crammed with the most succulent food, and ordered the use of generous wines, &c. By this means occasionally (but success is, unfortunately, rather the exception than the rule) the system may be spurred into sufficiently energetic action to produce the necessary plastic exudation essential to the formation of a healthy cicatrix.

I am, Sir, your obedient servant,
Paris, May, 1860. OPHTHALMOSCOPE.

NAVAL SURGEONS ON HALF-PAY.

To the Editor of THE LANCET.

SIR,—I have read with great pain and regret, in your journal of the 28th ultimo, a requisition from the medical practitioners of the borough of Portsmouth, presented to Sir John Liddell, Director-General, praying for the removal of certain "young and able" naval medical officers settled amongst them, whose misfortune, and not their fault, it is to be placed upon half pay; and who, (save the mark!) by the "style and dash" they are enabled to cut out of a miserable pittance of 8s. per diem, less Income-tax (for these gentlemen have also to contribute to the security of us at home), tread on the heels of the medical monopolists of Portsmouth. It is almost needless, Sir, to state the dangers and difficulties to which our brethren afloat are exposed, including climate, disease, and (last, not least) action, all of which have been and ever will be braved by our valiant naval medical men as becomes their noble profession. Is it any wonder that these gentlemen have been, and still are, treated with such contumely by those in authority, when we read such a requisition, signed by eighteen so-called medical practitioners, as that referred to, and coming from one of our great naval arsenals, and whose "precarious incomes" are in jeopardy from the "style and dash" (and also, I suspect, the ability) of a few half-pay naval medicals?

I remain, Sir, yours truly,
W. HONNER FITZ PATRICK, M.B.,
Late Assistant-Surgeon R.N.
Knotty Ash, May, 1860.

PEPSINE IN PREGNANCY.

To the Editor of THE LANCET.

SIR,—Having read in THE LANCET of April 28th that M. L. Corvisart had advocated the use of pepsine in the "obstinate vomiting of pregnant women," and on the following day having been consulted by a patient, a very delicate young woman, two months advanced in pregnancy with her first child, and who had (as she stated to me) been suffering from extreme vomiting for nearly a month, and being also unable to retain food upon the stomach, I determined to give pepsine a trial before resorting to any of the other well-known remedies; and I am happy to say, that the first dose, ten grains (placed between bread-and-butter), gave immediate relief; the second dose, and the same quantity as first prescribed, permanently relieved her. I would most certainly recommend the use of pepsine in this most distressing complaint.

I am, Sir, yours truly,
GEO. SELWYN MORRIS, M.R.C.S., &c.
Summerhill-road, Tottenham, May, 1860.

PARISIAN MEDICAL INTELLIGENCE.

(FROM OUR OWN CORRESPONDENT.)

THE discussion on iodism was brought to a close at the meeting of the Academy of Medicine, on the 24th instant, when two orators—M. Baillarger and M. Trousseau—were heard. The former contended that the question could only be solved by further experiments in Paris, so as to test, in a great number of cases, the effects of the small doses of iodine. He thought goitre alone, independently of iodine, might be suspected of causing iodism. M. Trousseau considered that goitre had not so much to do with iodism as was supposed, and that much depended on locality. He then described the symptoms of exophthalmic goitre, and stated that small doses of iodine, in such a state of the organism, might produce iodism. He distrusted, however, infinitesimal doses, and thought we should take the natural progress of disease into account. M. Trousseau finally alluded to letters he had received from physicians practising in districts where goitre is endemic, and where no iodism has ever been observed.

Chopart's operation is very unpopular here. M. Rober, of the Hôtel Dieu, who performed that operation some time ago, had, last week, to cut the tendo-Achillis to relieve retraction. The French surgeons prefer the sub-astragalus operation after Malgaigne's method, which consists in covering the anterior and inferior articular surface of the astragalus from the soft parts of the internal lateral half of the sole of the foot.

