

hospital by labour cases averaging 7·43 days, and that by chronic patients 22·08 days. The mortality of chronic cases was 2·51 per cent., and that of labour cases 1·87 per cent., which is considerably lower than the death-rate of the preceding year. This hospital was free from any visitation of puerperal fever during the year. Altogether it appears to be in a most efficient condition. The Coombe Lying-in Hospital admitted 369 cases, the mortality among the parturient women being 1·24 per cent. The Hospital for Incurables admitted 51 patients, and St. Mark's Hospital 357. The annual cost per head for maintenance and for establishment at these various hospitals averaged from £23 to £72.

Foreign Gleanings.

LOCAL USE OF CHLORAL HYDRATE IN SOFT ULCERS AND ULCERATED BUBOES.

In an article published in the April number of *Giornale Italiano delle Malattie Veneree*, Dr. de Paoli gives his experience of the local action of chloral hydrate in the above cases, such as was exhibited in the Clinique for Venereal and Skin Diseases of Bologna. Four cases are related in which large ulcerated buboes were highly benefited in their last stage by the application of a solution of chloral hydrate (10 parts of chloral to 30 of water). The healing process was remarkably regulated and hastened by the application. The author thinks that in all sores with abundant suppuration and want of tone chloral is of the greatest use, and that its employment may be beneficially extended, as a slightly exciting and antiseptic agent, to suppurating wounds, and especially gunshot wounds. He states that Professor Gamberini has applied the same solution with marked results to the soft ulcers of prostitutes, especially during the later period of cicatrisation, the virulent power and suppuration of the sores being considerably diminished, whilst auto-inoculation of the sores in other parts was not observed in the patients treated. He suggests that chloral hydrate may be a good substitute in certain cases for nitrate of silver and iodoform, and concludes, in summing up his paper, "that it diminishes the virulence of sores, has the advantage of not irritating the inguinal glands, and removes the offensive smell which proceeds from ulcers, especially those of the female genitals."

THE WARM BATH IN PHTHISIS AND OTHER AFFECTIONS OF THE CHEST.

Several experiments have been recently carried on at the Hôpital la Pitié by Professor Lassague with the view of judging of the effects of the warm bath in phthisis and other diseases of the chest, and the results have been recorded by Mr. Souplet, in the last number of the *Bulletin de Thérapeutique*. The temperature of the bath was always made to be three degrees lower than that of the patient, warm water being added when necessary so as to keep up a constant temperature. The duration of the bath was from twenty to forty-five minutes, according to the strength of the patients. They were given every other day. During the first two or three baths the patients generally experienced a slight degree of oppression, which lasted only about two minutes. Under the influence of the use of the baths the cough subsided, expectoration became easier, the frequency of the pulse diminished, and the temperature fell progressively. At the same time the shivering attacks of pseudo-intermittent phthisis were delayed, and nocturnal sweats diminished notably or even stopped. After the first three or four baths sleep became better, and diarrhoea was lessened or entirely removed. Out of thirteen cases (nine of phthisis, two of pneumonia, and two of pleurisy) in no one instance could any inconvenience be attributed to the employment of the baths, whilst the advantages which they afforded were obvious.

HÆMORRHAGE IN THE FOURTH CEREBRAL VENTRICLE DIAGNOSED DURING LIFE.

This interesting case is recorded as follows in the last number of the *Gaz. Hebdomadaire de Paris*:—A man was brought into the wards of Dr. Lionville at the Hôtel Dieu. He presented symptoms of stertorous respiration; anæsthesia, with re-

solution of limbs; and difficulty of speech; and shortly after died in a state of collapse. On his being admitted, Dr. Lionville had noticed considerable distension of the bladder, had sounded him, examined the urine, and found 6·25 of glucose and 5 of albumen to 1000 parts of water, and he had put down the diagnosis as hæmorrhage seated in the neighbourhood of the fourth ventricle, on account of polyuria, albuminuria, and glycosuria. The autopsy confirmed the diagnosis. In the protuberance below the fourth ventricle and above the calamus, which, physiologically, is the region which must be punctured for producing polyuria, albuminuria, and glycosuria, there existed a hæmorrhagic spot seated on the right side.

USE OF GELATINE SUPPOSITORIES IN OBSTINATE CONSTIPATION DUE TO ACCUMULATION OF FÆCES IN THE RECTUM.

In the above cases, and when there exists an accumulation of hardened fæcal matter in the rectum or colon, Dr. Nagel (*Allgemeine Wiener Med. Zeitung*, April 1st, 1873) finds that when purgatives and enemata have failed, and in order to dispense with the use of the anal curette, suppositories of gelatine constitute an easy, harmless, and effective means of removing the evil. The suppositories are made of brown gelatine. They are steeped in water for twelve hours, and being thus softened and enlarged are introduced into the rectum. By subjecting the patient to a suitable regimen, an evacuation of pultaceous matter is obtained in twenty-four hours. The author attributes these effects to the hygrometric properties of the suppositories.

PRESENCE OF ALCOHOL IN THE HUMAN URINE.

After having shown that urine on putrefying produces alcohol, M. Béchamp has sought to discover alcohol in the urine of persons who had previously been subjected to a régime of abstinence from wine and alcoholic drinks. In the urine collected in these conditions, and in which fermentation had been prevented by the addition of a little creasote, M. Béchamp has found enough alcohol to be able to set it on fire. In one of the experiments there was enough alcohol in two litres of urine to be determined by the alcoholmeter. The author believes that the liver produces alcohol physiologically.—*Gazette Médicale de Bordeaux*.

THE DEATH UNDER CHLOROFORM AT BROADMOOR ASYLUM.

To the Editor of THE LANCET.

SIR,—With reference to the case of death under chloroform which occurred recently in this asylum, and which was noticed in THE LANCET of the 24th ult., I desire with your permission to make a correction as to the strength of the mixture of chloroform vapour and air which was used. It was stated that the chloroform was administered with Clover's apparatus, and that at the time of commencing the operation the bag contained 11,000 cubic inches of air, of the proportion of 25 minims of chloroform to each 1000 cubic inches. Since the notice of the case was published the apparatus has been carefully examined by Mr. Clover, and by the maker, Mr. Coxeter, in my presence, with the result of showing that the quantity of air which the bag was supposed to contain was over-estimated, and that instead of there being 11,000 cubic inches, the quantity was probably not more than 8400 cubic inches, which would make the proportion 32½ minims of chloroform in every 1000 cubic inches, or 3·76 per cent. This over-estimation of the amount of air arose from the fact that the bellows were stiff from infrequent use, and did not measure out the full quantity of 1000 inches at each inflation, which they were supposed to measure; and, as in using the apparatus in question it is of great importance that the administrator should have no doubt as to the exact strength of the vapour inhaled, I have suggested to Mr. Coxeter that if the number of cubic inches which every bag is capable of holding were marked upon it, ready means would be thereby afforded for checking the correct action of the bellows.

I am, Sir, your obedient servant,

W. ORANGE.

Broadmoor Asylum, Wokingham, Berks, June 9th, 1873.