

in THE LANCET, relative to your observations on the Hospital for Stone:—

“Being anxious to have accurate information as to the progress lithotrity was making in hospital practice in London while these pages were going through the press, I applied for information on this point to all the London hospitals, and was most obligingly and readily supplied with what I required from all, with the exception of the Hospital for Stone; the authorities of this hospital made no reply to my request. I must also state that the return from University College Hospital is not quite complete, as I failed to obtain any information from one of the surgeons of that hospital. If the numbers reported from University College Hospital be compared with those from other hospitals of the same size, it will be seen that the number of cases unreported cannot be large. The absence of information from one surgeon cannot in any great degree influence the result obtained by the subjoined table; from which it will be seen that out of 91 adult patients admitted in two years into the London hospitals with stone in the bladder, only 32 were treated by lithotrity: 6 underwent no operation.

Patients with Stone in the Bladder admitted into the London Hospitals in the years 1862 and 1863.

HOSPITALS.	Total.	Children	Adults.	Litho- trity.	Litho- tomy.
Guy's ... ..	31	15	16	7	24
St. Bartholomew's ... ..	25	16	9	3	22
King's College ... ..	22	7	15	9	13
London ... ..	17	5	12	2	15
University College ... ..	16	6	10	5	11
St. George's ... ..	13	2	11	3	8
St. Mary's ... ..	12	9	3	1	11
St. Thomas's ... ..	11	7	4	1	8
Royal Free ... ..	7	7	0	0	7
Middlesex ... ..	6	2	4	1	3
Westminster ... ..	5	3	2	0	5
Metropolitan Free ... ..	4	1	3	0	4
Charing-cross ... ..	3	2	1	0	3
Sick Children ... ..	3	3	0	0	3
Great Northern ... ..	2	1	1	0	2
	177	86	91	32	139”

The most absurd statement with regard to the supposed necessity of a special hospital for stone is reported to have been made at a previous dinner for the Hospital for Stone—namely, “That Sir Benjamin Brodie was so convinced that stone could not be treated in a general hospital, that he took a house in Lisson-grove in order that persons afflicted with this disease might be properly attended to.” It is hardly necessary for me to say that this statement is an entire fabrication. Almost the last professional act Sir Benjamin Brodie performed was to affix his name to the protest against special hospitals; remarking, at the time, that the absurdity of special hospitals had reached a climax when an hospital for patients afflicted with stone was established.

I am, Sir, your obedient servant,  
Savile-row, July 16th, 1864. CHARLES HAWKINS.

THE COLLEGE OF SURGEONS.  
To the Editor of THE LANCET.

SIR,—In continuation of my letter which you inserted last week, I beg leave to submit to your readers another analysis of the Council of the College of Surgeons—one showing the hospitals and schools represented at the Council-board, and the proportionate interest of each.

St. Thomas's has 4 representatives (South, Mackmurdo, Solly, Clark); St. Bartholomew's has 3 (Lawrence, Skey, Wormald); London, 3 (Luke, Adams, Curling); Middlesex, 2 (Arnott, Shaw); King's College, 2 (Partridge, Fergusson); Guy's, 2 (Hilton, Cock); University College, 1 (Quain); St. Mary's, 1 (Lane); Charing-cross, 1 (Hancock).

Although St. Thomas's stands first in number of medical officers, the Bartholomew's interest really predominates, and for the following reason:—Messrs. Hodgson, Kiernan, Paget, Busk (and I believe Mr. Swan also), the “unattached” members of the Council, were all educated at St. Bartholomew's, and have all revered its senior surgeon for so many years that they are at his beck and call, and cannot shake off the

trammels he artfully throws around them. As if this were not enough, however, we have Mr. Arnott and Mr. Partridge, who were both educated at Bartholomew's, and whose interest also goes with the predominant party; Mr. Arnott because he is a life member and a member of the Dental board, and is thus brought into close connexion with Mr. Lawrence, and Mr. Partridge because he is led captive *volens volens*.

It will be evident that before any good can be expected of the Council this preponderating element must be eliminated; but at the same time it will be absurd to raise any other hospital to the same position. It may be doubted, therefore, whether we did wisely in adding to the St. Thomas's and the London interest at the last election, although certainly the best of the candidates were chosen. My object in writing now is to suggest the propriety of candidates being brought forward next year to assist in this equalization, and I may venture to suggest three gentlemen for the purpose.

The only metropolitan schools unrepresented on the Council at present are St. George's and Westminster, and I would therefore take the leading surgeon of each, Messrs. Prescott Hewett and Barnard Holt, for two of the candidates. The first of the schools having only one representative is University College, and I would therefore take Mr. Erichsen for the third name. As regards these three gentlemen, there can, I believe, be but one opinion as to their fitness for the office, both from their positions as leading hospital surgeons, and their status as practitioners. Mr. Erichsen has also proved his liberal views by taking office at the College of Physicians, and would therefore be of material assistance in the propagation of correct views as to medical education, to say nothing of his being the author of the standard work on Surgery, which, by the way, it is the custom for some of the learned examiners to sneer at.

