

and damage the public health, by assuming false titles, and practising accordingly." Now, there is an individual of such a kind in this neighbourhood, who has been for some time practising with a diploma, obtained by another individual, who assumed his name. I wrote to the secretary of the Edinburgh College, offering him full and efficient proof to lead to a conviction, but my letter was not answered. Under such circumstances, what are medical men to do?

I am, Sir, your obedient servant,

Warkworth, Jan. 1848.

THOMAS LEITHEAD.

\* \* Our correspondent has not stated to whom he addressed his letter—to the Secretary of the College of Physicians, or to the Secretary of the College of Surgeons of Edinburgh; and he has also omitted to state to which of those colleges the impostor professed to belong. Probably the information he sent to the College was insufficient.—Ed. L.

## CHLOROFORM—ITS BENEFITS AND ITS DANGERS.

To the Editor of THE LANCET.

SIR,—Every week the medical periodicals have been teeming with cases of the most diversified description—surgical operations, major and minor, performed on individuals of every age and constitution, from the infant in "the nurse's arms" to the infirm and old, where it has been employed with the happiest effects. In obstetric practice, in natural labour, and in cases of the most protracted and formidable description, (until quite recently) nothing is reported to have occurred to mar the expectations of its most sanguine advocates. This appears the more surprising, when we consider it is so powerful an agent, and so unsparingly used in respect to quantity and time. The experiments performed with it on the lower animals, by Mr. T. Wakley, as reported in THE LANCET—a few of which I have repeated with similar results—demonstrate that the inhalation of a slight overdose speedily produces congestion in the heart and large bloodvessels, and terminates in death. The general results of these experiments do not warrant the belief that it can be safe to keep a patient under its effects for ten, twelve, and fourteen hours, as Professor Simpson reports to have done. The question must be decided by experience, and it is to be hoped that we are not presented with the fair side of the picture, while the dark and forbidding shades are studiously concealed. The legitimate use of chloroform will, undoubtedly, be a boon to suffering humanity, the extent of which it is not easy to estimate; but in the hands of the ignorant and daring it may be the source of much mischief; while the cowardly assassin will find in it a sure and subtle means of perpetrating his "deeds of darkness."

In performing many of the minor operations, I have used chloroform, and, with one exception, with the usual success. In the instance alluded to, the patient, a boy, nine years of age, had sustained an extensive lacerated wound in the face, extending from the commissure of the lips upwards and backwards. Before proceeding to apply sutures, &c., I administered, by inhalation, forty drops of chloroform, which induced *syncope*. The wound was in the meantime dressed, but the extremities were cold, and a considerable time elapsed ere the pulse was perceptible at the wrist. The effects of a larger dose in this case it is not difficult to guess. Possibly some of your correspondents would be kind enough to state, through the medium of your journal, from their experience—1st, To what extent, at one inhalation, chloroform could with safety be administered to an adult? 2nd, What the symptoms of an overdose are? and 3rd, By what means its effects could be counteracted? By so doing, I doubt not many of your numerous readers would participate in the obligation with your most obedient servant,

Bannockburn, Feb. 1848.

ROBERT SELBY.

## THE FATAL TOE-NAIL OPERATION AT NEW-CASTLE.

REMARKS ON THE OPERATION.

To the Editor of THE LANCET.

SIR,—On perusing the details of the late fatal case at New-castle, I was greatly surprised to find that the exceedingly painful operation of removing the toe-nail by the semi-circular incision was had recourse to, instead of the more simple operation which I introduced some years since, and of which at the time a full account was recorded in THE LANCET. In remarking on that unfortunate case, I shall not allude to the cause of death, leaving that important question to abler and more competent individuals, but solely to the operation itself, which I regard as barbarous, exquisitely painful, and totally unnecessary. The operation by the semi-circular incision consists in making a semi-circular

sweep with the scalpel around and beyond the matrix or root, followed by the tearing away of the entire nail; in addition to the extreme pain attending on this proceeding, the part on which the operation is performed is left in a tender and unprotected state until the cuticle become sufficiently indurated to serve as a sort of covering for the exposed structure. I have frequently demonstrated, and daily experience confirms the fact, that my operation may be performed without giving the patient pain, at least so little, as in no instance to require the use of ether or chloroform.

"The operation which I have practised for many years consists in the dissection of the horny structure of the nail from the epidermis to which it adheres. I commence by firmly laying hold of the lateral and under parts of the ball of the toe with the thumb and fore-finger of the left hand, so as to draw the flap away from the nail; I then pass a steel probe, made for the purpose, between them and round the epidermis, at the root, so as to loosen the skin from its adhesion to the nail; then, with an instrument made similar to a cataract-knife, but much thicker and shorter, I dissect the piece of nail from the skin by small incisions following each other. This part of the operation must be done carefully and slowly, beginning at the top of the nail beyond the point that is imbedded in the ulceration, the edge of the instrument being inclined outwards. As soon as the part can be laid hold of with a pair of sliding forceps, it should be enclosed, held firmly with the thumb and finger, and then turned gently outwards, in order that the dissection may be carried on to the semilunar fold; the piece may then be pulled out, but if it should adhere to the skin, the knife must again be used to detach it; if the skin is loose and rises with the nail, it may be cut off. In many cases this operation can be performed without inducing hæmorrhage, and if the disease has existed for any length of time, the nail will be more easily removed, as the ulceration will have destroyed the soft parts to which it adheres, and the nail is much sooner separated. The after treatment consists simply in the application of caustic until the fungus is destroyed, and of lint, wetted with cold water, round the parts. The relief is so instantaneous, that the patient can always walk about immediately after the operation.—I am, Sir, your obedient servant,

Old Burlington-street, Feb. 1848.

L. DURLACHER.

## ATTENDANCE OF MEDICAL PRACTITIONERS AT FUNERALS.

To the Editor of THE LANCET.

SIR,—I shall feel obliged should you or any of your correspondents let me know, through THE LANCET, if it is strictly professional that medical men should attend every funeral which takes place within ten miles of their residence, and especially make themselves very prominent and conspicuous as pall-bearers, as one among the many methods adopted of gaining professional notoriety.

I am, Sir, your obedient servant,

January, 1848.

A SCOTCH COUNTRY PRACTITIONER.

\* \* The waggish remark has been made, that "a doctor in attendance at a funeral is like a tailor going home with his work." The practice described by our Scottish correspondent is certainly not creditable to the profession resident in his neighbourhood.

## THE SANITARY MOVEMENT.—PROPOSITION FOR REPORTS OF FEVER CASES FROM RURAL DISTRICTS.

To the Editor of THE LANCET.

SIR,—The sanitary movement, which progresses so satisfactorily in our larger communities, is, unhappily, too limited in its projected application. The evils dependent upon former inattention to sanitary measures are, in cities and large towns, most marked, on account of the aggregation there of the victims of overcrowding, filth, and inefficient drainage and ventilation; but it is a fact, as yet comparatively unknown or unheeded, that villages also experience an amount of depopulation which wholesome legal enactments would tend greatly to diminish. It is only on account of its widely-spread diffusion that the extent of preventible deaths, in rural districts, has not received the attention it requires at the hands of sanitary reformers; for were the isolated cases collected into one whole, they would be found to present an alarming proportion to the general list of mortality.

Impressed with this conviction, I have resolved to appeal (which I do most earnestly) to my brother country practi-