

soldiers. As matters at present stand, a medical officer cannot perform a single portion of his professional duties in hospital without virtually setting at defiance the provisions of a royal warrant. According to the strict letter he is not empowered either to *order* a soldier to take a dose of medicine, the compounder to prepare it, or the attendant to convey it to the patient,—each and all of these proceedings involving the exercise of *military* command.

The removal of such anomalies does not rest with the medical department; but as the interests of the public service are involved in them, I believe I am justified on these grounds in writing regarding the subject.

I am, Sir, yours obediently,

C. A. GORDON,

Deputy Inspector-General.

October, 1868.

## THE LARYNGOSCOPE.

To the Editor of THE LANCET.

SIR,—Being frequently called upon to use the laryngoscope, I have tried to devise some better means than those in general use to diminish the irritability of the fauces, and thereby prevent the involuntary contractions of the pharynx, which in many cases make a laryngoscopic examination very difficult, and in some altogether impossible.

Sir Duncan Gibb recommends the internal use of bromide of ammonium; and Dr. Morell Mackenzie thinks it best to give the patient small pieces of ice, to retain in the mouth for a short time previous to the introduction of the mirror. I have frequently tried Dr. Mackenzie's method; but the anæsthetic effect of the ice is not complete enough, and passes away too rapidly. In order to keep up the influence of cold on the larynx and pharynx, I am now in the habit of using a waterproof bag, about ten inches long and two broad, supplied with strings at each end, and loosely filled with pounded ice mixed with salt. The open end is then tied up, and the bag fastened round the neck of the patient by means of the strings; so that the ice be applied to the larynx and neighbouring parts, no pain or inconvenience is felt from the cold, although the bag is kept on during the whole time the examination lasts. The degree of anæsthesia thus produced after a few minutes is remarkable. I have overcome by this means the irritability of the pharynx, and obtained a good view of the larynx in cases which at first appeared quite unmanageable. A few pieces of ice, kept far back in the mouth, appears to hasten the anæsthetic action. I am, Sir, your obedient servant,

Harley-street, Oct. 1868.

WILLIAM MARCET.

## LONGEVITY.

To the Editor of THE LANCET.

SIR,—The *Times* of the 21st inst. records the death of a labouring man named Richard Purser, who, according to apparently sufficient evidence, had attained the age of 112 years. This patriarchal length of days, although rare, is not unprecedented even in comparatively modern times. Henry Jenkins is said to have lived for 169 years. He was born in the reign of Henry VII. When a boy, he took a cartload of arrows to the English army at Flodden Field, and lived to relate the circumstance in the reign of Charles II. Thomas Parr, well known as "Old Parr," died at the age of 152, and enjoyed the posthumous distinction of being dissected by Harvey. Attila, the King of the Huns, is recorded to have died in his 124th year, but as his death is attributed to sexual indiscretion, we perhaps may be permitted to doubt whether his age is stated correctly. Jean Claude Jacob, a serf from the Jura mountains, appeared before the National Assembly of France in the time of the first revolution when he was 120 years old. There is said to be an inscription in Camberwell Church perpetuating the memory of Agnes Skuner, who died at the age of 119, having been a widow for 92 years. In Hendon Churchyard is the tombstone of an old woman who died at 104. A tailor of Chertsey was introduced to William IV. on his 100th birthday, and survived the interview for four years.

Many other examples of similar longevity might be mentioned. But though in a series of generations it is easy to find that a not inconsiderable number of persons have survived 100 years, yet, as compared with the mass of humanity, their number is almost infinitely small. Few travellers reach the

end of that bridge which has a hundred arches; most fall victims to the dangers of the road. Few men live long enough to die of old age. They succumb to one or other of the diseases by which life is beset, but which are not the inevitable accompaniments of any period. With regard to the fortunate few who escape premature death from what may be considered accidental rather than necessary causes, we may wonder, not why they live so long, but why they die so soon. Indeed we do not know, or know only very imperfectly, why they die at all. We scarcely know anything about the progressive changes that take place in the body which lead to its inevitable destruction after an existence of between one and two centuries. It is a matter of interest and importance that we should learn what are the definite and material changes which occur as the result simply of age. How are the nervous, muscular, and glandular structures altered? Are they degenerated into oil, or replaced by connective tissue? What is it stops the machine?

I have seen no account of a post-mortem examination of the body of Richard Purser; but I cannot doubt that, had his tissues been minutely examined, we should have obtained some facts towards the solution of the question how age kills.

My object in troubling you with this communication is to prevent the loss of such another opportunity. I should eagerly avail myself of any chance of examining the body of a centenarian, and should esteem it a favour if any gentleman who is able to do so would give me such an opportunity.

I am, Sir, your obedient servant,

Chesterfield-street, Mayfair, Oct. 1868. W. H. DICKINSON, M.D.

## ARMY MEDICO-CHIRURGICAL SOCIETY OF PORTSMOUTH.

THE last monthly meeting of this Society was held at the Garrison Hospital on Wednesday, the 7th instant—Deputy Inspector-General Gordon, M.D., C.B., in the chair; and was more than usually well attended. The papers read were of an interesting nature, and consisted of a Case of Abdominal Aneurism, by Surgeon Porter, 97th Regt.; Three Cases of Aortic Aneurism, by Surgeon Lamprey, 67th Regt.; a Case of Suicidal Gunshot Wound of the Skull, by Assist.-Surgeon McFall, 34th Regt.; and a paper on Yellow Fever, by Inspector-General Lawson. The subject of the last paper occupied a considerable portion of the Society's time, and called forth some valuable observations from Sir David Deas, K.C.B., who, from his long service on the Brazilian coast, and his personal knowledge of a remarkable outbreak of this epidemic at Pernambuco in 1848, was able to give some important information on the subject of its importation into a previously healthy locality.

In the course of the proceedings the Chairman stated that he had much pleasure in informing the meeting that the War-office authorities had given the Society their countenance and support, and were about to confer some substantial benefits on it.

Altogether, this meeting of the Society was amongst the most successful and best attended of any that have taken place since its institution. The medical officers of the garrison met several of their naval and civil brethren in the neighbourhood, which augurs well for its future success.

The library in connexion with the Society is already assuming extensive proportions, owing to the numerous and valuable contributions made to it lately.

## BRADFORD MEDICO-CHIRURGICAL SOCIETY.

THE annual meeting of this Society was held on the 3rd inst., in the Philosophical Society's house. The secretary's report of the proceedings for the past year was pronounced as most satisfactory. The monthly meetings were very well attended, and the papers read numerous and of an instructive and practical character. A number of interesting morbid specimens, illustrative of certain cases, were exhibited by the members, many of which were preserved by the Pathological Committee recently appointed for the purpose. The president (Dr. Burnie) was unanimously re-elected for another year. The treasurer (Mr. W. H. G. Buckler) and the secretary (Dr. Goyder) were also re-elected.

On Friday evening, Oct. 23rd, the members dined together at the Victoria Hotel. Dr. Burnie occupied the chair, and