

THE LANCET.

London, Saturday, October 14, 1826.

OUR readers have all heard of a certain Vicar, who changed his religion with the same ease that he doffed his surplice, wisely preferring his own interests to the dogmas of any particular church, and determining, whether Lutheran or Papist, to live and die the Vicar of Bray. There is no recent example of this magnanimity more obvious or diverting than the conduct of Dr. JAMES JOHNSON, the Medico-chirurgical Reviewer, who now preaches doctrines which he formerly denounced as damnable heresies, and in a place especially set apart to the purpose. Will it be credited, that the man who, barely three years ago, called hospital reports "unsavoury suits," and thanked God that his olfactories were unapt at "smelling them out," now exults in the glory of his nostrils, and opens a periscope to receive all the vile odours and filth which the Hole and Corner Scavengers can stir up and collect! Not content with this, he swears there is nothing of such exquisite fragrance:—

"Whatever scepticism may attach to statements made in private practice by individuals," says the Doctor, "the records of hospitals are perfectly free from suspicion of infidelity. Any attempt at adulterating, or even colouring cases of this kind, would argue little else than insanity in the superior medical officer; while from those who are employed to copy or abstract the histories, all temptation of misrepresentation is not only taken away, but a positive danger would be incurred by such an attempt; the reporter being known, and of course responsible for errors and inaccuracies, much more for perversion of facts."

Again:—

"It has been most untruly asserted, that we are inconsistent in our conduct, having, it is alleged, at one time, condemned the publication of hospital reports. We deny it. We condemned, and do still condemn,

garbled and erroneous reports, as injurious and unjust; but we have ever recommended, in the most strenuous terms, the publication of authenticated, correct, and FAIR reports of cases occurring in public hospitals."—Johnson, Oct. 1826.

Lastly, what he considers *fair* reports may be gathered from the following paragraph, which appeared in the *Review* for 1824:—

"No man can command success in surgical operations; and if a surgeon fail from want of dexterity, he suffers mortification enough, Heaven knows, in the operation room, without being put to the cruel and demoniacal torture of seeing the failure blazoned forth to the public."

So much for Dr. James Johnson's consistency! *Fair* reports, then, are those which do not put the surgeon to the "cruel and demoniacal torture of having his want of dexterity blazoned forth to the public!" *Unfair* and "erroneous reports" are those which tell the humiliating language of truth! "We have ever advocated the one and decried the other," says Johnson, "and if this be inconsistency, we hope never to act otherwise!" It is not honest at any rate. The sophistry which runs through the first paragraph is so obvious, that we need say nothing about it, although we protest that we do not understand why the "records of hospitals," made by the surgeons, or some willing slaves about them, are perfectly free from that "suspicion of infidelity," which, according to this writer, attaches to the statements of private practitioners. Nor do we perceive that "the reporter being known, and, of course, responsible for errors or perversions of facts," will be much protection to the public, provided he keep his peace with the surgeons, which, by sometimes suppressing a case, sometimes concealing or garbling the truth, and constant servility, he may readily secure, perhaps, their "esteem" to boot, and other falsehoods, which cost nothing, and are but a *quid pro quo*, in the shape of testimonials. He may publish "*fair* reports," and get thanked for

his pains, but if he dare blazon forth any "want of dexterity," put the surgeons to "demoniacal torture" by telling the truth; or fail in giving a certain inclination to the cases, so as to prejudice the public in their favour; in short, if he discard party and friendship, and be determined to do substantial justice at all times, he will be accused of a malicious design against his betters—of faction, intrigue, and falsehood; and, finally, be ejected the hospitals. We have argued upon the supposition, to use the words of Dr. Macleod, that the hospital physicians and surgeons are "absolved from all responsibility with regard to the accuracy of the details," and that reporters capable of taking cases are known and willing to bear the heavy responsibility which is inseparable from the duty—but where are they? Nowhere to be found; and if the responsibility rests any where, it is either with Dr. Macleod himself, or with the hospital gentry, whom he has publicly absolved from all pretensions to accuracy. How, then, are Dr. Macleod's cases authenticated beyond our own, granting him, for the sake of argument, the *merit* of equal accuracy? We have published statements, reflecting in severe terms on some of our hospital surgeons, which, if false, might easily have been disproved, either before a legal tribunal, or at the bar of public opinion. Have they dared to confront us with either? Any attempt at "adulterating or colouring cases of this kind," to use the pharmaceutical slang of Dr. James Johnson, "would argue little else than insanity" on our part, who have no object in view, save the public benefit and the improvement of the profession; but the matter is widely different with those who have self-interest to gratify and indulge, and every reason to fear a public exposure, even of statements made by *themselves*, without being "absolved from all responsibility with regard to their inaccuracy!" Dr. Macleod throws his protection around them:—