The question of medical regimen is much agitated amongst surgeons. M. Verneuille, who lately performed resection of the elbow-joint on a cachectic girl, aged sixteen, in the Infants' Hospital, gave his patient wine and beefsteak on the day of the operation. No febrile symptoms manifested themselves, and the wound healed kindly. There is a tendency amongst surgeons to adopt rich diet after operations.

M. Desmarres tried last week a new cure for hyperæmia of the papilla of the optic nerve, which is here designated "fatigue de l'accommodation." After trying the general antichlorotic treatment—blue conserves, &c.—without success, he performed tenotomy of the external rectus muscle in two patients. We shall see the result of that method.

In reference to Professor Czermak's efforts here to popularize the laryngoscope, I must give you a short outline of its history. The idea of that instrument originated with Liston, who, in his "Practical Surgery" (London, 1840, p. 417), says, with respect to ulcerated glottis, "A view of the parts may be sometimes obtained by means of a speculum—such a glass as is used by dentists—on a long stalk, previously dipped in hot water, introduced with its reflecting surface downwards, and carried well into the fauces." In 1855, Garcia, professor of music, made some excellent observations on the physiology of the human voice, as revealed by the laryngoscope (*Philosophic Magazine*, vol. x., p. 218). Dr. Turk, of Vienna, attempted to apply the Liston-Garcia speculum to medical diagnosis in 1857. A drawing of the same instrument is given in THE LANCET of Dec. 24th, 1859, by Mr. Price, of the Great Northern Hospital. But M. Turk's speculum could be used only during clear sunshine, and hence it was never employed in winter. Professor Czermak was the first who commenced its application by the aid of lamp-light, thus rendering it of general utility. In 1858, he published his observations in the *Wiener Medic. Wochenschrift*, when he gave the first impulse to its investigation, explaining its physiological and therapeutic importance. I saw lately, in company with Dr. Sichel and other medical celebrities of Paris, the application of the laryngoscope by Professor Czermak both upon himself and upon others present, and I must say that the view we obtain of the vocal cords, ventricles of the larynx, and the Eustachian tubes is quite charming.

At the Pitié, M. Michon has a case of necrosis of the superior maxilla, caused by the absorption of phosphorus, the patient being engaged in the manufacture of lucifer matches. He will remove the whole of the left superior maxilla as far as the orbit. He has also a case of brachial aneurism caused by unskilful bleeding.

At the Infants' Hospital, M. Bouvier has had two more cases of diphtheritis. During the last winter he saved four out of forty patients in whom he performed tracheotomy.

Professor Trousseau has in his wards a patient who contracted a chancre five years ago, for which he received no treatment. Now he suffers from periostitis complicated with paraplegia, whom M. Duchen treats by Faradization.

Professor Nélaton lately removed two cancers of the tongue by the écraseur, and one of the patients has since left the hospital. The greatest surgical curiosity has been the removal, by M. Nélaton, of a large tumour situated at the left side of the face and covering the whole of the neck, hanging down over the chest, and reaching as far as the fourth rib. The patient is a man of thirty-five, who had five years ago a small tumour in the same region, which was removed; but it soon returned, and, making rapid progress, reached such a huge size that, unless removed, it would have proved fatal by causing asphyxia. Its measurement was, from the parotid on the left side, near the angle of the ramus of the left jaw, seventeen inches; its circumference above ten inches. The nature of the tumour was what French surgeons call ganglionic, meaning simple hypertrophy of the lymphatic glands; whilst M. Robin designates it ganglioma, taking it to be a kind of encephaloid. M. Nélaton removed the greater part of the tumour, and to the rest he applies caustics. The patient is doing well.

April 20th, 1860.

THE MEDICAL WARRANT FOR THE INDIAN ARMY.—It is understood that the Medical Warrant, which was believed to have been forwarded to India, has been detained in England, owing, it is thought, to the remonstrances of Sir J. Outram.