don. The most certain means of carrying off the soil from houses, if we may be allowed to draw our conclusions from the *practice* of the Board, which we presume is based upon their theory, is this:—lay down a little pipe, say a four-inch, but be careful not to exceed that dimension, for a main-drain; let seven smaller pipes, communicating with as many houses, empty their contents—that is, if the contents will flow—into this main-drain, and the result will be, that the system of sewerage is perfect, according to the Morpeth Board of Health. It may be, and indeed probably will happen, that the little pipes will get choked up, and that the houses will become very unpleasant from the regurgitation of fæcal matter and effluvia. But then that ought not to happen, and if it does, it is the fault of the inhabitants and not of the Board of Health, whose system is constructed upon the most scientific principles. But somehow these little pipes *will* get choked up, the soil conveyed a little way into them from the water-closets dries, hardens, and the result is an obstruction. It appears that Mr. O'CONNOR, a surgeon in the town, not appreciating as he ought the admirable system of the Board of Health, and finding that the health-pipe designed to carry off the sewage from his house into the four-inch main was completely obstructed, hit upon the simple but unscientific expedient of flushing it. Now, flushing, it would seem, is no part of the system of the Morpeth Board of Health. So grave an offence called for exemplary punishment. Mr. O'CONNOR was cited before the magistrates to answer for his treasonable conduct. The magistrates, not taking the same view of the enormity of Mr. O'CONNOR'S crime as the Board of Health, acquitted him. But they with, as we think, some inconsistency, refused to order him his costs. But although the magistrates had thus decided that it was not a "wilful waste of water" to flush the little tubes of the Board of Health, in order to keep them clear, it was not to be expected that the Board, which is more enlightened, and which has a system, should be convinced. Mr. O'CONNOR has therefore been served with a notice, which is so admirable an illustration of the views entertained by the Morpeth Board, as to the uses of water, and the absurd prejudice every Englishman cherishes, that his house is his castle, that we are induced to publish it.

"Morpeth Local Board of Health.

"To MAURICE JAMES O'CONNOR, Esq.

"Notice is hereby given to you not wilfully or negligently to waste, or cause to be wasted, or unlawfully to flush, draw off, or take any water from the Water Works belonging to the said Local Board; and notice is hereby given to you at all reasonable hours to permit DAVID GIBSON, who is duly authorized by us in that behalf, to inspect the works upon your premises for the supply of water.

"Dated this sixteenth day of June, 1854.

"(Received the 2nd of August, M. J. O'C.)

"(Signed)

WM. TROTTER.

THOS. JOBLING.

ANTHONY CHARLTON.

JOS. SHEW.

FRANCIS R. GREY.

"W. WOODMAN, Clerk."

From this document we gather that the conviction of the Hon. and Rev. FRANCIS R. GREY and his colleagues, that flushing water-closets is a sinful waste of water, is so strong, that they think the sanctity of private dwellings ought to be violated in order to guard against so shocking a crime.

But we suspect the Morpeth Board will have to encounter a somewhat obstinate and perverse opposition to their new system of "privy espionage." People will hardly submit

quietly to have an inspector at their elbows to put down the water-closet handle, when it shall seem to the said inspector that enough water has been allowed to flow. We doubt very much whether *any* time will appear "reasonable" to indulge the agent of the Board of Health in the gratification of such an inquisitorial and indecent curiosity. If the Board persist in such a course, it must alter its title. A Board that is bent on obstructing drain-pipes, and preventing the escape of sewage, cannot, with any propriety, be called a Board of Health. The Board of Filth would be a more appropriate appellation.

There is something so supremely ridiculous in the proceedings we have referred to, that it is impossible to treat them in a serious tone. But it is not a light matter that an estimable member of society should be subjected to annoyance, expense, and persecution, because he chooses to criticise in a spirit of freedom the principles and conduct of a public board. This is the disgraceful aspect of the case. It argues little for the wisdom of the Board, or the accuracy of the principles of the sanitary contrivances it has adopted, that it should be so sensitive to criticism, and so prone to defend its policy by appeals to law and the violation of constitutional rights.

Correspondence.

"Audi alteram partem."

NECESSITY OF LECTURES ON MILITARY SURGERY.

To the Editor of THE LANCET.

SIR,—I am indebted to Mr. Beveridge, of the navy, formerly a pupil of the class of military surgery in our University, and now serving in the Black Sea fleet, for the enclosed memorandum of a somewhat novel mode of bloodletting practised by the Circassians.

This was transmitted to me a few days ago, along with a very instructive case of conservative surgery, in which a forearm of considerable utility was preserved, after a wound in which the radius was broken, and the whole of the ulna, with the exception of a fragment at its upper and lower ends, was shot away.