Me, me (adsum qui feci,) in me conver-
tite ferrum,
Conclamat; mea fraus omnis; nihil iste
nec ausus,
Nec potuit:

and if any thing savour of "insanity," must take it all to himself, ere he can drag the unwilling drones from the holes and corners in which they have so long delighted to burrow and nestle themselves. One word more, and we have done: Dr. James Johnson speaks of recording "the more important cases occurring in hospitals in a book open to the inspection of all the students," and would have us believe that the cases in the yellow journal are of this description; that every stage of the treatment has been open to the critical eye of the student; but on looking through the last number, we perceive cases which happened in 1817-14-15-12, and one not longer ago than 1805, raked from their musty repositories to do homage to the wonder-working genius of Mr. Benjamin Brodie! and help to bolster up the reputation of Dr. Johnson's "respected cotemporary."

Why from the bleeding womb of mon-
strous night,
Burst forth such myriads of abortive
stars?

is a question which we shall endeavour to set at rest in our next Number, not having room in the present for so vast and important a subject.

Two or three cases treated by Messrs. BELL and SHAW, are useful illustrations, after the manner of *Pott*, of the importance of relaxing the muscles of fractured limbs, more especially when the upper portion of the femur is the seat of the accident.

"The rule of relaxing the muscles of a limb by position," says the writer, "may be considered of the greatest value in the treatment of fractures of the shaft of the femur; for it is acknowledged, that the shortening and deformity which are but too often the results of this accident, are produced by the numerous and powerful muscles which move this bone.

The obvious principle, therefore, to be

attended to in the treatment of the fractured thigh-bone, is to place the injured limb in that position which most effectually relaxes these muscles; and the double inclined plane appears to answer this intention better than any other form of apparatus as yet proposed. The distortion consequent on fracture of the femur, depends upon the upper portion of the fractured bone being displaced by the action of the strong muscles which are inserted into it. This displacement occurs in a direction upwards and outwards, the gluteal muscles dragging it in the latter direction, whilst the psoas and iliac elevate and rotate it outwards. It will also be perceived, that these muscles must act with greater force and advantage, when the fracture is high in the shaft of the femur; and, consequently, that the projection outwards, and the elevation will be increased, in proportion as the bone may be broken high up, and near the trochanters."

When the femur is fractured near the trochanter, a plane, fitted for one extremity only, is employed. "By this contrivance," says the writer, "we have it in our power to give the limb whatever direction, with relation to the trunk, we may think proper."

"This position consists in the inclination of the thigh and leg outwards, so that they may form an obtuse angle with the trunk of the body. By these means all the muscles will be relaxed; the lower portion of the fractured bone will be brought into a line with the upper; the broken extremities will be retained in due apposition, there will be no further tendency to displacement, and thus shortening of the limb will be prevented."

It should seem that Mr. BELL has not yet succeeded in banishing Desault's splints from the surgery of the Middlesex Hospital. JOE BURNS, we warrant him, is inexorable. So was CARTWRIGHT; and we are free to confess, that we have seen better limbs turned out of that hospital, under the auspices of the long splint, than by the apparatus here proposed; which, though well adapted to many cases, is far from being generally applicable. The best judge in London, of the relative value of the two plans of treatment, is the sensible nurse of Percy's ward—we forget her name,—Bayliss, we rather think.

