

As regards hearing, when a person dreams of bells ringing and suddenly starts up with the sound in his ears, it may equally be said by M. Tesla that if his internal ear could be inspected the whole mechanism would be in action. Of course M. Tesla does not make these positive statements, but his suggestions are of this kind and in a theoretical sense are of great importance but cannot be accepted, as they tend to break down our long-cherished views regarding our organisation and the operation of our senses. His statements, too, as regards the actual production of light in the retina are worth consideration. There are many who think cats' eyes are luminous in the dark.—I am, Sirs, yours truly,

Grosvenor-street, June 26th, 1893.

SAMUEL WILKS.

"VOLUNTEER INFANTRY BRIGADE BEARER COMPANIES."

To the Editors of THE LANCET.

SIRS,—Nothing of course can be done without money in anything connected with the Volunteer service, but, although in the Welsh Border Brigade there may be no difficulty in obtaining men, the reverse is the case in other brigades; and I again say that to form brigade bearer companies battalion bearer sections have been drawn upon—i.e., regimental bearers have been taken away from their regiments. If Surgeon-Lieutenant-Colonel Giles—whom I know to be an enthusiast in Volunteer ambulance—will refer to the circular orders on the formation of brigade bearer-companies, he will find that my statements were quite correct, and I hope that he and other surgeons of brigade will again endeavour to procure the issue of more favourable regulations in the matter of recruiting for our brigade bearer-companies. The coöperation of the St. John Ambulance Association would be of the utmost value; the Association turns out year by year many men certificated in first aid; scores of these will not volunteer to shoulder a rifle, but would do so to trail a stretcher.

I am, Sirs, your obedient servant,

E. J. LAWLESS,

Surgeon-Captain, 4th V. B., East Surrey Regiment.

June 27th, 1893.

"THE MEDICO-LEGAL SYSTEM OF SCOTLAND."

To the Editors of THE LANCET.

SIRS,—The leading articles in THE LANCET of June 17th and 24th on the medico-legal system of Scotland ought to call attention to the state of matters existing in England and elsewhere with regard to post-mortem examinations into deaths which are the subject of official inquiry. Your recommendations that in medico-legal cases two medical men should take part in every necropsy and that one of the two should be a competent medico-legal examiner will meet with the hearty support of the profession and no one will dispute the desirability of extending them to England. The neglect of the latter recommendation in particular is little short of a public scandal for which the authorities are not altogether blameless. In Scotland, it would appear from your article, it is directed that "the necropsy should be made by a man of experience and reputation residing in a large or central town of the district;" here the nearest practitioner who happens to be called to the case is obliged to make the examination, often much against his will. In private practice there are so few opportunities of seeing morbid anatomy that a medical man has to rely upon the experience of his student days, and yet he may be called upon to decide a pathological question on which depends, it may be, the life of an individual. There is no way of becoming acquainted with pathological appearances except through the post-mortem room, and that is the department a general practitioner avoids, and with good reason; for the risk of carrying septic infection is very real and may come home to him very directly. I know medical men who always refuse on this ground to make a post-mortem examination; others, again, hand the matter over to an assistant or not infrequently to a dispenser, and view the organs at arm's length. Surely this is unsatisfactory where the issue involved may be of the highest importance. I have lately come across an instance reported in the daily papers which illustrates very forcibly the truth of your remarks. The parents of a child about three years old were charged with neglecting and starving it. At the inquest it was given in evidence *inter alia* that the child had ailed for a long time, suffering from repeated vomiting. It had been taken to a

dispensary, where it received medicine. The post-mortem examination was made by two medical men, and the following is an account of the evidence, taken from the lay press: "The body was emaciated, weighing 12½ lb. There was a large quantity of fluid between the membranes in the head, and an old adhesion of the membrane to the skull. It appeared to have had either a blow or a fall at some time to produce this adhesion. There was a little effusion from the left lung, and the right lung was solid. The stomach was normal; the liver and kidneys were larger, the liver weighing 11 oz. The intestines were translucent, and there was little fat about the body. In witness's opinion the immediate cause of death was the congestion of the right lung combined with the presence of a clot in the heart and the adhesion of the membrane. The emaciated condition of the child would aggravate the symptoms and accelerate death. The body of the child should have been at least three times the weight it was." The coroner told the jury that from the medical evidence there could be no doubt as to the cause of death, and they had to discover whether the child's legal guardians were responsible. This they found to be the case, and the parents were committed for manslaughter and were tried at the assizes, the mother being found guilty and sentenced to nine months' imprisonment, which she is now serving. It is not very clear from the account what the medical evidence intended to convey as to the cause of death, but the verdict of the jury indicates that the primary cause was considered to be starvation and neglect. Now it is obvious to anyone acquainted with pathological work that the child suffered from chronic brain disease, as shown by "the large quantity of fluid between the membranes," and this would amply account for the extreme emaciation. Further, surely the assertion that the "adhesion of the membrane to the skull" was probably due to "either a blow or a fall" was going too far. We know that it is well-nigh impossible to prove a case of starvation and neglect where organic disease has been found on post-mortem examination, but it would appear that unless your suggestions are adopted it would be well for the Crown to do as in Scotland and provide prisoners with legal assistance in their defence.

I am, Sirs, yours truly,

Cardiff, June 27th.

D. R. PATERSON, M.D.

"NERVE TRANSPLANTATION."

To the Editors of THE LANCET.

SIRS,—Reading Mr. Moullin's case of nerve transplantation and his failure to obtain a "cure," I send you short notes of a case of mine. Failures teach more than successes. From *a priori* reasoning one would say that if such highly organised structures as nerves were transposed from animals to man failure would be the inevitable result. Last year I had a patient who sustained a compound fracture of the right humerus at the junction of the lower and middle thirds, the result of a fall from a tramcar in motion. To make a long story short, there was non-union of bone and the patient suffered from wrist-drop, paralysis of extensors &c. The patient being a clerk aged twenty-six years, I advised him to let me wire the bones and suture the nerve (musculo-spiral), promising him that, though the upper arm would not be as good as its fellow, the hand and wrist would be quite as good as the left, provided the nerve united. Not being provided with a demonstrator of physiology or the commodities of a hospital, I cut down on the bone, sawed off as much as would allow me to bring the severed ends of the nerve together, then wired the bone and sutured the nerve ends together with four catgut strings. The wound healed by first intention. The result, as far as the patient is concerned, is all that could be desired, as he informs me that he can write as well and for as long a period as he could before the accident. The suturing was done four months and a half after the accident. His right arm is 2½ inches shorter than his left, and as the operation took place more than a year ago I take the "cure" to be permanent. I would remark that Mr. Moullin used a poisoned nerve, since his dog was chloroformed to death, and that if, instead of a demonstrator of physiology killing the dog, a butcher had stunned it and someone dissected out the nerve there might have been a good result. I fail to see that success will follow nerve transposition from animals to man.

I am, Sirs, yours truly,

June 27th, 1893.

FREDERICK W. MANN.