

leges are necessary ; and in accordance with such declaration, have consequently granted charters to the Baltimore College of Dental Surgery, and the Dental College of Ohio, giving them the usual powers of medical colleges in general.

The necessity of dental colleges being established, the next position, of their furnishing superior facilities over any private dental instruction, must also be conceded ; and for the same reason that college medical instruction is superior to any private medical teaching. And although this is now beginning to be acknowledged by the great mass of intelligent dentists, yet they seem to be much slower in admitting that private dental instruction is simply a link, and only a preparatory step, to that more thorough theoretical and practical drilling which the dental college furnishes ; and which, as in the private medical teacher, instead of placing himself in the attitude of an enemy to the college, on the contrary, should regard himself as its friend and co-worker—as they each are striving for the same noble end, viz., the elevation of the science and the art of dentistry, as well as the amelioration of the sufferings of their fellow beings. Now if this be true, that the grand aim of college dental instruction and private dental instruction is the same, why then any more than in the medical should there be any difference or discord, where there is unity of purpose, and consequently, where we can see no good reason why there should not also be unity of feeling and co-operation ?

Having already trespassed much further than we intended, we shall close with the simple statement, that we have endeavored, throughout the whole of these broken remarks, to present dental colleges in their true attitude before the public and the dental profession, as instruments designed for the injury of neither, but for the benefit of both.

#### NOTES TAKEN FROM HEARING MEDICAL LECTURES IN PHILADELPHIA, IN 1815-16.

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DR. BENJAMIN RUSH was dead previous to the writer's attending lectures ; but Dr. James Rush, his son, read his father's lectures (not in the University) to a small class, of which I was one. These were considered by Dr. James Mease, and by Dr. Joseph Parrish, to whom the writer had letters of introduction, as having received Dr. Rush's last touches and illustrations, and as being of great value. Dr. Barton, immediate successor to Dr. Benjamin Rush in the chair of Theory and Practice, died whilst I was there, and never lectured after my arrival. Lectures in his department were in consequence supplied by the other professors. This will explain why some things in my notes, as for instance, in Dr. Wistar's lectures, who was professor of Anatomy ; in Dr. Chapman's, who was then professor of *Materia Medica*, and in Dr. Physick's, who was professor of Surgery, may not appear as strictly belonging to their departments. And so of others.

#### DR. PHYSICK.

*On Apoplexy*.—Mr. Home punctured the *dura mater*. It relieved

the patient at first, but he afterwards died of *hernia cerebri*. The passage of the blood, Dr. Physick says, is just as free through the lungs during the state of expiration, as during inspiration. He attributes this phenomenon to the violent efforts of the animal to inspire, and thinks by the force of the abdominal muscles the blood vessels of the head are extended. Thus, after trephining, it is observed that during inspiration, the *dura mater* is pressed upwards. It is necessary, he said, to distinguish apoplexy from epilepsy, fainting, and intoxication.

*On the Eye.*—Dr. P. prefers the operation of extracting the crystalline lens to couching—it being less painful. He had a case in which couching left a long-continued pain in the eye of a woman, which nothing relieved. To prepare the eye for the operation, the pupil is to be dilated by the previous application of tinct. of stramonium, an hour or two beforehand. The knife is to be very sharp. It is to be introduced from the superior part of the outer canthus, obliquely, towards the inner canthus. A needle with a curved point is to be used to seize the crystalline lens by its capsule, and thus to extract it. The lens is sometimes torn in pieces by the introduction of a needle, and left to be absorbed. This Saunders and Adams prefer to extracting or couching. Couching, which is pushing down the crystalline lens behind the vitreous humor, is performed by introducing the needle through the coats of the eye. It is to be introduced a little on one side of the cornea. In cases of extraction, a very fine pair of forceps, a fine scoop, to scoop out any remains of opacity, a speculum, and a very sharp knife are the instruments. The upper eyelid, at the inner canthus, is to be pressed upwards against the superciliary ridge; the lower is to be supported by the surgeon himself. Great care is to be taken that too much pressure is not made on the ball of the eye, as that might dislodge, and occasion to be pressed out the whole vitreous humor. To prevent the patient from rubbing the eye in sleep, and thus producing the like dislodgement, of which he once had a case, the patient's hands must be tied to the bedstead. If the iris is entangled upon the knife, pressure is to be made upon the cornea to dislodge it.

DR. RUSH.

*On Rheumatism and the Rheumatic State of Fever.*—The absence of the heat of the body called cold, is the exciting cause. It does not affect the internal parts like gout. It does not impair the appetite, digestion, nor functions of the brain. The worst cases of rheumatism occur in summer. When it seizes the side it is called bastard pleurisy; when the head, headache; when the neck, it is called stiff-neck, and is then combined with spasm. In hard drinkers, it has an eruption on the skin, and is then termed scorbutic rheumatism. When it suppurates, it is called arthropoosis. Sometimes it is translated to the lungs and then produces consumption. A case was related in which it disabled a man in every joint, and displaced most of them. It so affected the ear as to cause deafness. He could not move his jaws, and sucked his sustenance through a straw. It killed him finally, but his senses remained to the very last stage of life. Premonitory signs of rheumatism are lassitude, chills, &c. The breakbone fever prevailed in that city in 1780.

*Remedies for Rheumatism.*—1. Bloodletting. This, we were told, is forbidden by Drs. Fothergill and Willan. 2. Purges. 3. Antimonial powder. 4. Seneka. 5. Dover's powder, ten to twenty grains every night. 6. Blisters. He mentioned that farmers cured their horses of rheumatism by tying them twelve or fourteen hours in a stream of cold water.

*Anomalous Rheumatism.*—Dumb or depressed state, the pain transferred to prostration. The pain, which is a less alarming symptom than prostration, being absent. It is brought back to the muscles by blood-letting.

[To be continued.]

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*Decay of Teeth.*—Civilization has been marked by the appearance of a premature destruction of the teeth. No one organ, under ordinary circumstances, should fail any sooner than another. All the senses, when not abused, are tolerably active to advanced old age, when they operate less perfectly, each of them being only maintained by the harmonious movement of the others. At the expiration of three score and ten, some of the delicate interior structures, under the action of combined forces that belong to civilization, ordinarily give out. One becomes deaf, who has perhaps been subjected to the shock of an explosion; another has dim vision because he has habitually allowed injurious causes to operate, that might have been avoided; and so on in regard to the violation of many of the laws of our nature.

The northern parts of the United States are proverbial for the bad teeth of the inhabitants, and for a long while the question has been agitated—what is the cause of it? Every answer but the right seems to have been given. One of the Journals, the name of which is not recollected, recently intimated that our food does not contain phosphate of lime enough to meet the exigencies of the system. This idea strikes us as being correct. In no country do so many people uniformly consume fine flour, for habitual food, as in the northern States. By throwing aside the bran, we actually deprive ourselves of that portion of the grain which it may be supposed contains the material for keeping the teeth in repair. A persistence in this habit of using none but bolted wheat, for two generations, is quite sufficient to lay the foundation of a constitutional or hereditary tendency to bad teeth. The western and southern inhabitants are preparing for the same misfortune in their posterity, since fine-bolted flour is becoming the staple article of food with them. Bolting mills were put in operation in New England. Here poor teeth first began to appear; and here they will always abound, should this cause prove the true one, till a more simple preparation of bread has been adopted long enough to overcome the defect in the parent stock.

Dentists are frank in warning their customers of the vices to which they are slaves, but to little purpose; and so we go on, from family to family, mending, stopping and plugging up carious breaks in the enamel, till in