We pass over Mr. TRAVERS's "case of wound of the carotid artery," because it has been fully reported in this Journal, Vol. X. p. 572. Some foolish person, to be sure, has added a few remarks on wounds of arteries, but these are quite unworthy of comment. He talks of "saltatory jets" of the blood flowing "per saltem," &c. &c.

Mr. HERBERT MAYO has made some experiments, with a view of ascertaining the effect of tying the ductus communis choledochus, in order to settle a question which seemed to have been decided some years since by Mr. BRODIE, (who tied the duct in young cats, and found that chylification was arrested, until Nature had repaired the mischief,) but which has lately been agitated by MAGENDIE, who, in the last edition of his Physiology, has the following note:—

"I have repeated the experiments of tying the ductus communis choledochus in adult animals; the greater number died of the consequences of the wound of the abdomen, and the violence attending the ligature of the duct. But in two cases, in which the animals survived several days, I was enabled to satisfy myself, that while chyle had been formed, and faecal matter produced, the faeces had not the usual colour; which is not surprising, as they contained no bile. The animals had not become jaundiced."

Mr. MAYO's experiments tend to confirm the deductions of BRODIE, and lead him to "suppose that M. MAGENDIE may possibly have overlooked some source of error in his experiments, or that the duct had been restored in the two instances which he mentioned, and that the bile had thus again found its way into the duodenum;" but Mr. MAYO does not perceive that the French physiologist found *no bile in the faeces*, which is sufficient proof that the duct was tied, and that it had not been restored. When Mr. MAYO makes his next attempt "to reconcile conflicting accounts," he will, perhaps, be less venturesome with his "supposes."

IN our last Number we noticed the resignation by Mr. LAWRENCE of the situation of surgeon to the London Ophthalmic Infirmary, and cautioned the Governors against approving of any recommendation from the present Committee, in favour of either of the candidates for that office. If the Governors of this, and other public charities, were aware of the manner in which such Institutions are usually "got up," and of the chicanery and intrigue on the part of the individuals who usually secure to themselves the management of them, they would, we conceive, exercise a greater degree of deliberation than they usually practise, before they place *certain persons* in offices of responsibility. We believe that the greatest portion of subscribers to public charities, are generally actuated by the best possible motives, and that they give their money with the unalloyed intention of mitigating the miseries of their suffering fellow-creatures. They ought, however, to recollect, that the simple act of signing a check for ten or twenty pounds, is not, in itself, sufficient for the attainment of so desirable an object; on the contrary, it often happens, that money thus bestowed, is employed for no other purpose than of supporting either unprincipled quacks, or some other intriguing scoundrels, who are continually ejaculating "charity, charity," with no other view than to their own individual advantage. The supporters of public charities, therefore, should see, that their *intention*, as far as is possible, is fulfilled. They ought to know that their money is properly expended, and should exercise a greater degree of prudence in the selection of those persons who usually constitute *Committees*. As these bodies have the entire government of the Institutions under their control, they not unfrequently act in direct violation of every principle of justice and of propriety; not only neutralise the benevolent efforts of the subscribers, but abuse the trust reposed in

them, by filling the offices of the Institution with some of their immediate relatives or dependents, who are altogether incompetent to the adequate execution of the duties which are attached to them. Governors should also bear in mind, that those individuals who are usually the most desirous of being placed upon Committees, are the least deserving of their confidence; such persons have, it is true, *charity* as they call it in view, but it is directed to themselves only.

