anything but a partial dislocation of the hip-joint. Whether such a case has been described, I am not aware, and merely furnish it as being new and singular to me, and only wishing it to pass *quantum valeat*.

I am, Sir, your obedient servant,

Sheffield, June, 1866.

E. D. L. GILLOTT, M.R.C.S.

MORBUS ADDISONII.

To the Editor of THE LANCET.

SIR,—The following case, I think, should be recorded:—

On the 13th ultimo I was asked to visit a gentleman, single, aged thirty-one, living at Edenbridge, supposed to be suffering from dyspepsia and extreme debility of some three or four years' standing. I placed him in a chair before a good light, stripped him, and examined him very carefully. The brain, heart, lungs, liver, and kidneys afforded no evidence of any disease; I saw the urine, which was healthy, and also the stools, which were of proper bulk, colour, and consistence; there was slight epigastric tenderness, and irritability of stomach; the heart's action was feeble, and the pulse very soft and compressible. The body was somewhat emaciated, but not remarkably so, as we find it in phthisis or malignant disease; indeed, there was evidently a fair amount of subintegumental and interstitial fat, and the skin seemed healthy to the touch. The eyes were pearly white, and emaciation was more obvious in the face than elsewhere. The colour of the skin was most peculiar, and such as I had never before observed; it had what is termed a "walnut-juice" tint, which was most decided about the forehead, face, neck, axilla, bends of the arms, and umbilicus. The patient complained of excessive weakness, and could scarcely stand or move. This weakness, with loss of appetite and occasional sickness, had existed, more or less, for three or four years; but the discoloration of the skin was more recent, and had come on gradually. I could not discover anything like a definite beginning, or root, or cause of the malady; the very distressing asthenia, the characteristic tinge of the skin, and the irritability of the stomach, were the salient features of the case, and these, coupled with the total absence of any disease in the vital organs, induced me to give a very decided diagnosis and prognosis. I stated, unhesitatingly, that it was a case of Morbus Addisonii, and that the patient would die, perhaps rather suddenly. Three days afterwards, he died; but as I did not hear of his death till some days after its occurrence, there was no chance of a post-mortem examination. I have not the least doubt, however, that I should have found disorganization of the supra-renal bodies.

Dr. Barlow saw the case on the 14th June, and gave the very same diagnosis and prognosis as I gave on the 13th.

I am, Sir, yours very truly,

DANIEL HOOPER, B.A. & M.B. Lond.

Trinity-square, Southwark, July, 1866.

Parliamentary Intelligence.

HOUSE OF COMMONS.

TUESDAY, JULY 10TH.

DR. MACLOUGHLIN.

MR. BRADY moved for a Select Committee to inquire into the dismissal of Dr. MacLoughlin from the Government Medical Service. The hon. member, after detailing the requirements of the medical service, said Dr. MacLoughlin entered it under the existing circumstances, and was sent to Portugal, where he rendered most efficient services, not only to their own soldiers, but to the French prisoners during the Peninsular war. He trusted the Government would grant him the Committee, as Dr. MacLoughlin had laboured for a number of years in the service of the army. The hon. member read testimonials from Sir James M'Grigor, Sir Robert Grant, and others, to the ability of Dr. MacLoughlin, and said that after returning to this country he was recommended by the late Duke of Wellington and Sir Robert Grant for promotion, but in consequence of having no private influence he could not obtain that recognition for promotion which his services deserved. Notwithstanding all he had done, a Mr. Lyons, without experience or a particle of qualification, was raised over the head of a man who had faithfully served his country. Dr. MacLoughlin, indignant at the treatment he received, remonstrated with the Horse Guards,

and, contrary to his wishes and inclinations, he was placed on half pay, upon which he remained for six years without ever being called upon to serve. At the end of six years he was called upon to serve, but under what conditions? Why, that he should serve under about 200 others, junior to him, who had been appointed to active service during the time that Dr. MacLoughlin had been on half pay. He then declined to enter into active service unless his previous services were acknowledged. He (Mr. Brady) found that in consequence of Dr. MacLoughlin declining to go on active service, he was dismissed by the Commander-in-Chief from the service. In this case the articles of war were altogether ignored and set at naught; and although Dr. MacLoughlin had complained of his superior officer from 1814 to 1824, the articles of war were entirely disregarded.

