

this saying in the north when a man died, 'Did he die by the doctor, or did he come by his death fairly?' (Laughter.)"

This weak joke had nothing whatever to do with the subject under discussion, and was apparently introduced for the purpose of creating a diversion at the expense of the medical profession, and to vindicate Sir Robert Peel's pretensions as the "chartered libertine" of debate.

The Ministers are gathering all their force that they may complete with credit the short term which remains to them before dissolution. It is not beyond possibility that the country may again confide the ship of the State to the same helmsman and the same crew. But we much doubt whether this hope is likely to grow very strong if members of the Administration are foolish enough to wilfully and unnecessarily insult and vilify a profession like that of medicine; the members of which are not without their social and political influence. The world could go on very comfortably without Sir Robert Peel; but the medical profession is necessary to its existence. We merely throw out this hint for those whom it may concern—reminding them that there is a Cornish proverb which says, "they who will not be ruled by the rudder must be ruled by the rock."

A RUPTURE.

THE rights of insurers have been vindicated in the action of *Fulton v. the Accidental Death Insurance Company*. A policy of insurance was effected on the life of the deceased. He was a very fat man. Sitting down upon a chair with a broken leg, he fell on to the floor, and having a congenital malformation, rupture followed, and he died from hernia. The policy insured against all forms of cuts, stabs, tears, bruises, concussions, crushes, &c., but not against gout, rheumatism, hernia, erysipelas, or other diseases arising within the system of the insured. The matter came before the Court upon demurrer to a plea which raised the question whether the Company were liable in this case. Mr. Joseph Brown, who appeared on behalf of the Company, stated that there was no medical examination before these policies were granted, and therefore there was no means of knowing whether the insured were ill or well. The Company wished to dispute the policy on the ground of their non liability where death came from disease arising within the system of the deceased. Mr. Brown argued that external violence did not produce hernia unless there was a previous weakness in the system. It was contended on behalf of the plaintiff, that the fact of external violence having produced the disease, brought it within the category of cases for which the Company was liable. Mr. Justice Williams stated the proposition to be, "Was hernia, superinduced by external violence, within the excepted cases for which the Company was not liable?"—a proposition answered by Mr. Justice Willes, who thought that "it would be an illusory policy if it were so." The Court were unanimous in their opinion that to the question whether the policy meant that the Company should not be liable for death or disability from hernia generally, or only from hernia arising within the system of the insured, the reply was, that "they should be exempt from liability only when the disease arose within the system." This being their view, the plea was held to be bad, and judgment given for the plaintiff. It is obvious that the justice of the case admitted of no other termination. Were it permitted the Company to raise the question of constitutional weakness or inability to withstand the effect of any shock the result of accident, their policy would not be worth one pin. The inquiry should be limited to the investigation as to whether the injury is the direct consequence of accident. The degree of the accident has as little part in the settlement of the question as the condition of the constitution. If the Company choose to accept a universal scale, rather than one graduated to meet the special circumstances of individual cases, they must be prepared to abide by the risks, and not again raise exceptional pleas to evade their liabilities. Scarcely an

accident takes place in which the condition of the constitution does not control the amount of injury. It would have been to the last degree detrimental to the public interests had a mere technicality been allowed to set aside substantial justice.

INDIAN MEDICAL SERVICE.

THE *Bengal Hurkaru* of May 9th contains the following pithy and appropriate remarks in reference to our article on one of the insolent regulations of medical service in the army which make it so justly unpopular:—

"The duties assigned to the medical officers of the army are becoming gradually more elevated; and, no doubt, the opportunity of exercising them will increase the temptation which is now acting so beneficially upon the list of the military medical service at home. It has always been the duty of the army surgeon to see human beings branded; and we now learn that to this elegant branch of professional practice the Madras Government has added the interesting ceremony of superintending the hanging of criminals, at which civil surgeons are invariably to be present, we suppose to see the thing well done. We had thought that the only legitimate object of the medical profession was to save and preserve life; but here we find that we were mistaken, and that it is a primary part of a medical officer's duty to be present at killing by the hangman—as an associate and coadjutor of Jack Ketch. Medical officers can now crowd a good deal of intellectual employment into a single day, as they may be present to see a human being flogged in the morning, preside at a branding match in the daytime, and join the common hangman at a strangling performance in the evening. We should think and hope that even the Scotch and Irish 'roughs,' who are now coming forward to join the army medical service at home, would find this a little too much for them; and we are glad to see the home medical journals taking up this hanging business, and using it against those who have brought the British military medical service to its present condition of disrepute and unpopularity. If 'officers and gentlemen' are required to complete hanging performances, it is well that they should be made acquainted with this part of their covenant as soon as possible, for a sudden summons to such a scene might be very unpleasant indeed."

