the system the raising of a blister might, perchance, be followed by fatal consequences; and spontaneous peritonitis, as it generally occurs in individuals unfavourably predisposed, is ever replete with danger; but it does not follow, in my opinion, that the same inflammation procured in a system otherwise in a state of health, and especially in a comparatively remote channel, which has no functional intentions to fulfil, and which Nature has in vain attempted by the same process to occlude, is to be regarded with equal apprehension. I have yet to learn that which neither my own experience nor the retrospect of the fatal cases of incarcerated hernia on record have taught me, viz., that the mortality after these operations, as well as after others in which the peritoneum has been injured, has resulted from *pure traumatic peritonitis*; and, on the contrary fearlessly hazard the opinion that this membrane, in a healthy individual, may be wounded with comparative impunity.

In the case now related the adhesive inflammation was set up by means of

A piece of lint introduced into the sac,

and allowed to remain for twenty-four hours, a period equal to the production of an amount of inflammatory action sufficient to ensure its obliteration. This is the plan which I now beg to propose for the consideration of the profession. Of course it would not be suitable for old and large hernial sacs; the cases must be selected by the surgeon; and, in my opinion, that would be the best calculated for such treatment in which the sac is small and the intestinal descent has been recent. A single case is, I am aware, not sufficient, however favourable, to warrant the adoption of this treatment as a rule; my object in bringing it before the profession is to obtain a just estimate of its reasonableness and practicability.

P.S. A similar case, but occurring in earlier life (at the age of fourteen months), is mentioned by Mr. Lawrence, in his work on hernia, page 59, second edition; proving, as Mr. L. says, an exception to the general rule laid down by Mr. Pott, "that all those ruptures which appear in the scrotum of young children are congenital." The operation for incarcerated hernia was successfully performed, *but the hernia appeared again afterwards.*

Finsbury Pavement, Nov. 12th.

"Essence of *camphor* is made by dissolving camphor in solution of muriate of ammonia."—*Dr. Traill.*

"A very good *cream* is formed by mixing up magnesia, calcined, with afterings of milk."—*Dr. Traill.*

SULPHURIC ACID, A PREVENTIVE OF LEAD COLIC.

To the Editor of THE LANCET.

SIR,—The permission to make use of your widely-circulated Journal to publish the means which have been found perfectly successful in preventing that most distressing malady, the lead colic, to which the workmen employed in the manufacture of white lead are so liable, would oblige, Sir, your's very respectfully,

E. W. BENSON,

Managing Director of the Works.
British White-Lead Works, Birmingham,
Dec. 10, 1842.

Soon after the establishment of the British White-Lead Works, and for some succeeding years, the lead colic prevailed amongst the workmen to a very distressing extent. The usual precautions were adopted of providing the workmen with gloves, and of enforcing strict attention to cleanliness on their part, ample means for this purpose being at the same time supplied, the men also being caused to change their working dresses on leaving their employment. Effective means, moreover, were adopted for carrying off the dust which arises in some of the operations, thus preventing as much as possible the inhalation of particles of white lead suspended in the air. The work-people had also a regular medical attendant provided by the proprietors of the works.

Notwithstanding the precautions thus adopted, the observance of which was carefully enforced, some of the work-people were constantly suffering from illness, and in the hot season the number of cases of colic much increased.

The copious use of treacle-beer has been considered at many white-lead works to be serviceable, to some extent, as a preventive of this malady, and the beverage was supplied *ad libitum* in our establishment.

I met with a statement some time since, that "sulphuric lemonade" had been successfully used at a white-lead manufactory in France as a preventive of the injurious effects of white lead, and it occurred to me that by adding *sulphuric acid* to the treacle-beer then used by our people, its supposed efficacy might be tested. This idea was carried into effect in the summer of 1841, and the results have proved most gratifying, as, although during several weeks after the addition of the sulphuric acid to the treacle beverage, little advantage seemed to be derived, yet the cases of lead colic became gradually less frequent, and since October of that year, or during a period of fifteen months, not a single case of lead colic has occurred amongst the people.

As no other change has taken place in the circumstances under which these men are

placed, nor in the influences to which they are exposed, I can only attribute this gratifying result to the employment of the sulphuric acid, which I conceive produces its effect by converting the highly poisonous carbonate of lead into the innocuous sulphate of lead. I am therefore anxious that the work-people employed at other manufactories should be protected by the means which have been found so perfectly effective in this establishment.

