

PROTRACTED SUCKLING.

SIR,—In THE LANCET for October 22, the effects of over-lactation are recorded, as producing what every experienced man must have occasionally met with, *most dire misery*; but observing that three years and a quarter were in *civilised life*, noticed as an “unwarrantable period” and a “monstrous proceeding,” I referred to my note-book for an entry which I had made when discussing this matter with a most intelligent barrister, in whose family the question was raised as to whether the wet-nurse who had suckled one child was in a fit state to take a second of his infants, thirteen months after she had begun suckling the first. I considered that she was fit, and she took the child, and would have continued her office, I do not doubt, with advantage, had not casual illness obliged her removal from the house.

The following remarks from Dr. Adam Clarke's notes on the Old Testament, may not be uninteresting:—“At what time children were weaned among the ancients is a disputed point. St. Jerome says there are two opinions on this subject. Some hold that children were always weaned at five years of age; others, that they were not weaned until they were twelve years. From the speech of the mother to her son, 2 Mac. vii, 27 (‘Oh, my son, have pity upon me, that bare thee nine months in my womb, and gave thee suck three years, and nourished thee, and brought thee up’), it seems likely that among the Jews they were weaned when *three* years old; and this is further strengthened by 2 Chron. xxxi. 16, where Hezekiah, in making provision for the Levites and priests, includes the children from three years old and upwards, which is a presumptive proof that previous to that age they were wholly dependent on their mother for their nourishment. Samuel appears to have been brought to the sanctuary when he was *just weaned*, and then he was capable of ministering before the LORD (1 Sam. i. 22—28); and this certainly could not be before he was *three* years of age. The term among the Mahomedans is fixed by the *Koran*, xxxi. 14, at two years of age.”

Again, Mr. Catlin, in his account of the North American Indians, states that “Indian women seldom have more than four or five children,” and he never recollects “to have met with a case where two or three children were born at a birth,” although he has travelled extensively. He thinks that “the reason why the Indian women have not large families arises from the length of the period of lactation, which is generally two, sometimes three, and even four years. Yours respectfully,

W. T. ILIFF.

Newington, Nov. 3, 1842.

SIMPLER MODE THAN MR. DENTON'S,

OF

PREVENTING THE OBSTRUCTION OF CATHETERS.

To the Editor.—Sir, In a letter in THE LANCET, No. 1001, headed “Obstruction of Catheters by Coagulated Blood,” the injection of warm water is recommended by Mr. Denton, of Hornsea, as a certain means of removing such obstructions. Permit me to bear testimony to the good effects of this remedy, and at the same time to suggest a *more simple mode of procedure*. When I was an apprentice (about twenty years ago) I visited an elderly patient at Upavon, Wilts, who was suffering from enlarged prostate and retention of urine. I passed the catheter into the bladder, and withdrew the stilet, but no urine escaped. Finding the stilet useless I withdrew the catheter, and having washed away the coagula reintroduced it, but still no urine passed. Feeling disinclined to withdraw the catheter again, on account of the difficulty experienced in passing it, and having received no instructions as to the means of removing the coagula whilst the catheter was in the bladder, excepting with the stilet, which I had found useless, I was for some minutes at a loss to know how to proceed. It then occurred to me that the introduction of warm water might be useful; but the question was, how was it to be effected? I did not think of the stomach-pump, as at that time I had never seen one. It was not then, as it now is, in the possession of almost every surgeon. It struck me, however, that a common male syringe would answer my purpose, and on inquiry I found there was one in the house of the patient. Having filled the syringe with tepid water, and introduced its point into the catheter, I injected the water through the tube into the bladder. The effect was immediate and satisfactory, and such has invariably been the result in every case in which I have subsequently adopted the same means. A more convenient instrument may, doubtless, be formed, either of metal or India-rubber, but I should use the four-drachm male syringe (or some instrument similarly constructed) in preference to the stomach-pump, as used by Mr. Denton, and for the following, among other reasons:—

First, because, whilst it is equally efficient, it will hold as much water as is necessary, and may be used with as much force as may be required; it is also more simple in its construction and in its application.

Secondly, because it is more portable.

Thirdly, because it requires no assistant, as it may be used with two fingers and a thumb of one hand, whilst the other hand is