Correspondence.

"Audi alteram partem."

THE CARDIAC COMPLICATION IN INFLUENZA.

To the Editors of THE LANCET.

SIRS,—I think the history of the late epidemic would be more complete if greater stress were laid on the extreme prostration and cardiac weakness which occasionally follow attacks of influenza. Everyone has observed the remarkable and often sudden feebleness which accompanies the illness. A person may leave his house on a short journey, and, being seized with the complaint, be scarcely capable of returning home, and for the few following days can hardly raise himself in bed; but, as a rule, he recovers as speedily as he has fallen ill. Occasionally, however, the recovery has been more protracted, for not only has the so-called congestion of the lungs to be removed, but a distinct and special weakness of the heart has to be contended with; sometimes this has not been overcome, and death has ensued. I have had an opportunity of watching four such fatal cases, in which the heart feebleness was most remarkable, and was apparently the immediate cause of death. These cases all occurred in men belonging to various professions, of rather delicate constitutions, but in whom there was no history of any previous heart affection. The patients were all about fifty-five years of age or a little over. One case was that of a well-known medical man at Brighton, who showed, after the severe symptoms of his attack of influenza were over, some imperfection of breathing at the bases of the lungs, and at the same time an extreme prostration, more especially evidenced by a feeble irregular-acting heart. The absence of fever suggested that the continued dulness of the lungs was due rather to a passive condition than an active inflammation. This patient gradually got weaker until he died of exhaustion. Another case was that of a man who, a fortnight after an attack of influenza, lay in bed in an extreme state of prostration, with a scarcely perceptible pulse. Nothing could be found by physical examination to account for his weakness, and, in spite of nourishment and stimulants, he gradually died. A third patient was that of a gentleman whom I knew well, and who waited on me one morning informing me that he had had an attack of influenza which had completely prostrated him. I found his pulse feeble and irregular, and breathing hurried. He determined to go into the country and to take some tonic medicine, hoping soon to rally; but he daily grew more feeble, until the heart ceased altogether. Another patient was a gentleman who, after an attack of influenza and temporary recovery, became almost suddenly struck down by prostration. I found him with a most irregular pulse, tumultuous feeble heart, and some indication of blocking of the base of one lung. Whether this was a mere cardiac congestion or remains of some more acute pulmonary attack connected with the onset of influenza was not very evident. He rallied somewhat under stimulants and nourishing food, but soon relapsed into his prostrate state, and after a few days died from mere exhaustion. These cases were all so much alike in the fact of death occurring from heart failure coming on after attacks of influenza that I could not but regard these ailments as cause and effect. Of course this conclusion may be weakened by the suspicion that in all of them the heart was previously in an unhealthy state, for everyone knows how in chronic cardiac disease there may be no marked symptoms until the final catastrophe sets in. There was no history, however, of any such heart affection in these cases. My observation, if correct, can be corroborated by other medical men. Besides these instances of cardiac failure I have seen several other cases of influenza fatal through the lungs, and it is remarkable that they have all been in the male sex.

I remain, Sirs, your obedient servant,

Grosvenor-street, April 28th, 1890.

SAMUEL WILKS.

ALBUMINURIA AND LIFE ASSURANCE.

To the Editors of THE LANCET.

SIRS,—It seems to me that a long time must elapse before those cases of albuminuria with no recognisable symptoms or signs of disordered health will be estimated at their

proper value, on account of the comparatively recent practice of examining urine in all cases, whether for insuring or other purposes.

The following history is peculiarly interesting at the present time. In the beginning of this year a schoolmaster, A. B—, aged thirty-nine, consulted me in respect to insuring his life. In 1863 he suffered from purpura, and in 1864 he consulted a well-known London physician, now deceased, who told him that he had Bright's disease, and gave a bad prognosis. My patient returned to his school work in August, 1864; for some years subsequently he consulted several medical men, who always reported albuminuria. In 1883 he was rejected by the Equitable Life Office, and in 1884 he was also refused by the Clerical and Medical Life Assurance Office, on account of his albuminuria. It is reasonable to suppose that A. B— has been an albuminuric for the last twenty-six years, and during the whole of this time he has enjoyed excellent health, and to-day looks a strong, and is an active, man. The following is the analysis of his urine for Feb. 13th, 1890:—Acid reaction, sp. gr. 1019, a distinct cloud of albumen with nitric acid and heat (under 1 per 1000), no sugar; after twenty-four hours there is a deposit, extremely light and flocculent in character, containing minute hyaline casts, a few corpuscular bodies, evidently mucous and squamous epithelium.