Notwithstanding the numerous and convincing articles which have appeared in your own and in other journals, on the expediency of instituting additional chairs of military surgery, I hear of no effort making to establish, under the patronage of the Government, such a chair in your metropolis. You are aware that a sum of money has been voted by Parliament more than sufficient to endow two additional chairs of military surgery on the same moderate scale on which I have, with infinite pleasure and with some success, conducted the duties of the chair of military surgery in the University of Edinburgh for upwards of thirty years past. I will not believe that the public is indifferent to such a measure, were it even more remotely connected with the health of its fleets and its armies; and a heavy responsibility rests upon those who, with means at their command, are allowing the experience of another war to pass over our heads without a more adequate provision to treasure up its results for the instruction of those who are to come after us.

Is there such a lack of professional zeal that no man will step forward, under the present interesting circumstances, to claim his share of the Parliamentary grant? to supply what the late Baron Larrey termed a "*lacune*" in the arrangements of the Parisian school? to teach this popular branch of medicine? and to receive, to record, and to make known the experience of our army and navy surgeons now serving in the Baltic and on the confines of the Black Sea—perhaps at this moment in the Crimea—fields in a great measure new to British enterprise and professional experience?

My friends, Mr. Tuffnell, of Dublin, and Dr. Mackenzie, of Edinburgh, are present with the army in Turkey, no doubt enriching themselves with important materials for their respective courses of lectures, and, as opportunities offer, with drawings and preparations. I, who am now too old to be equal to a similar employment of my time, must be content

receive from my old pupils communications similar to that which has given occasion to this letter. Of this I have ample promise, and feel confident that I shall not be disappointed. I have never rested the expediency of additional lectureships on military surgery on what has been *done*, but on what has been *lost*; and every year convinces me more and more, from personal experience, that "much tangible and available information is elicited by incidental observations in the course lecturing, and that numerous important communications, both verbal and written, are voluntarily given to a professor, which would never be called forth by authority. It is in this way that the experience of the existing generation of army and navy surgeons will be most advantageously handed down to their successors in office; and it is the loss annually sustained by the profession and the public, from the want of additional establishments of this kind, which I deeply deplore."

I am, Sir, your very obedient servant,
Altamont, Perthshire, Aug. 1854. GEORGE BALLINGALL.

"*Novel Mode of Venesection.*—On the 19th inst., at Ghelinkjek, a Circassian was observed to be bled in the following manner: he applied a handkerchief tight round his neck till the veins of his forehead became turgid, when his comrade made several punctures with a sharp instrument. The bleeding was stopped by removing the handkerchief from the neck and tying it round the forehead over the orifices. On inquiry, it appeared that he was suffering from headache.

"I learn that the Circassians are much subject to rheumatic arthritis, possibly from night exposure while asleep on the ground, (their wandering habits being proverbial,) and have seen several cases of obstinate cutaneous affections; they are not liable to fever or ague, as those belonging to the squadron employed on their coast have been."

THE OPERATION OF TRACHEOTOMY.

To the Editor of THE LANCET.

SIR,—The operation for opening the trachea proposed by "Delta" in the last number of THE LANCET, is precisely that so recently recommended by Dr. Marshall Hall. Sir Charles Bell, who was the first to perform the operation, with the view of applying the nitrate of silver to ulcerations of the larynx, as suggested by me, was in the habit of using the scalpel. He made his incision with the blade of that instrument, and then dilated the wound by introducing the handle.

I prefer Dr. Marshall Hall's operation—firstly, because it is more simple and more easily performed; secondly, because it is attended with less effusion of blood; and thirdly, because the dilatation may be effected with his scissors to any required extent.

I am, Sir, yours very respectfully,
J. BEDINGFIELD.
Longville-house, Needham-market, Suffolk, Aug. 1854.

CHOLERA IN NAPLES.

To the Editor of THE LANCET.

SIR,—The cholera continues its ravages in Naples and its vicinity. The daily returns now give the deaths at about 200, exclusive of military convicts and those private cases of the higher class who wish to be buried separately in the new "Campo Santo." Their deaths are generally returned as from typhus. The masses are thrown into large pits dug in the old burying-ground. Of the English visitors and residents ten have already died—one under peculiarly disagreeable circumstances. Captain Jones, of a regiment now quartered at Corfu, cruising in his yacht, was seized with the epidemic at Castellamman, and died after a few hours. The municipal authorities of Castellamman refused permission to take his remains into Naples to be buried in the English burying-ground; being a Protestant, neither was he allowed burial in the Castellamman Campo Santo; so they buried him in the sandbank (by the sea-side) which forms the embankment of the railway. Amongst the military the disease has been particularly fatal; as many as 150 of the garrison have died daily, and three general officers. In Palermo the disease has appeared, and the popular excitement has been raised to such a pitch there by reports of "poisoning the wells," that it has been found necessary to put the town in a state of siege.