MORTALITY OF MEDICAL OFFICERS ON THE GOLD COAST.

THE terrible havoc made by death in this pestilential region has been evidenced in the persons of several medical officers. The following list has already been published; it is painful to speculate how many may have been added to it up to the present moment:—Staff Assistant-Surgeons Rutherford, Hooper, Sandison, Crow, Oughton, and Lewis.

Correspondence.

"Audi alteram partem."

THE LARYNGOSCOPE.

To the Editor of THE LANCET.

SIR,—The necessity of maintaining the faucial mirror above a certain temperature during laryngoscopy may be obviated by a simple process which I am in the habit of employing, and which, as it is, so far as I am aware, original, you will perhaps allow me to describe.

The dimming of the mirror arises, I suppose, from the deposit upon it of very minute globules of water, which, from their more or less spheroidal shape, scatter the rays of light in various directions, in place of allowing a right reflection. It occurred to me several months ago that a smooth layer of transparent liquid applied to the glass would at once absorb the watery vapour falling upon it, and thus prevent the dispersion of rays from this cause. I was not disappointed upon trying the experiment. Many liquids will answer the purpose, but the best which I have met with is glycerine diluted with an equal quantity of water. A drop or two of this should be allowed to fall upon the mirror (*not heated*), and to spread evenly over its

surface, just as the collodion is applied by the photographer. The reflecting power of the mirror is not manifestly interfered with by the presence of this thin and highly-transparent layer; there is no dimming of its surface by the breath, and the application does not require to be repeated during even a long sitting. If care be taken that the coating is very thin, the amount of refraction produced by it is so exceedingly small as to be inappreciable in practice.

I am, Sir, your obedient servant,

THOMAS BUZZARD, M.D.

Green-street, Grosvenor-square, June, 1864.

To the Editor of THE LANCET.

SIR,—In Dr. Johnson's lecture on the Laryngoscope in THE LANCET of the 21st ultimo, we are told, and no doubt correctly enough, that Dr. Babington was "one of the first, if not the very earliest," who attempted to examine the larynx by means of a mirror. But however true this may be as to the larynx, there can be no question that M. Levret anticipated by more than three quarters of a century Dr. Babington, and those who have followed him, in the use of a mirror for the purpose of exploring parts situated deep in the natural passages of the body. In an extract from the *Mercure de France* of Nov. 1743, which forms the first article of the appendix to M. Levret's work on midwifery, we are told, in language evidently dictated, like that of Dr. Johnson, by practical knowledge of the subject, of the difficulty of managing the tongue in the use of his mirror while exploring with it the parts in the mouth and throat. Accordingly, as "il faut absolument que la mâchoire et la langue soient contenues immobiles,—M. Levret a trouvé les différens *specula oris* qui ont été faite jusqu'à présent trop embarrassans pour opérer par sa méthode,—il en a inventé un qui assujettit au mieux la langue et la mâchoire inférieure, et qui par le moyen d'une plaque polie,.....réfléchit les rayons lumineux dans le lieu qu'occupe la tumeur." (*L'Art des Accouchemens*," &c., second edition, Paris, 1761, p. 311.)

We are also further informed that M. Levret had successfully used it in tying polypi in the nose, and that, as would be seen in his memoir on the subject to the Academy of Surgery, he had extended its use to section of the uvula, the extraction of foreign bodies from the œsophagus, &c.

From the brief notice given of M. Levret's instrument, it does not appear that he had proposed or extended its use to the larynx; but it is quite clear that he fully understood the principle of the laryngoscope, and that he would certainly, if he did not actually, have employed it to enable him to examine the larynx, had disease in that situation presented itself. To Levret therefore unquestionably belongs the merit of having first invented an instrument suited to bring under the eye parts lying, like the larynx, deep in certain otherwise inaccessible places.

I am, Sir, your obedient servant,

Aberdeen, June, 1864.

JOHN CHRISTIE, M.D.

THE CASE OF POISONING AT CROWLE, LINCOLNSHIRE.

To the Editor of THE LANCET.