I think that, just now, it is only with Group C—"the urine contains a small quantity of albumen, unassociated with any evidence of important disorder in health"—of Dr. Fraser's three groups that assurance offices will do any business, except on the principle advocated in the last paragraph of this note. It is impossible to say how many of the above cases do develop Bright's disease and how many do not, but there is a point which must have struck many much engaged in private practice—viz., the small number of deaths that occur from Bright's disease with the comparative large number of cases of albuminuria met with; this appears to support the view, at any rate indirectly, that a large number of cases recover.

It has been customary among insurance offices, in what are called second-class lives, to add a number of years to the actual age of the candidate and charge the premium accordingly. This system seems rather a lottery, and is certainly unfair both to the proposer and the company. A much fairer method is that in which no extra premium is charged, but if the assured die previously to the age to which, as a first-class life, he might be expected to live, an equivalent deduction should be made from the amount assured, the deduction decreasing every year the assured lives, and if the assured should live as long as a first-class life is expected to live, the debt would be finally extinguished, and the amount of the assurance would be paid in full at his death.

I am, Sirs, yours obediently,

April 28th, 1890.

W. J. TYSON, M.D., &c.

HYPNOTISM.

To the Editors of THE LANCET.

SIRS,—Hypnotism and the allied conditions having created considerable public attention in recent years, it is no longer considered by well-educated people as belonging to the supernatural, but as having a scientific basis. It must be admitted that the time has come for the medical profession to acquaint itself fully with its various phenomena. Hypnosis is hardly the condition to be produced as a public entertainment, merely to cause laughter to a pleasure-seeking crowd. This, however, is the case at the present time in London, and the large numbers attracted by the varied advertisements of a professional mesmerist speak of its popularity. The exhibition is of a most demoralising nature. It is degrading enough to those looking on to see some twenty human beings lying about the platform in various stages of unconsciousness, having needles and the like thrust into different parts of their bodies, or being sewn together with the same needle and thread, or caused to eat and drink various noxious substances, &c. Still more degrading is it to the subjects experimented upon, with, in most cases, their already unstable nervous systems, and who rapidly become fascinated by the operator, and have to return to the performance daily. If these experiments were performed on frogs instead of on men, several special societies would be at work to stop them, and the law of the land would punish the operator; because neither he nor the building is licensed under the Act for vivisection.

Hypnotism is valuable as a therapeutic agent, but, like many drugs, is dangerous to play with.

The investigations that have been carried out in the *clinique* of the Salpêtrière and other continental schools are most instructive and interesting, but these are not open to the general public.

It would be a similar exhibition if the public on the payment of a shilling were admitted to the operating theatres of our hospitals to laugh at the semi-conscious remarks of those anaesthetised. Hypnotic experiments as an entertainment have been stopped in many parts of the Continent, and I trust that the attention of the profession may be directed to this subject, so that similar steps may be taken in this country.

I am, Sirs, yours faithfully,

WALTER K. SIBLEY, M.B. Camb.

Harley-street, W., April 28th, 1890.

To the Editors of THE LANCET.

SIRS,—Your article upon this subject reminds me that at or about the year 1850, and for several years afterwards, there existed in Calcutta a Mesmeric Hospital, which was only closed when it was established beyond all doubt that mesmerism, as it was always called in those days, after the name of its discoverer, was too unreliable to be depended upon, and when the absolute certainty of chloroform insensibility was proved and its safety found to be almost invariable. Without doubt the records of this hospital are to be found, unless the white ants have eaten them, and then we shall see clearly in how many instances hypnotism succeeded and how frequently it failed. I do not think it was believed to be at that time in Calcutta curative of any disease. The hospital was founded by, or by means of, the late Dr. Esdaile of Calcutta, a man who possessed the power of hypnotism in a very marked degree, and an eye-witness from whom my information was derived told me of many great capital operations conducted and carried through successfully upon patients thus influenced. It has been said that no one but the mesmeriser himself can arouse the patient. What if he did not do so from any cause? A systematic investigation should be made into this subject, for although a discussion upon its merits has been raised from time to time, nothing new has transpired for many years. The "analgesia" obtained through M. Charcot's metallic experiments appears to be a restricted form of hypnotism, the parts experimented upon being sent "to sleep." Only hysterical people, however, could be thus influenced, and the project was soon abandoned. The natives of India were, as a rule, easily mesmerised, but not so the Europeans, whose mental condition was stronger.

I am, Sirs, yours obediently,

Mandeville-place, W., April 27th, 1890.

FREDK. SIMMS.

THE INQUIRY IN REGARD TO METROPOLITAN MEDICAL CHARITIES.

To the Editors of THE LANCET.

