this has not taken place in any fatal quantity, they will feel disposed to give it as their opinion that death was produced in some other way, and thus may fall into a very serious error, from an ignorance of the fact which I think must now be admitted, namely, that in some cases of cutting of the throat sudden death is produced by *asphyxia*.

ART. V.—*Cases of the Venereal Disease, illustrative of the Introduction of the Venereal Poison into the System, through other Channels than by sexual Intercourse.* By CLEMENT HAMERTON, Surgeon to the Castletown Dispensary, Nobber.

CASE I.—Anne Gerrard, æt. 25, married in 1834. In the fourth month of pregnancy she was infected by her husband, and in a few weeks afterwards was covered over with a papular eruption; at parturition she had a sore breast; her child, when born, was in a very weak and sickly state, and in four days it died. Soon after her delivery, she and her husband went to Dublin, where her husband remained six weeks under mercurial treatment; she returned home after one week's stay in town. In June, 1838, I first saw her, she had miscarried five times since her husband was salivated, at periods extending from the sixth week to the seventh month. By my advice she took blue pill for some weeks; her mouth became fully affected. In June, 1839, she again became pregnant, and in March, 1840, gave birth to a healthy and plump child. Up to the present time (January, 1841) the child is healthy. Her husband did not take any mercury from me.

CASE II.—Mary Duffy, æt. 30, sister to Anne Gerrard, living in the next cabin, finding her sister suffering from a sore breast, and her weakly infant not able to draw it, gave her strong and healthy child to draw it for her, at the same time taking her sister's weakly infant to her own breast. In a fortnight afterwards her breast became sore, and her child, previously a plump, healthy infant, became weak, sickly, emaciated, and covered with a copper-coloured rash. In August, 1837, she first con-

sulted me, and related that she and child had been under mercurial treatment, without, however, having been fully under its influence ; her child, six months' old, has, on the left cheek, a depressed ulcer, and close to the verge of the anus a soft, condylomatous excrescence has existed for some time ; on examining the mother I find there exists at the angle of her mouth a fissure extending outwards, and on turning out the lip, a hardness is to be felt of the mucous membrane immediately around it. To the child I gave hydrargyrum c. creta, one grain twice a day, and directed black wash to be applied to the affected parts ; under this treatment the child recovered ; I could not prevail upon the mother to take any mercury ; the sore lip became worse, and in September, 1837, she consented to be put under a course, the mercury quickly affected her, there was a great degree of ptyalism ; she could not be persuaded to continue its use. At the time she was taking the mercury she was pregnant, and miscarried, giving birth to a putrid child. In a year afterwards, (September, 1838,) she gave birth to a living and apparently healthy child ; in a few weeks it was brought to me, having a copper-coloured rash on its thighs and buttocks, before the appearance of the eruption the child was constantly crying, losing flesh, and refusing the breast. I now insisted upon the mother taking mercury, and prescribed half a drachm of mercurial ointment to be rubbed in night and morning. In a week's time the child was evidently worse, I desired the mother to continue rubbing in the ointment, and to bring back the child in another week ; she did so. The child presented the most worn out, emaciated appearance possible, with features so attenuated as to resemble extreme old age. I now put the child under mercurial treatment ; in a week's time there was the greatest improvement. While taking the mercury, the local symptoms would disappear ; as soon, however, as it was omitted, a spot or two re-appeared ; this occurred several times. At present the child, two years' old, is quite well, the mother also. Her husband has been quite free from any venereal symptom at any time : he has taken no mercury.

CASE III.—Mary Fay, æt. 25, servant to Anne Gerrard, contracted a sore lip from drawing the breast of her mistress; the nipple was ulcerated at the time; in a few weeks afterwards a scaly eruption appeared on her forehead and scalp; she also had a sore throat. When she consulted me (September, 1838) she had a node on the shin, and pains in her limbs; she also previously suffered from two miscarriages, and had taken mercury irregularly, and without ever been properly salivated.

I advised her to take more mercury, so as properly to affect her mouth; she did so, and in (November, 1839) one year after the mercurial course, she gave birth to a healthy infant; up to the time I write this (January, 1841) the child is healthy. Her husband never had a venereal symptom, nor took a grain of mercury.

CASE IV.—Mary Carberry, æt. 60, a midwife, attended Mary Fay, in September, 1837, and delivered her of a putrid child, at about the seventh month. At the time of her attendance she had a scratch on the palm of the hand, which, in three weeks, had degenerated into a foul ill-conditioned ulcer, attended with swelling of the surrounding parts. It was treated locally with black wash and mercurial ointment; eight weeks afterwards she came to the Dispensary with iritis, and papular eruption. While this woman was under treatment for the sore hand, and before the appearance of constitutional symptoms,

CASE V.—Thomas Carberry, æt. 56, her husband, had the most severe phagedenic ulceration of the prepuce, by which it was entirely destroyed. This was followed by a general crop of papular eruption, which resisted treatment; he was nearly five months before he was quite well; he declares he had no intercourse with any woman but his wife.

The above cases have been under my observation for more than three years, and up to the present all venereal symptoms are absent. The different modes in which the disease has been communicated to the several individuals above recorded may be thus briefly recapitulated.

A healthy child is applied to the breast of a venereal nurse, in a couple of weeks syphilis shews itself in the child. A venereal child is applied to the breast of a healthy woman, soon afterwards she gets a syphilitic sore of the breast, which contaminates her system. A servant girl sucks a venereal sore breast, she gets a venereal ulcer of the mouth, which taints her system. The midwife has a slight scratch on the palm of the hand, and in delivering a putrid venereal child, she gets a sore on the hand which infects her system ; and lastly, the husband of the midwife is diseased at the time the ulcer exists upon his wife's hand. The husbands of Duffy and Fay had not a single syphilitic symptom, nor did they take any mercury. The only inference I think warranted from the above cases (differing from the received opinions) is, that when the death or disease of the children has been caused by a syphilitic taint in the mother, not received from the male parent, it is not necessary to subject the latter to a mercurial course. A reference to Doctor Collis's Practical Observations on the Venereal Disease, in his chapter on Syphilis in Infants ; to some observations related by Doctor Beatty in the fourth volume of the Transactions of the King and Queen's College of Physicians ; to Doctor E. Kennedy's communications on this subject to the Pathological Society of Dublin ; and also, to Doctors Maunsell and Evanson's work on the Diseases of Children, will shew the importance of the facts narrated in this respect.

ART. VI.—*An Attempt to estimate some of the characteristic Marks, by which to judge of the Cause of Perforations of the Stomach.* By THOMAS WILLIAMSON, M. D., one of the Physicians to the Leith Dispensary, &c. &c.

It is not my intention, in the limits of this paper, to claim much of originality, or for one moment to innovate so far upon