

the pain in surgical operations, the scenes for hundreds of years in operating theatres were, or had been, of the most heart-rending, hideous kind; excisions of the knee, for instance, which analogy led surgeons to approve, were given up on account of the prolonged agony. The chief Dublin surgeon of that day relates that he tried the operation; but having to get four men to hold the poor writhing, shrieking child, in her horrible torture, and prolonged sawing and carving and cutting alive, he gave up the operation in despair; and so of ovariectomy, it was amongst the operations that, even after the discovery of ether inhalation, was interdicted at our Paddington Hospital, and an action for homicide was threatened against the obstetric surgeon, if he dared to undertake it and the patient should have died.

The Greeks say Alexander the Great marched triumphant over the world back to—chaos; so is it in some degree of those few writers, now chiefly the conquering advocates of voltaic narcotism, ether spray, methyl-ethyl ether, &c., who are exploring or marching over the great field of anæsthetics, and reverting to this region of surgical chaos; not in order to recognize or thank Morton and Jackson, but to place Simpson at this "height of fame parallel, if not superior to that of Harvey, Jenner," &c. The Americans, we are told, "are the most childishly sensitive" in making any claim for Morton, and we are treated to a disquisition in the *Lancet* on the anodyne draughts of the ancient Greeks, the supposed virtue of mandragora and to the narcotic or anæsthetic wonders "shown by ourselves in 1854, possessed by the lycoperdon or puff ball" for stupefying bees when exposed to its fumes, though the recognized Hand Book on Bees in England, says the fumes of burning rags, or fustian, is a better narcotic still (containing carbonic oxide).

All ethical propriety or honesty seems lost at present. Morton's name is carefully ignored, the story of the patent in Congress misrepresented and magnified. All sections, the most opposite in the profession, the spinal ice-bag enthusiasts in England, the admirers of the lancet in typhus, and the dogma of *stare super vias antiquas* in hebdomadal literature, the journals of the cheap wine trade and secret chloroform and treacle-nostrooms which pay hundreds of pounds for advertising in legitimate journals, all join Dr. Richardson in these rhapsodies; all agree in denouncing the Americans for claiming any virtue in "Etherization"

and Boston in particular; nay, what is more, will never permit a correction of manifest errors, only in their own way, or in a half way, when the error has had its day; and just as Jenner was denied all honor for vaccination at our London College of Physicians, and Sydenham was denied its fellowship while dukes and lay lords were made fellows, so the name of Morton is derided; this may do for Carmichael Essay adjudications in Dublin, but it scarcely consorts with a judicial inquiry as to what America has really done.

TEMPORARY BLINDNESS, FOLLOWING AN ATTACK OF INTERMITTENT FEVER.

Translated by D. F. LINCOLN, M.D., Boston.

The patient was a robust young man, aged 19. When first seen by the physician, he was lying in violent clonic convulsions, entirely insensible; the body was sweating moderately, the pulse was 110, the pupils reacted slightly. He had been suffering during the previous fortnight with intermittens tertiana postpnea; the attacks, however, had never reached the intensity of the one in question. The bystanders thought the man was dying. The symptoms being apparently referable to the "chill," which had made its regular appearance on that day, and had already passed into the sweating stage, a favorable prognosis was given. Three hours later, the patient was found in the full possession of consciousness, bathed in perspiration, and weeping bitterly at the loss of his eyesight. He said he had seen nothing since coming to his senses. The pupil reacted distinctly to light; but the power of vision was reduced to a feeble perception of the light of a candle. Ophthalmoscopic examination gave a completely negative result; no pathological changes being visible either in the fundus or in the media. In view of the origin of this condition, it was thought best to administer a strong dose of quinia. The patient remained five hours longer in the same condition, then fell asleep (about 6 A.M.), and when he awoke the power of vision was completely restored. How much the quinia had to do with the favorable result, must remain uncertain. Pigmentary embolism of the arteria centralis retinæ, with consequent transitory disturbance of nutrition, is suggested as a possible cause. (Reported by Dr. Dutzmann, in the Wiener Med. Presse, June 26.)