I am, Sir, your obedient servant,
Chiaja, Naples, Aug. 1854. ROBERT WHYTE, M.D. Edin.

THE CHOLERA.

OUR comments of last week were intended to show that, although in this country in by far the majority of cases of cholera the invasion of the disease is gradual, yet that in a few instances here, and more frequently in hot countries, its outbreak is sudden, and not marked by prodromata of the ordinary character.* To assert that *all* adduced examples of *sudden invasion* could be shown to have been ones of the ordinary kind, if properly investigated, because *some* have been so, would be as false in logic as we believe it to be in fact. They might or might not, by further inquiry, be so settled; but if such further inquiry is impossible, we must rest satisfied with such evidence as we are provided with, and infer the truth accordingly. Now, to our minds, there is sufficient warranty for believing that cholera may invade the system at once and suddenly. But, even if that view be adopted which would maintain there is no sudden outbreak of diarrhoea, spasm, and vomiting, without some premonitions and prodromata, of whatever kind they may be, *practically* the result must be admitted to be identical; for while allowing, in the majority of cases, that the patient has marked and evident diarrhoea for some hours, or even days, which in a great many cases is so bad as to be subjected to treatment, or, if not, yet well known to exist both by the patient and his friends, nevertheless there occur instances in which a person dies of cholera who *not* only never came under treatment for premonitory diarrhoea, but who affirmed that nothing was the matter with him before the perfect development of the disease, and of whom, moreover, his friends, with ample opportunity for observation, had no suspicions. If in such cases as these, then, it still be maintained there existed diarrhoea, &c., or other known prodromata, we would reply—first, their existence is not proved; and, secondly, if they did exist, they were denied, or thought nothing of, either by the soon dead person or his acquaintances. Practically, then, there would be no difference. "A trumpeter of the 51st Regiment blew the trumpet for the officers' dinner so strong and so correctly as to be the subject of remark, and yet only a few minutes after he was seized with cholera, and died before the officers' dinner was over." This case has been more than once brought forward as a proof of the suddenness (without diarrhoeal prodromata) and rapid fatality of cholera. A strenuous advocate of views opposed to our own observes upon it, that he had the authority of Mr. Mouat, surgeon of the 9th Regiment of foot, to say that he remarked how strong and correct this man sounded his trumpet, and that an hour or an hour and a half after he saw the man in collapse, but that he also had his authority to mention that he did not inquire whether this man had or had not a diarrhoea previous to the attack of spasms, &c. But, after all, what is really shown by this case? It is *negative* in evidence as regards the premonitory diarrhoea; of course no one

* In addition to our previous extracts from the "Weekly Returns," we add the following from last two weeks' reports:—

"6, Vittoria-cottages, South Lambeth, on 13th of August, the daughter of a lamplighter, aged sixteen years, 'malignant cholera, collapse, (11½ hours.)' Dr. Ayres, the medical attendant, says:—'In this case there was no premonitory diarrhoea; the attack commenced with copious vomiting, and the patient was already (as far as I can ascertain by the most careful inquiry) in commencing collapse when the first purged motion occurred. The bowels had been moved *only once* on the preceding day.'

"At South Villa, Oval, 13th of August, the widow of a physician, aged fifty-five years, 'malignant cholera, (12 hours.)' Mr. Wright, the medical attendant, adds on his certificate:—'No premonitory diarrhoea.'

"At 161A, Strand, on 14th of August, the son of a government clerk, aged sixteen years, 'cholera, (24 hours.)' The informant states, that no diarrhoea preceded the attack.

"At 2, Portland-street, Wandsworth-road, on 21st of August, the son of a coach-painter, aged three years, 'Asiatic cholera, (9 hours.)' The medical certificate says, 'Premonitory diarrhoea none.'

"At 53, Bemerton-street, Caledonian-road, on 20th of August, a silversmith, aged forty-four years, 'Asiatic cholera, (17 hours.)' He was seized suddenly whilst at his workshop, went home as soon as possible, and died the following day.

"At 10, Princes-terrace, Caledonian-road, on 21st of August, a (celebrated) cricketer, aged sixty-two years, 'epidemic cholera, (16 hours.)' He had no premonitory symptoms. He was attacked at two o'clock A.M. on the day of his death. He had been bowling at a match at Canterbury during the previous week.

"At 59, Queen's-road, on 22nd of August, the son of a carpenter, (deceased,) aged five years, 'cholera maligna, (34 hours.)' In these two cases of father and son there was no premonitory diarrhoea; both went to bed about ten o'clock at night as well as usual, and were seized about two in the morning. The father had two motions before sickness came on, the child none, but was attacked with incessant vomiting; when that was stopped purging came on; at nine in the morning both were in collapse, although the child at that time and throughout was not much purged. They died as if poisoned. This statement is from the surgeon's remarks."