

at the same time. The disturbance which always supervenes, as before said, in the early stages must be looked for and carefully watched. This, to anyone who uses Skinner's "open inhaler," is most difficult to carry out. To present four drachms under four minutes on a Skinner's inhaler to an inebriate patient is enough to tempt not only "fatty embolism of the capillaries of the lung," but every other organ to join in the "dance of death." I cannot find that any case of "fatty embolism of the capillaries of the lung," if left alone, dies *suddenly*, or that the same untoward result awaits "hypercarbonisation of the blood." It is to ask the profession not to look for post-mortem causes of death that I write.—I am, Sir, yours obediently,

Brook-street, W., Jan. 1884.

TOM BIRD.

ENLARGEMENT OF THE BURSA PATELLÆ IN CLERGYMEN.

To the Editor of THE LANCET.

SIR,—During the past year the three following cases have come under my care :—

A young man, about to take holy orders, consulted me in May last with sinuses in front of the knee-joint, the remains of a suppurated bursa patellæ, which had caused him much trouble and suffering for several weeks. The patient was put under ether, and the sinuses were freely laid open; recovery was complete in a fortnight.

A senior theological student who consulted me in October last had a painless enlargement of the bursa patellæ, brought on by careless kneeling. It was covered with iodine and was tender, with œdema around the joint. After rest and cooling lotions for three days, the aspirator was used, and three ounces of clear fluid were drawn off. Firm bandaging and rest completed the cure.

A clergyman, aged sixty-three, consulted me in December last about a slow painless swelling of the knee, which he had hurt lately; there was some bruising and œdema about the joint. After rest and cooling lotions two ounces of bloody fluid were drawn off and pressure applied; milder measures having failed, a large silk seton was passed through the sac. The part was then poulticed and the limb kept at rest. Recovery took place, with complete obliteration of the bursa, in a fortnight.

In all these cases there was a rough skin, with thickening over the lower part of the patella of the sound limb, caused by careless kneeling at devotions. It is strange that a disorder so common among housemaids should appear among the clergy, who should take care not to kneel without a proper cushion, or other convenience, easily obtained at the bedside of the poorest cottager, in the form of a folded up overcoat or rug.

I am, Sir, yours truly,

Cambridge, Jan., 1884.

GEORGE WHERRY, M.A.

SACCULATED BLADDER IN THE FEMALE.

To the Editor of THE LANCET.

SIR,—In THE LANCET of last week there appears an account of a case of sacculated bladder in the female, recorded by Mr. Cadge, who is good enough to refer to a case of mine which I exhibited before the Pathological Society in March last. If you could spare me a few lines there are one or two points in his remarks to which I should like to direct attention. In the first place, he says, "the report in the journals of this paper and discussion is very meagre"; but the full account of a case shown at the Pathological Society is never put in the journals, because it is always described *in extenso* in the Society's Transactions, and if Mr. Cadge will refer to the last volume, at page 146, he will find a full description of my case. Again, Mr. Cadge does not think the Guy's statistics represent the matter fairly, because a pathologist who examined every case carefully enough to give an opinion as to the sacculation would be "indefatigable." My only answer to this aspersion of the pathologists at Guy's is that those who made the post-mortems on which my statistics are based were the late Dr. Hilton Fagge and Dr. Goodhart, who are universally acknowledged to be indefatigable pathologists. Lastly, Mr. Cadge says of my case: "What I believe was meant was that stone and sacculated bladder in the female were never known to co-exist. This inference is, however, not correct." In the Pathological Society's Transactions I find my words are, "probably the

only two causes for it are spinal disease and inflammation from neighbouring parts." Mr. Cadge should refer to my paper and see what I said, and not form a conclusion as to what I meant from what he confesses is a meagre report. I nowhere denied the possibility of their co-existence. Furthermore, at the time I wrote my paper Mr. Cadge's case was not published, so that he can hardly urge that it was not correct to say that stone and sacculation were never known to co-exist. They were not at that time known to occur together on Mr. Cadge's own showing, for he says his case is the only one recorded.

I am, Sir, your obedient servant,

St. Thomas's-street, S.E., Jan., 1884. W. HALE WHITE, M.D.

RISKS INCURRED BY MEDICAL MEN.

To the Editor of THE LANCET.

SIR,—I hope you will allow an old member of the profession space for a few words on those lamentable cases which too frequently occur, the last being that of Dr. Haffenden. Few men have practised long without on some one or other occasion having felt thankful for their narrow escape from some pitfall. But the worst kind of traps are those met with in our professional intercourse with women, such as have within a few months been the unfortunate cause of two suicides.

A gentleman of long and honourable career is suddenly and publicly charged with something which, however innocent he may afterwards legally prove himself to be, damages him for life, if it does not bring utter ruin. He is suddenly put on the same footing as an habitual criminal. The accusation is enough; mud has been thrown, and some of it will stick. The "charitable" world will think, even when acquitted, that some foundation existed for the charge, and that the accused has been cleverly pulled through.

The spirit of the English law infers that a man is to be considered innocent until he is proved to be guilty. What a delusion! In some cases the charge is enough, and some professional brother finds himself punished by the public, although not even convicted. I earnestly direct attention to this point. In the confidential and delicate cases in which the physician is daily engaged, he should be protected from being held up to public indignation on the mere statement of some foolish or hysterical woman. Such charges should be first heard *privately* by the magistrate. Equal justice would be done without flaunting the accusation before the public, and if no conviction followed, the accused would not be much hurt. Magistrates should also consider the stake at issue, and that when it comes to a matter of mere assertion, the word of a gentleman and member of an honourable profession should be of more value than that of a person who may have some object to gain and nothing to lose. The charge is so easily made; the accused is generally astounded at finding one or two innocent incidences worked up into condemnatory evidence—and another person is ruined. The medical profession is, compared with the legal and clerical ones, in a very defenceless state. Much of this is owing to the sleepy condition of our corporate bodies. They neither protect the profession as a whole, nor its individual members when in difficulties. But our corporations could and should do something in this matter. They should use their influence to bring about some change in the inferior courts of law to afford their members an honest protection in those cases which originate in the necessary privacy of professional intercourse. If things are allowed to go on without change for the better, I am convinced that the medical profession will deteriorate. Gentlemen of honour and culture will not willingly enter on a course where they may at any time be tripped up by the unsupported lies of worthless people. In the end the public will suffer by this deterioration; and as THE LANCET is extensively read by the public, I will conclude by leaving this point for their due consideration.

I am, Sir, your obedient servant,

Barcelona, Dec. 28th, 1883.

HENRY WEEKES, F.R.C.S.

THE MEDICAL BENEVOLENT FUND.

To the Editor of THE LANCET.

SIR,—I have to acknowledge with most sincere thanks the following subscriptions and donations to the Medical Benevolent Fund, sent in answer to my appeal. I beg also