Through the apathy of the great body of subscribers to public charities, it frequently happens that three or four active, bustling, intriguing fellows, contrive to get the conduct of each of these institutions into their own hands; and when in office, these worthies, with a view to display their consequence, construct by-laws of the most preposterous description. These reflections have been induced from a consideration of the circumstances which led to the establishment (amongst others) of the London Ophthalmic Infirmary, and of the recent occurrences which have transpired at that Institution. We believe the charity has lost the valuable services of Mr. LAWRENCE, in consequence of the disgust that Gentleman entertains towards those individuals who hold the reins of its government. The conduct of these persons is most extraordinary; in fact, to us it is altogether inexplicable. If they had been desirous that the public should derive extensive benefits from this establishment, they certainly would have exercised every effort to secure to the patients of the Charity, the scientific labours of a gentleman of Mr. LAWRENCE's attainments; but from the stupid, annoying, and narrow-minded system which they have thought proper to adopt, we understand he has retired in disgust, at which no one will feel surprise, when we state that the Committee, only two or three weeks since, enacted a by-law to the effect that "*no pupil should be allowed in future to take notes of cases;*" a

regulation so unjust towards those who have paid to see the practice of the Infirmary, so opposed to liberality, and so calculated to prevent the proceedings of the Institution from adding to our stock of scientific knowledge, that it was impossible for a man of Mr. LAWRENCE'S liberal character to continue any intercourse with such degraded beings. No one can feel surprise at his having left the Institution. There are candidates out of number for the office which he has left, but from another "enlightened" by-law, we fear that those persons who are the best capable to succeed him are disqualified; it having been enacted by some of the boobies composing either the present or a former Committee, that no person can be an eligible candidate unless he has been an apprentice to some Hospital or Infirmary, or a Demonstrator of Anatomy. The public, it is reported, are indebted for this enactment to Mr. TRAVERS. This constitutes a part of the *system*; it is a law, in fact, to secure the office to the apprentices of the London hospital surgeons, and as these gentlemen frame laws, and use all their influence to obtain for their apprentices, situations that lead to reputation and emolument, they render even the apprenticeship itself a matter of some importance; and thus we find them demand and receive premiums of one thousand guineas each for these situations, a sum which a merchant does not hesitate to pay with his boy, when he sees that the child, no matter what his capacity or incapacity, is sure, through the working of the *system*, of being thrust into some office which leads to reputation, if it be possible for him to acquire it, and to emolument, whether he deserve it or not. We entreat the Governors to reflect on these matters, and to make every possible inquiry into the attainments of the respective candidates, before they hazard a vote. Let each put this question to himself, "Am I about to give my vote to a man whom I would employ, if afflicted with disease of

the eyes?" Hospital apprentices will doubtless come forward on this occasion, with the most flattering testimonials from their masters and other hospital surgeons; but let the Governors heed them not, as they form part of a system, which is far more characteristic of avarice than of regard either to truth or justice. Let the candidates be asked what experience they have had in ophthalmic surgery; not what they have seen, but what they have *done*. If the Governors will but act with spirit and judgment at this juncture, they will rescue the Institution from the thralldom of an ignorant junta; will do justice to their own characters, and confer a valuable boon on the medical profession. The Governors should instantly annul the regulation which restricts the eligible candidates to those who have been Hospital apprentices, in which case they will be enabled to select their surgeon from a more extensive field of competent practitioners, and the Charity be thus made available to the purposes of surgical science. The order which interdicts the taking of notes of cases by pupils, should instantly be erased from the books; it is an act of gross injustice towards these gentlemen.

When we spoke of this Institution on a former occasion, our observations gave rise to some angry remarks from a part of the Committee; we were of course very much abused for having spoken the truth, and were threatened with "LAW." One was determined to maintain his dignity—a second to vindicate his honour—and a third to prove that the Institution was founded in the purest philanthropy, and that the most charitable feelings had influenced the conduct of those who had been officially connected with it. This is all very agreeable, we dare say, to the utterers, and we doubt not they are mightily in favour with themselves; at all events, if self-satisfaction be in the ratio of the success of a scheme, friend BATTLE is one of the happiest creatures in

the world, and it is impossible that we can lessen his enjoyment by indulging the Governors with a sight of his first efforts relative to the establishment of the London Ophthalmic Infirmary, in which they will not fail to discover an extraordinary desire for the welfare of the poor, patriotism of the most exalted description, and an inordinate anxiety for the advancement of surgical science.

