

were simply turned into these drain-pipes, without any attempt whatever at connexion having been made. In two instances an inch and a half pipe was turned into a six-inch pipe, thereby allowing ample space for the untrapped sewer gas to escape into the house.

Defect No. 4.—The overflow-pipe from a cistern, and the waste-pipe from a lavatory, were connected to an untrapped, unventilated soil-pipe, and through these untrapped pipes the sewer gas was literally blowing into the house.

Every one of these sanitary defects is in direct violation of the building bye-laws of Leeds. The plans of every new building or of any alteration of an old building have to comply with the bye-laws, and are passed after careful inspection by the surveying authority. And what next? Dishonest speculators, dishonest builders, dishonest contractors may scamp every sanitary requirement, as no effective machinery is provided to secure that these requirements ever reach any stage beyond the paper on which they are drawn. Houses are built, and let, and sold, for what the speculators can get out of them, and in nine cases out of ten the sanitary flaws are not discovered until they have worked their natural results in the illness, or perhaps the death, of the unfortunate tenants. Scamped drain-work is one of the most dangerous, one of the most common, and one of the most difficult to detect of the sanitary flaws of new buildings, and is rarely found out except by the illness it produces. We must not rest content until it shall be compulsory on every sanitary authority to provide that the laying of every drain shall be watched from beginning to end by a competent inspector who has the independence, the courage, and the honesty to compel, in every case, sound, reliable workmanship.

I am, Sir, yours faithfully,

Leeds, August 3rd, 1876.

T. PRIDGIN TEALE.

PREGNANCY WITH UNRUPTURED AND IMPERFORATE HYMEN.

To the Editor of THE LANCET.

SIR,—Thinking that the following notes of a case of pregnancy and commencing labour complicated with an unruptured and imperforate hymen, may be interesting to your numerous readers, I beg to forward them to you for insertion should you think them worthy of a space in your journal.

On the 25th of last month I was sent for to see a patient who stated that she was unmarried, that she had ceased to menstruate since last December, and that from that time her abdomen had gradually increased in size. She was now evidently in labour; her uterus, from its size, apparently containing a full-term child. An abdominal examination gave all the signs of pregnancy at full term, and her labour-pains were strong, regular, and occurring every ten minutes. On attempting to make a vaginal examination I could not introduce my finger more than one inch beyond the orifice, where it came on a tough resisting membrane. The external parts up to this membrane were rather dry, and my finger was not stained with blood. I introduced a speculum, and then discovered a complete hymen stretched across the vagina, having a median raphe, with a small hole in the raphe at about the junction of the middle with the anterior third of its distance in the conjugate diameter. The opening was about the size of the urethra, and from it flowed a little normal blood and about a wineglassful of fluid looking more like aqueous humour than anything else. I feel persuaded I made the hole myself when introducing the speculum, as up to that time neither blood nor discharge of any kind could be detected in the parts below the membrane. I sent for the house-surgeon (Mr. Edwards), and with his assistance the patient was placed on her back, and, a catheter being first introduced into the bladder, a pair of scissors was inserted into the opening in the hymen, and the membrane afterwards torn by the introduction of two fingers. The foetal head could then be felt dilating the cervix uteri to about the size of a florin. The patient was then sent home in a cab, and about three hours afterwards was delivered of a healthy male child. I should state, that though the hymen was quite perfect, the carunculæ myrtiformes were very plentiful all

round this septum about one-eighth of an inch from its point of union with the vaginal walls.

The girl, after repeatedly disowning any knowledge of her condition, confessed to having had sexual intercourse about last November. Connexion, she said, was very painful and difficult. Her catamenia had been regular all her life up to this pregnancy, and she volunteered the statement that her sufferings at those times were quite as great for three days as her pains when I had seen her in labour.

Professor Gustave Braun, of Vienna, published (*Wien. Med. Woch.*, March 25th and April 1st) three cases of pregnancy with unruptured hymen. These cases are to be found transcribed into the *Medical Times and Gazette* of May 20th, 1876. But these examples differ from mine, inasmuch as though the hymen was in these three unruptured, it was in none imperforate.

I would suggest that ever since last December, not having menstruated, the small opening which she must have had at the time of sexual intercourse had had time to close by healing, and it is not, perhaps, too much to presume that the pain at her menstrual periods, which, by-the-by, was worse on the day preceding the discharge, was due in great part to the fact of the imperforate character of the hymen, which had closed over since the previous catamenia four weeks ago.

I remain, Sir, yours truly,

E. J. BURGESS, M.R.C.S.E., L.R.C.P.L., & L.M.,
Midwifery Assistant, St. Bartholomew's Hospital.

August, 1876.

THE BRUSSELS EXHIBITION.

(From our Special Commissioner.)

No. III.

In the last letter I dwelt especially on the exhibits in Classes 4 and 8. I now propose to give some account of the exhibits which are of a purely hygienic description, and which are included in classes

5. Hygiene and public health.

6. Industrial hygiene. This class includes not only such things as miners' lamps and protective masks, but also apparatus for lessening the risks with machinery of all kinds.

7. Domestic and private hygiene.

9. Institutions having for their object the amelioration of the condition of the working classes.

10. Hygiene in its relations to agriculture.

I need not weary the reader with a detailed description of all these classes, but shall merely mention anything which seems worthy of attention.

While looking at this large and important show of domestic and other sanitary appliances, it struck me as a remarkable fact that the arrangement of the Exhibition had not been by class rather than by nation. There is little in common between the things which are placed, very often side by side, except the not very important fact that they were made in the same country. If all exhibits in the same class had been ranged together, the process of comparison would have been much easier, and the instruction conveyed by the show would have been so much the more forcible. Assuredly hygiene is one of those sciences which, like anatomy and theology, is susceptible of comparative study. The conditions of life in one country differ essentially from the conditions of another, and certainly much information may be conveyed by one nation to another by displaying the method of invoking the benign influences to counteract the malign ones. Thus Germany, surrounded by dangerous enemies, has not only learnt the art of war, but also has reached great perfection in alleviating the sufferings of the wounded soldier, as I had occasion to point out in the last letter. Russia and the Scandinavian countries are compelled to be very economical in their employment of fuel, and consequently they are far ahead of us in the science of warming their houses and the careful conservancy of heat. Holland and Switzerland, so widely different in their geological configuration, present to the engineer very different problems in the matter of drainage; while England,