

I presume that sufficient has been said to satisfy your readers of the truth of my assertion. I will, however, before closing this article, mention, as briefly as possible, two cases of dislocation of the os femoris on the dorsum ilii, which occurred in my own practice, and which I reduced in the above-mentioned manner.

CASE I.—Some time in 1836, I was summoned to visit Josiah Atkins, of East Granville, who, by falling forward with great violence, from a wagon, and receiving the wagon load of bags of grain upon his back, not only badly fractured his skull which came in contact with a rock, but also dislocated his os femoris upon the dorsum ilii. The patient presenting every symptom of pressure on the brain, I immediately applied the trephine, and elevated the depressed portion of the skull. This operation having resulted favorably, the next day I reduced the dislocation thus. The patient having been firmly secured upon a table, standing on the well side I took hold of the knee with my left hand, and grasped the ankle with my right. Then, flexing the leg on the thigh to about a right angle, by means of the leg as a lever, I rotated the femur on its axis to loosen the head of the bone, at the same time flexing steadily and strongly the thigh upon the body. This, my first attempt at reducing a dislocated thigh, was immediately successful. The patient is still living.

CASE II.—Oct. 9th, 1844, I was called to visit a Mr. McGregory, in West Springfield, who had dislocated his thigh on the dorsum ilii. I reduced the dislocation in the same manner as in the first case, by using slight extension, and flexing and rotating the thigh as above described.

Allow me, in conclusion, to refer any of your readers who may desire further information on this subject, to Smith's Medical and Surgical Memoirs, where they will find a very full and accurate description of this method of reducing a dislocated os femoris, and also three lithographs showing the operation at different stages of its progress.

Springfield, Mass., Sept. 23d, 1851.

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THE HOSPITALS OF PARIS.

[Communicated for the Boston Medical and Surgical Journal.]

By a decree of January 10th, 1849, everything relating to public assistance has been placed under a special board, or administration, called *Administration Generale de l'Assistance Publique à Paris*. It is under the control of the Minister of the Interior, and is managed by a director and a council of twenty members. The presidents are prefects of the Seine and of Police. The change effected at that date had but little to do with the immediate arrangements of the hospitals themselves. This administration is confined to civil hospitals. The military establishment is entirely distinct, and under the military administration.

Applications for admission into the hospitals are received at the *Bureau Central d'Administration*, but any physician or surgeon can receive a patient into his wards at the time of his regular visits; and the rule is not so construed as to prevent the admission of patients by the internes

at any time in cases of emergency. The *Bureau Central d'Administration* is composed of twelve physicians, and six surgeons, who relieve each other by rotation. From this body the hospital physicians and surgeons are selected when vacancies occur. They are elected for five years, but their appointments are always renewed. No one can obtain a place at the hospitals until he has first been elected to the *Bureau Central*. This board indicates the hospital to which the patient may be admitted; they give gratuitous advice to the indigent, and children are vaccinated here on Thursdays and Sundays, at certain hours. To secure the practice of vaccination, and its consequent protection, three francs are paid to the parents for every child vaccinated, and children that have not been vaccinated are excluded from the free schools of Paris.

The civil hospitals of Paris are divided into three classes, viz., 1st, *general hospitals*; 2d, *special hospitals*; and 3d, *hospices*, or institutions similar to our almshouses. These institutions have a uniform arrangement of officers, which consist of—1st, *a director*. 2d, *surgeons and physicians*, who are obliged to make a daily morning visit to their patients. They are allowed two or more *internes* and *externes*, according to the extent of their service, one *student of pharmacy*, a *nurse* for each ward, and a *sister of charity* for each service, male or female. To be eligible a physician must be 35, and a surgeon 30 years of age. Their salary varies from 600 to 1800 francs, according to the time they have been in the service of the administration. 3d, *apothecaries*. 4th, *internes*, or resident physicians. 5th, *externes*, or dressers. 6th, *students of pharmacy*. All the principals in each department are elected by concours. The sisters of charity are attached to some religious society. They profess to have retired from the world for the purpose of devoting their time to acts of benevolence. They are found in nearly all the hospitals of Paris, civil and military, where they officiate in the capacity of nurses to the sick and wounded. There is no extent of care for these miserable inmates that they are not ready to assume, and in many instances they act the part of relatives to the sick and dying. I have more than once seen the good sister manifest all the tender interest for the dying stranger that could be expected from a sister indeed. To them is entrusted the whole care of the wards in the absence of their medical attendant.

The number of hospitals under the direction and care of the council general of public assistance is *twenty-six*. A new establishment was commenced under the reign and auspices of Louis Phillipe, which was to have borne his name, but which is changed to *Hopital de la Republique*. When completed, this will be the largest hospital in Paris, and is to receive the patients of Hotel Dieu, while that pile of buildings is undergoing repairs.

1. The *general hospitals* are open to those persons whose diseases do not render treatment at special hospitals more proper. Of these the Hotel Dieu and La Charité are the principal.

2. *Special hospitals* are appropriated to patients afflicted with particular diseases, such as scrofula, syphilis, cutaneous and mental diseases.

