

and at the sly attempt to construe such absence into a systematic neglect of duty.

The writer, after ostentatiously exhibiting the several counts in his indictment, seeks to convey the idea that he has more complaints in reserve; thus he talks "of some of those evils existing," &c., and threatens to come into your pages with "facts of more importance" next season.

There is, Sir, a vulgarity, and little-mindedness in this *ruse*, which defeat its purpose; and therefore

"To be hated—needs but to be seen."

This literary cormorant complains that he neither gets a full nor a regular meal, and that a lecture—unless it occupy an hour in the delivery—is nothing worth. It is evidently the complaint of a very young man, who, in his next year's professional campaign, will, perhaps, wish he had been more prodigal of his hands and eyes, and cared less for indulging his ears. Midwifery, of all sciences, is a practical one; and the highest eulogy on the "Webb Street School" is to say, that untoward cases interfere occasionally with the hour of lecture. It cannot be insinuated that the recurrence of these cases is feigned, in excuse for absence; such an imputation would be as indelicate as I know it to be unmerited.

To secure Dr. Hopkins's presence and sanction in the lying-in-room, it is not necessary that each case should be difficult, it is sufficient that the attending pupil be young, timid, or unpractised. I speak from experience on this point; and when it is further recollected, that many of the Doctor's old pupils are settled in practice in and about London, who often avail themselves of his known readiness to assist them in cases of emergency, we may cease to wonder at his sometimes being unable to reach his post. The "Pupil" appears to be of walking experience. He will, therefore, thank me for recommending him occasionally to bend his steps to Queen Square, where cases are to be obtained very frequently, and where Dr. Hopkins's clinics almost render his lectures (good as they are) unnecessary.

As Dr. Blundell has no where a warmer panegyrist than Dr. Hopkins, I cannot see for what reason, *heavenly* or *earthly*, he is introduced, unless it be to exhibit his magnanimous contempt for a shower of rain.

I remain, Mr. Editor,
Yours obediently,

THOMAS EVANS.

31, Arlington Street,
Camden Town.

EFFICACY OF QUININE IN PERIODICAL HEMICRANIA.

To the Editor of THE LANCET.

SIR,—In No. 298, I see Mr. Winslow recommends blisters to the abdomen, in cases of obstinate periodical hemicrania. I have found the sulphate of quinine completely cure the affection after the failure of various remedies, and should, therefore, prefer it to the painful one of blisters. A case particularly corroborative of my assertion in favour of quinine occurred when on a visit in Gloucestershire, two years since; the patient had been afflicted with very severe periodical hemicrania for some years, and had been a patient of Dr. Porter, of Bristol, as well as of several eminent practitioners in and near Bristol, but the cessation of paroxysms was very short: after taking the quinine in six grain doses for a few days, she was entirely cured, and has had no return. I have seen several cases relieved by the same remedy, but the one stated particularly shows its utility.

I remain yours obediently,
E. MOORE.

Islington, May 18.

P.S.—Will Mr. Winslow be kind enough to inform me on what principle he first thought of applying blisters to the abdomen in cases of periodical hemicrania, or if it was merely exp. gr.?

Mr. Moore states, in answer to the inquiry of A., of Hebden Bridge, in No. 298, that he has never found the ergot of rye retard the lochial discharge, and that on inquiry among his medical friends, he finds none of them have observed any such effect from it. In a case of amenorrhœa that came under his care a short time since, which had been very obstinate, he adds, "I found a weak decoction of the ergot (℞i. to ℥ss. of aq.) given in conjunction with the pil. fer. c. myrrh in doses of a table-spoonful three times a-day, and five grains of the pill each time, have a beneficial effect. Should any of your readers have observed the same effects, or should they have an opportunity of so doing, they will oblige by communicating the results of their practice."

CURIOUS DISEASE OF THE HEAD.

To the Editor of THE LANCET.

SIR,—Having lately met with a case not very dissimilar (except in result) to that related by Mr. Everett, in No. 292 of your publication, I am induced to send you a short account of it.