It will be seen by the annexed formula that bicarbonate of soda is also added to the treacle-beer, and that, consequently, sulphate of soda is produced, but the proportions of soda and sulphuric acid are such that rather less than one half of the sulphuric acid becomes neutralised. The object in adding bicarbonate of soda is to give a pleasant briskness to the beverage.

Formula for preparing the Sulphuric Beer.

Take of *treacle*, 15 lbs; *bruised ginger*, $\frac{1}{2}$ lb; *water*, 12 gallons; *yeast*, 1 quart; *bicarbonate of soda*, $1\frac{1}{2}$ ounce; *sulphuric acid* (oil of vitriol), $1\frac{1}{2}$ ounce, by weight.

Boil the ginger in two gallons of water; add the treacle and the remainder of the water, hot. When nearly cold transfer it to a cask, and add the yeast to cause fermentation. When this has nearly ceased add the sulphuric acid, previously diluted with eight times its quantity of water, and then add the bicarbonate of soda, dissolved in one quart of water. Close up the cask, and in three or four days the beer will be fit for use. As acetous fermentation speedily takes place, particularly in hot weather, new supplies should be prepared as required.

NATIONAL GRATITUDE TO THE GREATEST
NATIONAL BENEFACTOR.

A MAN often misses his century. Had Jenner lived in ancient Greece or Rome, and proclaimed a remedy which, without danger, pain, or difficulty, would become an antidote to the most terrible disease, what apotheoses, what panegyrics, would have been his reward! He would, at least, have received rank among the demi-gods; temples to his memory, games in his honour, would have been instituted. But in *modern* times, while men whose influence on the destinies of mankind is of more than questionable utility have been *fêted*, titled, immortalised in bronze and marble, not one tablet, not a single public memorial, hands to posterity the modest name of the illustrious discoverer of vaccination. Compulsion even seems necessary to insure the employment of his inestimable remedy by some who ought to be in the advance, rather than at the rear, of civilisation; while certain political economists even abhor him as a main author of a "surplus" population! However, there are diseases enough left to prostrate life, taking into the calculation those that are made by charlatans and quacks.

ON THE
FORMATION OF MEDICAL CLASSES
FOR
TEACHING THE MUSICAL EAR.

To the Editor of THE LANCET.

SIR,—Now that the value of auscultation is universally admitted, it is imperative on those who are engaged in medical tuition to give this subject the fullest consideration. It is true that individual lecturers, especially those engaged in clinical instruction, may take great pains to afford their pupils the requisite information, but I think that something more might be effected in this branch of education with respect to the majority of students. It must be confessed, that there are yet great numbers of medical men, especially amongst those who are located in the country, who are altogether ignorant of the use of the stethoscope, who never employ it in their own practice, who profess to question, or really doubt, its utility, and some who have the honesty to confess that "they can make *nothing* of it." There are others, also, who, after giving some attention to the subject, abandon it in despair, or secretly conceive it a deceptive method of diagnosis. This discrepancy of opinion respecting an instrument which is at once so simple in its construction, and so practical in its application, acknowledges a variety of causes, but there is one which, whilst it has excited the least attention, is perhaps the most extensive in its influence. It is common and proper to insist on the *abuses* of this instrument as the occasion of much difference of opinion; it is equally right to attribute something to a deficiency of *pathological information* on the part of the practitioner; but it still appears to me that much more is to be ascribed to a want of cultivation of *the ear*. We know that some persons can scarcely distinguish the "National Anthem" from the "*Old Hundredth*," and declare that they have "no taste for music." Can it, then, be a matter of surprise, that they find a difficulty in becoming acquainted with the stethoscopical indications? I would say of "the man that has no music in himself," so far as regards auscultation, "let no such man be trusted." Now I am quite sure that, to use the stethoscope with advantage, the ear ought to be *trained*, just as it is necessary for the purpose of singing. In fact, there is a great similarity in the process of learning to *hear* and that of learning to *sing* with correctness, for both require an accuracy of *comparing* sounds. I think I may say with safety (other things being equal) that he who is possessed of a musical ear is the best fitted for stethoscopical examinations. It is well known that those who are proficient in music are capable of distinguishing the various instruments in a large concert, and discriminating any which is not in accordance with