At this stage of the proceedings an hon. member moved that the House be counted, upon which some members came into the House, and as soon as the required number was made up they as rapidly departed, leaving the House as empty as it was before.

Mr. BRADY resumed. He contended that Dr. MacLoughlin's dismissal was not only unjust, but illegal. The Commander-in-Chief stated, through the medium of Sir Charles North, that he saw no reason why Dr. MacLoughlin should not be reinstated if Lord Panmure, who was at that time Secretary-for-War, would assent. That assent was withheld, and Dr. MacLoughlin, who had made a renewed application to the War Office, was still without redress. He therefore begged leave to move that a select committee be appointed to investigate the case.

Sir G. BOWYER seconded the motion.

Mr. S. HERBERT said all the persons who could have given evidence on this case were dead, and he therefore thought that a committee ought not to be appointed. It was admitted that Dr. MacLoughlin refused to enter upon active service when called upon to do so. Such insubordination would be disgraceful to any officer in the army, however respectable he might be; and the authorities acted rightly in dismissing Dr. MacLoughlin from the service. Mr. Alexander, as well as the present Surgeon-General, protested against Dr. MacLoughlin's re-appointment on the ground that it would be an exceedingly bad precedent. If Lord Panmure, while Secretary-for-War, acted unfairly in refusing to listen to the appeal of Dr. MacLoughlin for redress, he had certainly many *particeps criminis*, for amongst those who took the same view as the noble lord were Sir Henry Hardinge, Lord Francis Gower, Sir E. Parnell, Sir Thomas Fremantle, Mr. Fox Maule, and Mr. Vernon Smith. He hoped the House would not agree to the motion.

The motion was negatived without a division.

Medical News.

APOTHECARIES' HALL.—The following gentlemen passed their examination in the science and practice of medicine, and received certificates to practise, on

Thursday, July 5th, 1866.

Blackman, Matthew, M.R.C.S., Ramsgate.
Bush, Danvers Ward, Weston, near Bath.
Strickland, Edward, Kirby Moorside, York.
Truman, Edgar Becket, Poultry, Nottingham.

The following gentlemen also on the same day passed their first examination:—

Armstrong, Samuel, Woodbridge, Suffolk.
Buckmaster, Charles Addams, King's College.
Edye, Stonard, Exeter.
Ellis, H. Dowling, St. Bartholomew's Hospital.
Elwes, Charles Walter, University College.
Fenn, Edwin Broughton, Ardleigh, Essex.
Grenfell, Henry, King's College.
Langworthy, William Froude, St. Bartholomew's Hospital.
Martin, Thomas, Manchester School of Medicine.
Murrell, William Henry Julius, St. Bartholomew's Hospital.
Shapland, John Dee, University College.
Smith, Thomas Starkey, University College.
Stephenson, William, St. Bartholomew's Hospital.
Sutcliffe, Henry, University College.

SOIREE AT THE COLLEGE OF PHYSICIANS.—On Wednesday evening a brilliant and crowded *conversazione* was held at the College of Physicians. Many objects of scientific interest were exhibited. Amongst them we would especially notice the excellent microscopes of M. Nachel, of Paris, who also contributed an ophthalmoscope, which is said to be the most perfect example of this instrument yet made.

INAUGURAL ADDRESSES.—We understand that the opening lecture for next session at the London Hospital Medical College will be delivered by Dr. Barnes; that at St. Bartholomew's, by Mr. W. S. Savory; that at Guy's, by Dr. Wilks; that at the Middlesex, by Dr. Charles Coote.