A girl, ætat. 20, a nursery maid in a family at the West End of the town, complained of a constant and violent pain in the back part of the head, more severe after eating, of a throbbing nature, and interfering considerably with her rest. At the period of her application, it had been gradually increasing for three weeks; the bowels and catamenia had not diminished in integrity; the tongue was slightly furred; there was little thirst, but the mouth very dry in the morning; the pulse full, strong, and frequent; the appetite bad. The patient was bled, cupped, purged, and blistered, without effect. The pain did not abate. On the contrary it increased, and invariably became more severe immediately after eating, even if but a mouthful of food was taken. This symptom induced the idea that the pain *might be* dyspeptic, especially as it was not lessened by depletory measures; the stomach was, consequently, drenched with various dyspeptic medicines, still the pain was obstinate, and it retained its seat.

She had been thus treated for three weeks, when she stated that whilst lying on a sofa, she felt "*something give way* in her head, with a report like that of a pistol;" at the same time, matter, in quantity capable of filling a small tea-cup, gushed from the *ears*, the nose, and the mouth. The result was, that the pain instantly left her. She quickly regained her health, her hearing was perfect, and her complaint never returned.

Where, in such a case, was the seat of suppuration? if in the brain, how was the maintenance of its functions to be accounted for, and by what means did the matter make its sudden exit from the interior, without detriment to the organ of hearing?

I have the honour to be, yours, &c.,
J. G. EVANS.

115, Fetter Lane, Holborn.

HOPITAL ST. LOUIS.

SARCOCELE AND ENCEPHALOID TUMOUR OF EXTRAORDINARY SIZE IN THE AB- DOMEN.

C. FORTIN, ætat. 39, of a weak constitution and nervous temperament, was affected with a small congenital inguinal hernia on the left side, which spontaneously returned, on lying down, into the abdominal cavity, and caused so little inconvenience, as not even to require the use of a truss. About four years ago, an inflammatory and very painful tumour, of the size of a pigeon's egg, having formed in the left groin; the patient, who had always had only one testicle, suspected that it originated from the descent of the other,

and applied an emollient poultice, under the use of which the pain gradually subsided, and the testicle actually passed into the scrotum. It retained, however, a kind of morbid irritability, and gradually enlarged, so that two years subsequent to its descent, it had acquired the size of the fist; from this period it ceased to increase, and the patient appeared to enjoy, for some time, tolerably good health. Six months previous to his admission into the hospital, however, the spermatic chord became tuberculous and very painful; the nodosities, near the inguinal ring, grew rapidly, so as to form within a short period a large uneven mass, which occupied the whole left hypogastrium; the general health of the patient began, at the same time, to suffer considerably; he became emaciated, feverish, &c. About a month after the appearance of the first tumour, another of a similar nature appeared in the umbilical region; this also rapidly grew, and, on accurate examination, was found to be connected with the tumour in the hypogastrium; the pain at this period was very violent, of a lancinating kind, and extended over the whole abdomen; it gradually however subsided, and, until about three months before the patient's admission, ceased entirely. The tumour in the abdomen and hypogastrium attained an extraordinary size; and the latter, by forcibly pressing on the crural nerve, produced incomplete paralysis, and œdematous swelling of the left leg. On the 1st of September, 1828, he entered the hospital, and was then found to be in the following state: the countenance was collapsed, of a yellow hue; the eyes lifeless; skin dry; the whole body extremely emaciated; the abdomen and left hypogastrium of enormous size, without any fluctuation, and free from pain; both legs paralysed and œdematous; the pulse quick and small; the debility extreme, &c. To these symptoms, after a few days, copious diarrhœa acceded, the vital powers sank more and more, and the patient died on the 17th of September.

Inspectio Cadaveris, Twenty-three Hours after Death.

The cerebral sinuses and vessels of the pia mater were filled with blood, and the substance of the brain was somewhat injected, and denser than usual. The lungs contained a few tubercles; the left cavity of the heart was hypertrophic. In the abdomen, between the laminæ of the mesentery and the mesocolon, a tumour was found thirteen pounds and a half in weight, ten inches in length, and six in breadth, occupying almost the whole left, and great part of the right, side of the abdominal cavity, forcibly pushing the intestines, stomach, and liver, towards the right; it consisted of two masses; the one lay more