

all from Indian skeletons—viz., two, both of the fifth lumbar vertebra, from an ancient cemetery in Kentucky; and two, one of the fourth and the other of the fifth, both from the same individual, from an ancient cemetery in Florida.

The question naturally arises whether the condition we have assumed to be a fracture may not be considered an arrest of development, and consequently only a permanent separation of parts, distinct in the foetus, but which in the ordinary course of things become united in the adult. In answer to this objection it may be said, that the only place where a non-union of the arch might occur from such a cause would be either at the joining of the pedicle to the body, or on the median line when the laminae join each other. The fracture in question does not occur at either of these points, but at a place where no separation exists in the foetus at any period of development.

The causes to which the fracture might be ascribed are chiefly two; one, a forcible bending of the body backwards, and the second the shock resulting from falling or jumping from a height in such a way that the shock is transmitted from above downwards through the pelvis. In this last case, in consequence of the obliquity with which the vertebral column rests upon the sacrum, and the yielding of the intervertebral substance, the momentum of the trunk tends to displace the column forwards on the base of this bone. The chief resistance offered to such displacement would be from the lower articular processes of the fifth lumbar vertebra as they press against the upper ones of the sacrum. An analogous tendency to displacement would of course exist at the union of the other lumbar vertebrae with each other, which would be exerted in an analogous manner. As, however, the neck described above becomes stouter the higher up it exists, the greatest liability to fracture is in the lowest part of the column.

We know of no recognition of the existence of this fracture during life, and it is not probable that any marked symptoms would occur in connection with it other than those which might be ascribed to a severe strain.

MADAME LA PHARMACIENNE.—A *pharmacie* has just been opened at Montpellier by Madame Deumergue, Bachelor in Science, this being the first establishment of the kind in France under the direction of a lady.

## AMAUROSIS OF BOTH EYES FOLLOWING EPILEPTIFORM ATTACK.

By G. E. FOSTER, M.D., Springfield, Mass.

Mr. J. H., aged 35, by birth a Frenchman, by occupation a carpenter. Has always been a healthy man up to January, 1869, when he complained of severe pain in the occipital region, often coursing down the back as far as the third or fifth dorsal vertebra. He consulted a physician, and kept growing worse to the 27th of March, when I was called to see him. At that time he was having daily four (4) epileptiform attacks; bowels very much constipated; tongue covered with a deep yellowish-white coating. Upon the 28th, I gave him a cathartic, which unloaded his bowels thoroughly and cleared the coat from the tongue in a measure. The attacks then increased to six (6) a day, each attack lasting from twenty minutes to half an hour. I then began with the bromide of potassium gr. vi., fluid extract of valerian ℥ij., camphor water ℥i., three times a day, which had little effect upon the attacks; I then doubled the dose of bromide, which began to control the attacks, and on April 20th he was having only two attacks a day. The bromide was then increased to forty-five grains daily, when the attacks ceased; it was then discontinued, while the valerian and camphor were alone used. The appetite improved and the bowels became regular. About three weeks after, I was called to see him again, when he said that for two or three days he had suffered from pain in both eyes, and the vision was hazy; this symptom increased rapidly, and in five days he was totally blind. Upon the 24th of May I applied a blister over each eye, and sprinkled the raw surface with one third of a grain of sulphate of strychnia, allowing it to remain until the following day, when a fresh application was made. Upon the 2d of June I doubled the amount, and so continued to do each day until I reached five grains over each eye, when he could discern light. The quantity was increased to six grains, and in two and a half days his vision returned, as good as before. He has had no attack since the bromide was stopped, and has returned to work, feeling quite strong. He is now taking tartrate of iron and potash.

At the recent commencement of the Cincinnati College of Medicine and Surgery, the degree of Doctor in Medicine was conferred on seventeen graduates.