non prius fuerit in sensu," it was not to be expected when in this abnormal condition, with only the senses of sight and touch in communion with the external world, that her progress could be otherwise than slow in the extreme. However, she evinced an interest in looking at pictures and prints—more especially of flowers, trees, and animals—but when shown a landscape in which there was a river, or the view of a troubled sea, she became instantly excited and violently agitated, and one of her fits of spasmodic rigidity and insensibility immediately followed. If the picture were removed before the paroxysm had subsided, she manifested no recollection of what had taken place, but so great was the feeling of dread or of fright associated with water that the sight of it in motion, its mere running from one vessel to another, made her shudder and tremble and in the act of washing her hands they were merely placed in the water. After she had been at home a fortnight I had the benefit of frequent consultations with my friend, Dr. Todd, of King's College, on her case. She had partially recovered her taste, and refused any longer to take nauseous medicines. Dr. Todd expressed his conviction that eventually she would perfectly recover, however gradual and protracted the recovery might be—an opinion which has been fully verified. The accident happened in 1843, and it is only within the last few weeks that she has completely regained her hearing, and the full exercise and enjoyment of her mental and bodily powers. We agreed that the tonic course of medicines should be continued, combining quinine with the iron. We further advised the frequent sponging of the head and spine with cold water, and the use of the shower-bath, as soon as it could be borne. The first attempt, in accordance with our wishes, of running water through a common cullender upon her head, induced such alarming excitement and fright, and was followed by a fit of insensibility of such long continuance, that the experiment was not repeated.

(To be continued.)

REGISTERED.

NEW SURGICAL INSTRUMENTS.

By Mr. JAMES COXETER.

As I have devoted some time and labour to the improvement of surgical instruments, I beg leave to call the attention of the profession to them through the medium of *THE LANCET*.

It has been frequently remarked that the scarificator, having strong springs (which are indispensable to make the instrument efficient for its purpose), cannot be used without great difficulty by an operator with weak hands, and the ever objectionable trigger rebounding back after the discharge has always been so exceedingly unpleasant that many operators have experienced the ill effects of a blow from it for some time. To remedy these defects, I have placed a rotating lever at the side of the instrument, instead of the trigger in the old construction, by which means *strong springs* can be used with such ease that a child, six years of age, can, by means of one turn of the lever, raise the lancets to their right place for action. The discharge is made by pressing on the same lever, which does not rotate or change its position.

The stop is placed in the *inside*, and, by this part of the construction, the objectionable movement of the trigger is done away with; and, from the stop being made in the inside of the instrument, the noise is not so great.

The next instrument is the guillotine for excising the tonsils.

Various have been the constructions to produce a simple efficient instrument for this operation; but surgeons have repeatedly told me the instruments in present use were very defective: this prompted me to construct the one as represented in the engraving, the blade of which, it will be seen, works in a *serpentine* direction; thus the edge of the blade moves in the same way as you would use a knife.

The stricture instrument, as represented in the engraving, has a *director* point of about half the size of a No. 1 catheter, it will readily be seen that if this is introduced into a difficult stricture, the cut can be made without any risk of making a false passage.

The other instrument is a hollow sty for fistula lachrymalis, which has a *small narrow opening* a short distance below the head which *receives the tear*, and thus prevents the irritability which is sometimes occasioned by using the solid one. In cases where it has been tried, I have been informed it answers the purpose well.

23, Grafton-street East, University College, Oct. 26th, 1845.

[We have examined the instruments described by Mr. Coxeter, and think them ingenious modifications of those in use, and worthy the attention of the profession.—Ed.]

REVIEWS.

A Practical Treatise on Healthy Skin; with Rules for the Medical and Domestic Treatment of Cutaneous Diseases. By ERASMUS WILSON, F.R.S. *Illustrated with Engravings.* London, 1845. Churchill. Demy 8vo. pp. 356.

IF it be a maxim that close and persevering application leads to success, in whatever honourable pursuit of life man may embark, it may be expected that the long and assiduous labour bestowed by Mr. Erasmus Wilson on the elucidation of the structure, functions, and pathology of the skin, should be attended with new and original views upon that important subject. In the instance before us, our expectation has not been raised in vain. Mr. Wilson has carried the investigation of the structure of the skin to a point that has never before been attained, he has removed many of the ambiguities which surrounded an obscure branch of medicine, and he has, with a tact peculiar to himself, placed the consideration of the pathology of the skin in a clear, rational, and comprehensive light. The course which Mr. Wilson has pursued in the investigation of the skin and its diseases is obviously that which is dictated by reason, and by the present improved state of medical science; he has assumed the absolute necessity of a thorough knowledge of the anatomy of the skin, in a state both of health and disease, and of its physiology in the same two conditions. We repeat that this is the correct mode of viewing the subject, and we consider Mr. Wilson to be entitled to praise for enforcing in his works these important considerations. There is, besides, a rejection of all scientific frippery in his writings, and a proper contempt for the "*verba, non res.*" Our readers do not require to be told that since the days of Willan and Bateman medical science has made gigantic strides. Anatomy, physiology, pathology, interpreted by the lights of organic chemistry and the microscope, are no longer the sciences they were in the hands of our ancestors; they have opened a new world of investigation for the pathologist.

The classification of skin diseases suggested by Mr. Wilson, and published in a preceding volume of this journal, is scientific and sound, and not less deserving of attention for its simplicity and easy application; and we are convinced that the day is not far distant when it will be universally adopted. Mr. Wilson has given in his present volume six engravings, illustrative of the structure of the skin and its appendages, and some of its morbid states. These illustrations derive great advantage from having been drawn by the author himself, and to an exact scale, so that we are enabled on simply viewing them to form a notion of the sizes, both actual and relative, of the objects represented. Plate 1 is dedicated to the scarf-skin: Plate 2 to the true skin and nail: Plate 3 to the sebaceous glands, with their curious parasite, the *entozoon folliculorum*: Plate 4 to the structure of hair: Plate 5 to the itch animalcule, *acarus*