In my enumeration of Liberals and Conservatives last week, I included all those recently elected amongst the former class; but if many more months are allowed to pass without some move in the direction of change of examiners, I fear we shall be obliged to class them all as Conservatives. Would you allow me to suggest to those gentlemen who are on the Conservative side, that if they wish to “conserve” their seats at the Board (which are most certainly doomed at present), the only way for them to show that they have embraced Liberal views will be by opposing the re election of the examiner whose quinquennial period next comes round. Such a re-election must soon occur, and the voters on each side are pretty sure to be published; therefore by their fruits we shall know them.

Yours obediently,  
F.R.C.S. by Exam.

July, 1864.

VENEREAL IN THE ARMY IN IRELAND:

MERCURIAL *versus* THE CONTRARY TREATMENT.  
To the Editor of THE LANCET.

SIR,—A few words about venereal in the army here, more particularly at present, when the disease is becoming worse and worse. Huddled together, sometimes as many as twenty in a house, in the neighbourhood of the Royal Barracks, Dublin, the women live in filth, communicating the vilest diseases (syphilis, gonorrhœa, and itch) to almost every soldier who shows himself in the neighbourhood; and it not unfrequently happens that on account of the time the poison has been latent in the system, and the hopes entertained by the soldier himself that “it is nothing,” when he does come to hospital he gets an attack of secondary disease before he is about to be discharged. When a battery of artillery of under 200 men is totally ineffective for more than three weeks in the course of the year, what must be the true state of things! It has been thought that as the Horse Artillery is hard worked, the men get out late and run off to the nearest brothel; get, perhaps, the worst form of disease, having no opportunity to select their loves, and this leads frequently to an ultimate break down of their systems.

At the present time the Curragh Camp is a hot-bed of disease; but the women there are cleaner than in Dublin. They have some little regard to cleanliness, and wash like dogs in the ponds on the common. The fashionable sore at present amongst the men is a thick, hard nodule, with the skin scarcely broken, nearly as often on the body or outside skin of the penis as beneath the prepuce, and discharging a thin fluid quite unlike that of pus. This may be traced to a certain part of the Curragh—“the gibbet's rath.” The men think it is nothing, and the result of which is in the long run secondaries, ulcerated throats, rheumatism—probably attributed frequently to other causes, and, in fact, making the man's face as familiar to the regimental surgeon as the “morning state.”

Whether mercurial or Drysdale's treatment lately published is the correct one, cannot, I think, be yet decided; but of all preparations, Ricord's pet one—the "iodide of mercury"—is the mildest, and never appears to do any injury: one grain only twice a day for the first week or ten days, and then reduce to one grain once a day. In the case of the hard nodule-like sores, any local application, besides plenty of soap and water before the internal remedy has taken a little effect, I have found useless. The iodide given as above seldom or never produces salivation, and not often sore gums; but a difference is observable in the sore in a short time. Ricord generally gives iodide of potassium for a time as soon as he omits the green pill. The ordinary sores discharging matter give but little trouble, and the sediment of the black-wash applied locally, and a few pills internally, generally prove effective. These last-named sores are frequently accompanied by gonorrhoea, swollen glands, &c., and may be traced to the opposite side of the camp (Kilcullen). The more fashionable army sore is like that spoken of by Lee and Ricord, and is the dangerous one which may ultimately assist in tilling the wards of Netley, supplying Professors Longmore and Maclean with cases for the benefit of the students—more, certainly, than they may require, and more even than the Government can afford to pay for; and such cases, unless some remedy be shortly adopted, will increase in proportion like the population of the Great Salt Lake city.

I am, Sir, your obedient servant.

The Curragh Camp,  
July 13th, 1864.

H. B. FRANKLYN, Surgeon,  
1st Batt. 10th Regiment.

## TREATMENT OF MEDICAL OFFICERS IN THE ROYAL NAVY.

To the Editor of THE LANCET.

SIR,—The following circumstance will give the profession some idea of the manner in which medical officers in the Royal Navy are still treated. H.M.S. — was, some months ago, docked at Malta, and her officers and men were hulked in the *Hibernia* receiving ship: the three lieutenants, master, paymaster, and subaltern of marines were accommodated with fine airy cabins in the ward-room, on the middle deck, but the surgeon and assistant-surgeon were given wretched dog-holes, misnamed cabins, two decks below, in the cockpit; the surgeon's so-called cabin was *next the prisoners' cells*, while the assistant-surgeon's was so infested with bugs and vermin that he was fain to sleep in a hammock. The surgeon is the senior officer in the mess, but *cui bono*?

The Admiralty altogether ignore the relative rank of medical officers. The Royal Warrant of 1859, which we had fondly looked on as our Magna Charta, has been violated again and again, so that scarcely a vestige of it now remains.