SIR,—In your last week's journal Dr. Bingley reports a case of arsenical poisoning, the details of which are in some respects incorrect, and as it conveys, moreover, something like an imputation upon my professional character, I feel bound to notice it. I will not trouble you with any lengthened statement, but content myself with pointing out the errors, explaining as I go on, and premising that I am in a position to bear out my assertions although not present at the death.

It is said,—1stly. "That when the husband awoke, his wife was dead." This is untrue. 2ndly. That when the neighbour was called in she found her dead. But, so far from this being the case, she lived upwards of a quarter of an hour and swallowed some laudanum in brandy. 3rdly. That she was ailing the evening before. If so, she was seen swallowing, and there could not have been much the matter. 4thly. That there was only one druggist in the town who sold arsenic. There being two. 5thly. It is stated "the medical practitioner of the place was of opinion the woman died from natural causes." Now, it so happens there are three in the place; but, as the one called upon to attend, of course the observation applies to me. I did not give an opinion at all, neither did I say the woman died from natural causes. All I said was, before leaving the house, that there was something about the case I did not understand, that

the symptoms as related to me were scarcely adequate to account for the rapid death, and that of course the coroner would have to be sent for. Subsequently, in reply to the policeman, I positively and decidedly declined giving an opinion, having an all sufficient reason for being on my guard. I was, however, afterwards informed that this individual told the person who fills the office of coroner that "I suspected poisoning," and that was the reason assigned for a medical practitioner being brought from Kirton. The report of your correspondent would lead anyone to infer that I was summoned to the inquest, and that, further medical evidence being called for, the inquiry was adjourned for that purpose. Such, however, was not the case, and more than one of the jury remonstrated strongly with the coroner, not only for bringing a medical practitioner, but for ignoring my evidence. After viewing the body, the surgeon in question, I believe, removed the viscera, and was subsequently examined. The inquest was then adjourned to hear the result of the chemical analysis, and, of course, for the delivery of the verdict. As regards the concluding part of the report, there is not I believe the shadow of a foundation for the speculative opinion of a second party being implicated. The husband is no doubt an intemperate fellow, but although the old saying is "de mortuis nil nisi bonum," in the interest of truth it must be said that it was perfectly notorious the unfortunate deceased was not like "Cæsar's wife," and had also been heard to say on several occasions she would make away with herself.

I am Sir, your obedient servant,

Crowle, June, 1864.

HENRY W. T. ELLIS, L.R.C.P. Edin.

THE MARSHALL HALL METHOD OF RESUSCITATING THE APPARENTLY DROWNED.

To the Editor of THE LANCET.

SIR,—The unexceptionable article in your journal of last week upon the subject of restoration from suspended animation evinces a spirit of justice which I hope you will allow me to commend.

My dear father would, if Dr. Silvester's improvements be really such, have been the first to adopt them had he been still amongst us; and fair inquiry is all that he himself would have desired. Let me, therefore, ask the profession, through your columns, the following questions to assist in the still open investigation:—

1. Supposing that "from two to five minutes" are sufficient to allow the fluids present to issue from the mouth of the patient, will he not, as soon as the first gasp is established, make violent efforts to cough up whatever may have collected lower down? And, if so, which is the best posture to give him a chance?

2. Is the great increase, said to be gained by the method of Dr. Silvester, in the amount of air inspired really an advantage? And how as to the violence of that method?

Time spent in patient investigation was never yet time wasted. Wherefore I hope these and other matters will receive further attention, and undergo further suggestive discussion. I remain, Sir, your obedient servant,

Oxford-terrace, Hyde-park, June, 1864.

MARSHALL HALL.

RAILWAY ACCIDENTS AND RAILWAY SURGEONS.

To the Editor of THE LANCET.

SIR,—You will oblige me by inserting the accompanying letter (which has been duly forwarded to the body indicated therein) in your next issue.

I am, Sir, your obedient servant,

Gray's-inn, June 20th, 1864.

J. JONES.

"To the President and Members of the Council of the Royal College of Surgeons.

"An accident happened on the Greenwich Railway on the 20th of May last by which several persons were injured.

"In the evening of the following day, Mr. John Adams, surgeon to the company to which the railway belongs, called at the residence of a young gentleman in Greenwich who had suffered on the occasion, and entered into conversation with his mother. He gave no card, nor did he introduce himself either by name or profession; he affected ignorance of any accident having occurred, and on being told that the patient was upstairs in bed—without inquiring whether he was under