This Infirmary was founded in 1805, for the "Benefit of the Public;"—so says the prospectus published in that year, to which is attached the name of RICHARD BATTLE, Sec.—for the *public*, so states the printed prospectus. But what says friend BATTLE to an acquaintance, on the back of the same prospectus? Here the secret comes out, with a vengeance—here we draw aside the curtain, and the objects presented to our view enable us to form a correct estimate of the *patriotic* feelings which gave rise to the establishment of this Infirmary! Of the late Surgeon to this Institution, Mr. SAUNDERS, and the manner in which he was upheld, and annually puffed, we shall speak in our next Number, having enough only of space left to insert the notes of FRIEND BATTLE.

"London, 17th Oct. 1804.

"MY DEAR SIR,—You will observe by the printed proposals herewith, what is going on FOR OUR FRIEND SAUNDERS. Knowing your good wishes TOWARDS HIM, and that you would be gratified at the progress made, I take the most early opportunity of acquainting you with it, and its success. A number of subscribers have already placed their names, so as to leave very little doubt as to the ultimate success of the BUSINESS. Mr. ANGERSTEIN, A CITY GREAT MAN, IS TO BE AT THE HEAD OF IT. * * * * *

"Your obedient servant,
"RICHARD BATTLE."

So, after all, it would appear, according to Richard, the Infirmary was not for the benefit of the *public*, but FOR OUR FRIEND SAUNDERS. From another printed document now lying before us, it appears, that on January 4, 1805, in a vigorous effort towards

the success of the scheme FOR OUR FRIEND SAUNDERS, a meeting was held at a City Coffee-house, when the proposal was read, certain resolutions agreed to, and a Committee chosen; in which, according to Mr. BATTLE's prediction, we find the name of ANGERSTEIN. At this meeting Mr. TRAVERS was in the chair, and, of course, subsequently became Surgeon to the Infirmary, established—for the *public*? no, for OUR FRIEND SAUNDERS.

In another note at the back of the Resolutions, and after the meeting was held, Mr. BATTLE says to his friend:—

"MY DEAR SIR,—By the inclosed you will observe the progress of SAUNDERS' plan. WE HAVE HAD HOT WORK OF IT—A ROYAL INFIRMARY having resulted from our plan. Look to our advertisements, 2d and 8th January, in The Times.

"Yours most truly,

"R. BATTLE."

Whilst these letters exhibit the HOT WORK displayed in the efforts of Mr. BATTLE's friendship for "OUR FRIEND SAUNDERS," they no less expose the TRADING which is carried on in the CHARITIES of this metropolis, and the mode in which the far greater portion of them are "got up." For the present we have done; but in our next Number we shall present the Governors with some other information on the subject of this Infirmary, and point out to them the manner in which their Institution was for some years employed in puffing a SECRET OPERATOR.

We advise our correspondent who is anxious to advertise himself by compiling a work on a subject of which he knows nothing, to employ a couple poor Germans to translate a few chapters on some diseases of the eye, from SCHMIDT, WELLER and BEER; as to the *pay* usually given, and for further particulars, we refer him to Mr. GUTHRIE.

As yet nothing has been done with regard to the disgraceful behaviour of the beadles of St. Bartholomew's Hospital. Mr. Gates still glories in his triumph over the medical men ; still laughs at the attempts of Messrs. LATHAM, VINCENT, and STANLEY, to rouse the Committee from their disgraceful apathy. Now we care little about the Committee neglecting their duty, when that negligence is not detrimental to the health of the wretched and unfortunate objects of the charitable founder's bounty ; but when these *delegates* or stewards of another's charity take upon themselves to support a contemptible underling in iniquitous conduct, it becomes every upright man to bring the delinquents to the bar of public opinion.

