tion commenced, at first gained ground under mercury, but finally yielded to increased doses of it, though the mouth was never affected. The loss of the glans penis in this way is abundantly common, Dr. J. Thomson, annually in his lectures, used to advert to this point in his humorous way never failing to ascribe these repeated losses, to the "triumphs of mercury." I could readily multiply facts relating to this question, in common with most medical men; let each contribute his quota, and we may yet hope for something like a general rule. I have the honour to be, Sir, your most obedient servant,

REGINALD BURRIDGE, M.D.
Physician to the Taunton and
Somerset Hospital.

Taunton, Feb. 5th, 1838.

P.S. The constitutional irritation resulting from the injudicious use of mercury, which gives rise to ulceration of a sloughing or phagedenic character, seems to be connected in some way with a curious and important fact, first publicly remarked by the late Mr. Wallace, of Dublin, viz., the power of mercury to suspend the granulating stage of syphilitic ulcers, which commonly cicatrise with loss of substance under the employment of mercury. In "Edinburgh Medical Essays," Vol. IV., is a case of regeneration of the glans penis after amputation for gangrene, where, of course, no mercury was employed. The patient was attended by Dr. Gibson and Mr. Jamieson, who record the case.—R. B.

CASE OF
POPLITEAL ANEURYSM
IN BOTH HAMS, WITH
SECONDARY ANEURYSM,

FOLLOWING THE LIGATURE OF THE FEMORAL
ARTERY IN ONE LIMB.

By **GEORGE GWYNNE BIRD, M.R.C.S.,** Senior Surgeon to the Swansea Infirmary, Glamorganshire.

DAVID PHILLIPS, aged 38, was admitted as an indoor patient at the above Institution under my care, on the 3rd of January, 1837. He was a quay-porter in this town, and had been accustomed to carry heavy weights up flights of steps, to warehouses, &c. The patient is a very powerful man, and had, for wagers, often so carried five cwt. at a time. He has lived freely and drunk hard, but chiefly beer.

The disease was first noticed by him two years since, in the right leg, but only a few weeks back in the left; the disease had latterly increased rapidly in the right limb.

On an examination of the tumours, I perceived that which was in the right ham to

be considerably the larger one; the popliteal space was completely filled by the swelling, which bulged out on both sides beneath the outer and inner ham-strings; that on the left side was smaller, and had a more compact and firm feel, and did not so bulge; it appeared about the size of an orange. On the 6th of January, I observed the tumour in the right ham had increased rapidly since his admission, and I feared the sac would give way, and the aneurysm become diffused.

On a consultation with my surgical colleague, Mr. Rowland, and Dr. Cohen, one of the physicians to the Infirmary, after having made a careful stethoscopic examination of the patient's person to discover if any aneurysmal tumours existed in the trunk of the body, which we did not detect, we decided on the propriety of tying the femoral artery on the proximal side of the Sartorius muscle, which was done on the following morning, January 7th. The case did well, and the patient had no untoward or unusual symptoms following the operation; the ligature came away on the 13th day; the wound healed by the first intention, and the patient was convalescent, and able to walk about the wards in a short time.

On the 7th of March I tied the femoral artery in the left limb, but not with such an immediately successful result. I laid the artery bare, and passed the needle under it, in the presence of several medical gentlemen of this town. Before I put the ligature round the vessel, I pressed the artery on the blade of the needle, to see that the pulsation stopped in the tumour, which was the case; I then drew the thread round the vessel, and tied it firmly; the pulsation stopped in the aneurysm, and I hoped this disease would have been as rapidly cured as in the former limb; the wound healed by the first intention, as before, but in two or three days after the operation we perceived a pulsatile movement in the tumour, which had, however, considerable diminished; I was at first in hopes this motion resulted from the jerk of the vessel above the tumour; but on minutely examining the ham, and applying the stethoscope, it was found to be otherwise, and quite evident that secondary aneurysm existed; the ligature placed on the femoral artery in this last case, did not come away for seven weeks, when it was detached, with the knot and ring entire, and is still in my possession. The ring formed on the ligature in tying the vessel was of the usual size, and evidently proves that the circulation could not, even at first, have been carried on through the trunk of the artery. I am not able to state a clearly satisfactory reason for the occurrence of this secondary aneurysm, but I suppose it arose from a free anastomosis of the arteries in the limb, to which the obstructed circulation, caused by the first ope-

ration may have contributed. The tumour remained nearly stationary, from its first diminution after the operation, for some time, but rather on the decrease.