3. *Hospices*, or almshouses. It appears from the last returns that the

hospitals and hospices of Paris support each year (in round numbers) 12,000 aged and infirm men and women, and that they receive annually 80,000 patients, of whom 5,200 are always under care or treatment. Of children, there are yearly received 4,600, and 12,000 are always out at nurse in the country ; 500 are apprenticed yearly. Besides this, the hospital directors grant relief yearly to 80,000 indigent persons. The number of beds in the hospitals is 6,574, and it is seldom that one remains a day unoccupied.

There is much system and economy in the management of the various hospitals. The bread used in all the hospitals of Paris is furnished from an establishment situated in the Place Scipion, on the south side of the city, adjoining Clamart. Enough is supplied every morning for about 12,000 persons. All employed in the hospitals receive their supply from here, as well as patients. The annual consumption of bread and flour amounts to nearly 8,000,000 pounds. The flour from which this bread is made, also the wine used, is admitted into Paris free from the octroi or city duties. The wine is purchased in large lots on advantageous terms, and is deposited in vaults under the bureau central, from which place it is distributed to the various hospitals. The annual quantity consumed amounts to about 1,500,000 quarts. The difference in the kind of stimulants used in the French and British hospitals is quite apparent. In England porter is the principal stimulant. I could not but think that a little less of these articles in European hospitals would do quite as well.

Among the special hospitals is one appropriated to the treatment of diseases of children—*Hopital des Enfants Malades*. The number of beds in this hospital is about 600, all of which are at this time occupied. I am told that so great is the care bestowed by the officers and other attendants at this establishment, that many persons seek admission for their children who would not otherwise do so. It is quite novel to see so much order prevail in an establishment appropriated to the treatment of such numbers of young persons. So assiduous is the care of the sisters here, that but little more confusion prevails, than in wards occupied by adults. The grounds are spacious ; the buildings surround a large space, which is planted with trees and shrubs, and in which various appliances for recreation are erected.

Hopital St. Louis is the largest of the special hospitals. It is mainly appropriated to the treatment of cutaneous diseases and scrofula, but it receives acute diseases and surgical cases. A large number of cholera patients were treated at this hospital. The bathing apparatus is here most ample. It has a vapor bath so arranged as to serve eight persons at the same time in distinct entries. More than 25,000 persons availed themselves of these baths during the last season.

The *Hopitals du Midi* and *Loureine* are appropriated to the treatment of syphilis. The former for males and the latter for females. Each has 300 beds, and always full.

The *Salpêtrière* may be ranked among the hospices. These immense buildings occupy the former site of a saltpetre manufactory. The hospital is 1680 feet in length and 1164 in breadth. It is now exclusively

appropriated to the reception of women, who are divided into three classes—1st, *reposantes*, or aged officials of the hospitals; 2d, indigent persons, divided into valid inmates, or afflicted by old age only—infirm, decrepit and incurable patients; 3d, epileptic persons and lunatics. The total number of beds is 4,438, the municipal council having recently suppressed 500 of them in order to apply the means resulting therefrom in a more economical form to out-door relief.

The number of beds occupied by lunatics, idiots or epileptic patients, is 1,470. The lunatics, of which three fifths are dangerously mad, are kept in separate infirmaries, and treated with the greatest care and attention. Sewing is encouraged among them to such an extent, that in one month 48,000 military sacs are said to have been completed. The harmless are allowed to amuse themselves in various ways; the principal occupation in which they are encouraged is gardening, the salutary effects of which are supposed to favor their recovery.

I do not pretend to have given you a description of all the hospitals of Paris, but have selected the principal ones, and such as will serve as an index to the remainder.

C. B. CHAPMAN.

Paris, August, 1851.

STRICTURE OF ŒSOPHAGUS.

To the Editor of the Boston Medical and Surgical Journal.

DEAR SIR,—If you deem the following account of a somewhat rare disease, worthy of a place in your Journal, you will please insert it. To me it has been a very interesting case. Other members of the profession have requested me to communicate it to the Journal, and I accordingly accede to their wishes.

In September, 1850, I was consulted by Mrs. W. concerning a trouble about her throat, attended at times with considerable difficulty of deglutition. On examination, discovered general inflammation of mucous membrane of fauces. Applied nit. arg. in sol.; also ordered an astringent gargle—which treatment gave relief. In October was called again for the same difficulty. Treatment as before, with the same result.

She was again attacked in January, 1851, with inability to swallow, and what appeared to be a depression, or “run-down” state of the system. She had been subject to considerable mental anxiety; had worked very hard, and was not over careful about exposure to cold. She was occasionally able to swallow fluids—and then could not do so for some days. Treatment—alteratives, tonics, nervines, &c.; nit. arg. in sol. to throat. Introduced a probang into the stomach. Found stricture a few inches from the commencement of the œsophagus, not, however, very severe. Introduced the probang at different times. In a few weeks, after being reduced somewhat, she became quite well, and gained flesh and strength, but was not able to swallow much, except semi-fluid diet.

She was again attacked in June. I was from home. Dr. Jenkins was called, and subsequently Dr. Shove in consultation. I was again called August 15th. Found her exceedingly emaciated; had not swal-