I am, Sir, your obedient servant,

July, 1864.

FABIUS.

P.S.—I enclose my card and vouch for the correctness of the above statement.

\* \* The medical officers of the navy seem to share the ill-treatment of the medical officers of the army. The medical profession is unfortunately not represented in Parliament, or this disgraceful state of things could never have been brought about, and certainly could not have lasted. It is only by determination on the part of the profession that any amelioration can be expected. By continuing to refuse to enter the services on present terms, they will undoubtedly be able to obtain the treatment of gentlemen, and the remuneration due to their important services and laborious scientific culture.—ED. L.

## THE FELLOWSHIP OF THE ROYAL COLLEGE OF SURGEONS.

To the Editor of THE LANCET.

SIR,—The letter of Mr. Clarke in your last week's impression conveys, I am sure, the feelings of many medical men, more especially those practising in rural districts, far removed from every opportunity of two or three years' further attendance at a recognised hospital. At present, to us, all hope of further advance is at an end so far as the acquirement of medical or surgical degrees is concerned: we have come to a full-stop—the goal is reached. At my examination at the College, having finished my "first table," the examiner inquired what were

my intentions as to the future. I replied, "I intend settling down in country practice." "Well," said he, "I suppose then you will never look at another book of anatomy in your life." Such, I believe, is often the case: practice becomes a daily routine. No encouragement is offered for further perseverance in the pursuit of professional knowledge. Formerly St. Andrews was open to us, but now the portals of that University are closed against non-residents. I believe that were the fellowship open to members of four or five years' standing, a large number of well-read and thoroughly practical men would be found willing to undergo ever so severe a test of proficiency, who would gladly avail themselves of the chance of adding to their professional status by becoming Fellows of the College of Surgeons. At present, none but the favoured few are admitted—such as have had the time and means of making a protracted sojourn in the hospital wards. Many are daily performing the duties of hospital or dispensary surgeons, doing the most trying and hazardous operations on the living subject, who are, according to the present stringent regulations, precluded from presenting themselves for examination for this diploma.—I am, Sir, your obedient servant,

July, 1864.

M.R.C.S. & L.A.C.

## POISONOUS SHEEP-DRESSINGS.

To the Editor of THE LANCET.

SIR,—I have endeavoured at various times to draw attention to the evils arising from the use of arsenic and mercury in sheep-dressings. These and other agents poisonous to man and animals can be entirely superseded by products alone destructive to parasites. There are many sheep dips sold under a great variety of names, and all mixtures of arsenic, soda, ash, and sulphur. Thousands of sheep poisoned with mercurial ointment are sold annually in the meat markets, and cases of injury to man and animals, by arsenic and mercury, direct and indirect, are by no means uncommon. It has occurred to me that analyses of sheep-dips and cases of poisoning, &c., could be published in THE LANCET in the form of the Sanitary Commission articles. They would probably lead to legislation, with a view to prevent the sale, especially, of the hundreds of tons of arsenic annually distributed over this country, and which should not be placed in the hands of the persons who use it, and who are ignorant of its destructive properties.

Should you consider this subject worthy of your columns—the object being the danger incurred more by human beings than the lower animals,—I shall be most happy to aid anyone you might entrust with the analyses, &c. Dr. Hassall could throw much light on it.

I am, Sir, your obedient servant,

New Veterinary College, Edinburgh, July 9th, 1864. JOHN GAMGEE.

\* \* The subject referred to in the above communication is important, and we will willingly publish the results of any investigations which Mr. Gamgee may furnish.—ED. L.

## PURPURA HÆMORRHAGICA.

To the Editor of THE LANCET.

SIR,—Possibly you may consider the following case sufficiently curious to deserve recording:—

On the 24th ultimo I was called to see a woman, aged forty-five years, married, but who had never become pregnant. She was complaining of feeling generally ill, and of great pain in the back. She thought she had taken a violent cold. Her pulse was weak and thready, 110; her tongue coated and white; her skin slightly above the natural temperature. On her chest were two or three small vesicles, also a few on one of her arms, resembling a good deal the early eruption of variola. On the internal aspect of the thighs, where they touched as she lay on her side in bed, was a purple patch, composed of small hæmorrhagic spots, not disappearing on pressure. She was ordered some saline medicine, with an aperient and beef tea; and a guarded opinion was given. This was about twelve o'clock in the day. The next morning, about ten o'clock, I was sent for, as she was "bleeding to death." She was of a dusky-purple colour all over; blood was dropping freely from her mouth, both by oozing and by expectoration; from her ears, from her conjunctivæ (very freely), from her nares, and was "pouring" from her vagina and rectum. Large râles were heard at some distance from the bed; she was covered with cold perspiration; her pulse was imperceptible at the wrists; in fact, she was dying. She was ordered brandy, and a mixture with gallic and