He was kept in bed several weeks, and pressure applied over the tumour and limb; when he got up he walked well, and was discharged on the 4th of May, the pulsation still existing in the tumour, but the patient was not much inconvenienced by it. I watched him occasionally up to the present time, January the 14th, 1838. The tumour has gradually, with the pulsation, subsided, and he is now perfectly well, and nearly as well able to follow his former occupation as before. Neither pulsation or tumour exists in either ham, and he says that he can carry a sack of flour as well as ever, except that he finds some weakness in going up stairs. I should here acknowledge the kindness of Mr. Lawrence, of London, and Mr. Hodgson, of Birmingham, with whom I corresponded respecting this case (to me both interesting and novel), and received the valuable suggestions and advice of those gentlemen.

RECLAMATION OF MR. NEWPORT.

To the Editor of THE LANCET.

SIR:—I observe in the last number of THE LANCET (Feb. 3), some statements in Dr. Hall's lecture on the "Nervous System," page 650, paragraphs 15 and 16, which cannot apply to any one but myself, since I am the only one of Professor Grant's pupils who attended his course on "Comparative Anatomy," in the session 1832-33, and who since that period has published a detailed account of distinct motor and sensitive columns in the nervous system of articulated animals. I beg to express my surprise at those statements, which, to say the least of them, are decided misrepresentations, there being in the first of these paragraphs a suppression of facts, which Dr. Hall himself cannot be unacquainted with; and, in the second, a statement that leads to an inference which is not correct, namely, that Professor Grant taught the doctrine of the existence of distinct motor and sensitive columns in the nervous system of articulated animals at that time as his own. In doing this Dr. Hall appears to be rendering Professor Grant great disservice, in thus endeavouring to make it appear to the public that he lays claim to my discovery of the true motor and sensitive columns in these animals; and I cannot suppose that Professor Grant is either so unjust, or so inconsistent, as to do so, since there are circumstances which, if made known, would, I trust, sufficiently prove unto whom this discovery really does belong. In conclusion, I would also observe, that there are other

passages in Dr. Hall's lecture, which are not in so strict an accordance with facts as I should have supposed Dr. Hall would have considered necessary to his character, as an honourable cultivator of science. I remain, Sir, your obedient servant,

GEORGE NEWPORT.

10, University-street,
Feb. 6, 1838.

P. S. In the meantime I beg to refer your readers to my two papers on the Nervous System of Insects, published in the "Philosophical Transactions" for the year 1832 and 1834, Parts II., in each year.

CASE OF THE

PUERPERAL-MANIA PRISONER.

To the Editor of THE LANCET.

SIR:—I may, I trust, be allowed space in your valuable Journal, to answer the very uncourteous, and, as the event has proved, rather hasty attack made upon me, in a letter in THE LANCET of last week, signed "A Member of the Legal Profession," in answer to a former communication of mine.

It is a pity that the writer did not wait one little week, ere he commented in such unmeasured terms, upon my letter. Alas for the fallacy of his judgment! the jury at the *Central Criminal Court*, on the woman's trial, January 31st, brought in a verdict of "Not guilty, on the ground that at the time the act was committed, the prisoner was labouring under temporary derangement." It is evident that your "legal" correspondent, in his haste to take up the cudgels for the Coroner, has altogether misunderstood my letter. Although no lawyer, I humbly conceive that the duties of a coroner's jury and a grand jury, are not so perfectly identical as to warrant the sweeping inference which your "legal" correspondent draws therefrom. He says that, because the Judge required the Grand Jury to return a true bill, it is "clearly shown that the Coroner was right in his direction to the Jury, the very same direction having been given by Mr. Baron Alderson, the Judge presiding in the *Central Criminal Court*." *Audialteram partem*. "The Coroner, in summing up, observed that *no doubt* a jury in another court, would, upon the evidence, take a merciful consideration of the case, and judge the poor woman to be confined as a lunatic for life." I leave to your readers to find the parity between these. That the Coroner was wrong in his directions (and it was to this point my strictures were chiefly directed) is clearly proved by the Jury, on the poor woman's trial, acquitting her, on the ground of temporary derangement,—the object to prove which I strove. We all know, albeit not "members of the legal profession,"