the red globules, a homogeneous clot is formed. If only a portion coagulates, the remainder will be deposited upon the clot first formed, after it shall have contracted in its perpendicular direction sufficiently to squeeze out a serous fluid, still retaining the additional fibrin in solution. When all the fibrin has coagulated, true serum remains, and the buffy-coated coagulum is evident. It will thus appear to be a part and parcel of the same phenomenon, namely, the coagulation of the fibrin, some delay occurring from a cause not understood, but which will be made evident when we know by what means the fibrin is held in solution by the serum.

I believe this explanation to be free from the many objections to which the other hypotheses are open, and if you, Sir, consider it worthy a place in your valuable Periodical, by inserting it you will greatly oblige, yours truly,

WILLIAM BIRD HERAPATH.

Old Park, Bristol, Dec. 11, 1841.

MR. MULHOLLAND'S FRACTURE APPARATUS.

To the Editor of THE LANCET.

SIR,—During a practice of many years, I have often thought that there was required an instrument, on an improved plan, chiefly for compound and comminuted fractures of the leg and ankle-joint, which would save the patient much suffering, and be of great convenience to the surgeon. Such an instrument I have invented, and it embraces the following advantages, now submitted to your consideration, and that of the profession in general. I have the honour to be, Sir, your very obedient servant,

JOSEPH S. MULHOLLAND, Surgeon.

Belfast, Dec. 10, 1841.

1. The frame of the instrument, which is very simple, forms a firm and steady foundation, when placed on a bed, whether hard or soft.

2. Upon the framework is erected a double inclined plane, with two pillars or supporters on either side, each a foot high. These pillars, attached to the frame by hinges, admit of being turned down, to allow the limb to be more conveniently laid on the plane, which also may be laid flat for that purpose.

3. The plane may now be elevated at pleasure, and supported by two pins passed under it, through the pillars, and keyed, rendering the instrument exceedingly firm and secure against being overturned, by the involuntary starting of the patient during sleep, &c.

4. The pillars also support the weight of the bed-clothes, and prevent the limb from

accidentally slipping off the plane, whether elevated or lying flat.

5. When necessary to alter bandages, dress sores, or otherwise attend to the soft parts, the pins being withdrawn and the pillars turned down, the plane now rests steadily and securely on a rack graduated by the scale of the pin-holes. The patient is thus saved the pain attendant on change of position, the dressings are more easily effected, the limb is kept cooler in the elevated position (which favours the return of the blood), than when lying flat on a bed in fracture-box, junks or cradle. Besides, a stiff knee-joint may be, in a great measure, prevented by this instrument, by moving the leg-plane on its hinge as soon as the limb can conveniently bear the motion.

6. There is a movable foot-board with side-pieces which receive the foot and prevent lateral motion, and which, by means of a simple screw, adapts itself to the length of the patient's limb, which may be ascertained at any time by measuring the sound one from the bend of the knee to the heel. In case of a very oblique fracture, the foot may be secured to the foot-board so as to effect extension; or, if necessary, counter-extension can be made by means of the pillars, or by the necessary splints, which can be arranged to great advantage on the instrument.

7. The lower end of the apparatus is a plane for younger persons, regulated as above described.

The instrument consists of twelve pieces so arranged by hinges, as to be quite easy of application, and convenient for packing, and, though last not least, not expensive.

QUESTIONS

RELATING TO THE EVIDENCE OF MEDICAL WITNESSES AT CORONERS' INQUESTS.

Must the coroner procure the evidence of a particular medical man, and then order post-mortem examination.—Persons taken dead out of the water.—Question of medical evidence at every inquest.

To the Editor of THE LANCET.

SIR,—To you, as coroner for the great metropolitan county of Middlesex, I beg to submit the following queries:—

First. In sudden deaths, whether by violence or otherwise, on which inquests are held, is the coroner compelled by law to obtain the evidence of the medical man who may have seen the case immediately before death, or been present just at the death, or immediately after death? And then, if asked to state his opinion of the cause of death, is it compulsory on the coroner to order a post-