SIRS,—It is stated in a circular recently addressed to the profession by the Charity Organisation Society that "the provision of gratuitous medical relief to large numbers of persons (both as in- and out-patients) without inquiry or any sufficient regulation is, as investigation shows, a serious obstacle to the promotion of provident institutions, at which medical treatment can be secured by small periodical payments," to which I have replied in the following way; and as the subject is of vast interest to the general practitioners, may I ask the favour of your publishing it.

I am, Sirs, yours faithfully,

JOHN PAGE HENTSCH.

Southampton-street, Camberwell, April 27th, 1890.

To the Secretary, Charity Organisation Society.

SIR,—With reference to Paragraph 3 of the circular you recently sent to me, I beg to say that as a member of the executive committee of the Medical League I have had a good opportunity of ascertaining the feelings of a large number of general practitioners upon the subject of the formation of provident dispensaries, and feel certain that they are strongly opposed to any such scheme; and, much as they would like to see the present out-patient relief system greatly checked, they would by far rather that it should remain as it is than if by such check it would in any way facilitate the establishment of provident dispensaries. I am aware of individual cases which would help to prove the injuries inflicted upon the profession and the poor by the way in which hospital out-patient so-called relief is at present administered.

Yours faithfully,

JOHN P. HENTSCH.

THE OBSTETRIC BINDER.

To the Editors of THE LANCET.

SIRS,—I quite agree with the remarks of Dr. Chadwick in your last issue, and have always insisted on the value of the binder both *before* and *after* labour, whether in its original form or otherwise. Though we know well that the binder cannot possibly restore the want of tone in the abdominal walls, "undoubtedly the involution of the uterus and abdominal parietes" (as Dr. Chadwick states) "will be assisted, and will go on more efficiently when it is applied." The retroversion spoken of by Mr. Burton as likely to accrue from the pressure of the binder is far more likely to be caused by the pernicious habit of lying so constantly on the back.

I believe with Dr. Chadwick that the binder applied during labour will be found a most valuable aid, by keeping the presenting part in closer contact with the os, and so stimulating uterine action, and thus shorten the labour considerably. The feeling of comfort unanimously expressed by patients when the binder has been properly applied is also a weighty argument in favour of its use.

I am, Sirs, yours faithfully,

ALEXANDER DUKE, F.C.P.I.,

Dublin, April, 1890.

Ex-Assist. Master, Rotunda Hospital.

THE BRITISH NURSES' ASSOCIATION.

To the Editors of THE LANCET.

SIRS,—I noticed in the *Daily News*, the only lay paper, I believe, which made the mistake, the announcement that Dr. Andrew Clark presided at a recent meeting of the British Nurses' Association, and I to-day observed in your last issue a letter showing that "the only person in the Medical Directory entitled to that designation" is not connected with that institution, and has never presided over any of its meetings. To prevent any further misunderstanding over this most momentous matter, permit me to say that the honour of presiding at the meeting in question was bestowed upon—Yours faithfully,

ANDREW CLARK, F.R.C.S.,

Surgeon to, and Lecturer on Practical Surgery at, the Middlesex Hospital.

Harley-street, W., April 29th, 1890.

NORTHERN COUNTIES NOTES.

(FROM OUR OWN CORRESPONDENT.)

Friendly Societies' Convalescent Home.

At the last meeting of the Committee of the North-Eastern Counties Convalescent Home it was mentioned that Mrs. Williams, who had so generously prepared Yewbarrow Hall for the immediate use of the societies as a home, had further added to her kindness by offering sufficient land to build a home on her estate close to Grange-over-Sands, and also the stone necessary for the purpose of its erection.

Carlisle and Cumberland Hospital Sunday Fund.

Since the last meeting of the Hospital Sunday Committee at Carlisle, at which a resolution was passed declining to receive contributions appropriated to particular institutions, the Committee of the Whitehaven Infirmary have withdrawn their co-operation with the Hospital Sunday Committee, leaving the remaining five institutions to participate in the fund in future—namely, Cumberland Infirmary, Carlisle Dispensary, Carlisle Fever Hospital, Cumberland and Westmorland Convalescent Institution at Silloth, and the Workington Infirmary. The Committee will distribute the fund amongst these five institutions on the basis of their respective expenditures.

Durham.

The "Messiah" is to be rendered in Durham Cathedral on May 1st by a choir of 600 voices. Admission will be free, but a collection will be taken, which is to be devoted to the Durham County Hospital and the City of Durham Convalescent Home.—The directors of the Consett Iron Company, who with much public spirit presented a park of between twenty and thirty acres some short time ago to the inhabitants of Blackhill and Consett, are to be congratulated on the rapid progress now seen in the laying out of the park,