A patient died in Baldwyn's Ward about a fortnight ago, or rather more, in the extremely hot weather, between five and six o'clock in the morning, and the worshipful beadles, although sent to several times to remove the body, took no notice of the summons, but allowed it to remain in the Ward until the friends came to remove it themselves, which took place about one o'clock. The corpse of a patient who died in Darker's Ward on Wednesday week, in the evening, was allowed to remain in the Ward all that evening, not being removed until the following morning. Now, our medical readers are all aware of the disgusting effluvia arising from a patient after being operated on, and will join us in reproaching those who league together to uphold such a system. Mr. VINCENT was at the Hospital on the evening in question (Wednesday), and being told of the circumstance, went to the sister of the ward, complained of the beadles in strong terms, and said, if the body was not removed, he would certainly make a complaint to the Steward. The beadles, nevertheless, *did not remove it until morning*. The spirit shown by Mr. Vincent, on this and the former occasion, redounds much to his credit.

Is it not extraordinary the Committee do

not interfere in this business ? The great body of the Governors would never allow such conduct in their *employèes* to pass unnoticed and unpunished. The Committee, we believe, take an oath to do their duty conscientiously ; how, then, can they reconcile their conduct ? It appears to us, however, that their taciturnity on the present occasion goes pretty far to convict them of being — what we shall not say. If the Committee are determined to despise such motives to action as justice and charity, not to mention the obligation of an oath, can it be possible they have screwed up their minds to such a philosophic pitch of indifference, as to be able to meet with firmness the degree of public indignation which would most certainly be heaped on them, in case they were again to generate the (what was then termed) plague of 1822 in this Hospital ? In 1822 the contagious fever was very severe in its ravages in St. Bartholomew's ; and all London was in agitation until the Committee issued a bulletin to quiet their fears, and inform them that it was merely typhus. We cannot conceive any plan more admirable or better fitted to generate and spread such disease, to produce a like catastrophe, and again set London in an uproar from the dread of TYPHUS FEVER !

A few days ago, Mr. LANGSTAFF produced, at St. Bartholomew's Hospital, a preparation of a femur, which he described as having been fractured at its neck within the capsule, and in which there had been subsequent bony union. The head of the bone, instead of being smooth, was rough, and slightly excavated in several points, having the appearance of ulcerated bone. The head and trochanter were closely approximated, so as to leave no intervening space which could be denominated the neck ; the head and trochanter major being on the same level. There appeared a line of frac-

ture at the junction of the head with the great trochanter, and a complete plate of bone firmly uniting the two parts together. Mr. LANGSTAFF was ignorant of the state of the capsular ligament on examination! He showed the preparation to Mr. EARL, who seemed perfectly convinced of the fact. He said, that he had received, a few weeks ago, a preparation from a gentleman illustrating the same fact, and confirming him in the opinion he had formed, from the several specimens that had fallen under his notice. He (Mr. E.) had shown it to several surgeons and anatomists of eminence, who were alike satisfied that there had been bony union within the capsule. He was unable to give the particulars of the case, nor was he aware what was the STATE OF THE CAPSULAR LIGAMENT on examination. It is understood by many, that Sir ASTLEY COOPER is of opinion that such union cannot take place: but this is not the case; for he decidedly says, "that although in all the examinations which he has made of transverse fractures of the neck of the thigh bone, entirely within the capsular ligament, he has never met with an instance of bony union, or one where there was not motion of one end of the bone upon the other; yet he does not deny that, under peculiar circumstances, such union may be possible when the bone is broken, without the periosteum being torn, and when the fracture is oblique, partly within and partly without the capsular ligament." Now, as in neither of the above cases do the gentlemen know the precise condition of the capsular ligament, no one has a right to conclude that these cases come under any other head than an exception to the general rule, which Sir ASTLEY particularly mentions, viz. where the ligamentous sheath, and periosteum of the bone, have not been lacerated, or in so slight a degree as not to prevent the necessary circulation in the head of the bone, to produce the formation of osseous matter.

WE have received a long letter from a Mr. LEWIS SAYLES, of Sheffield, respecting the "new surgical operation" on the teeth, which appeared in our 160th Number. The opinion we then expressed of that operation, remains unaltered; and we did not deliver it until we had ascertained that we were proceeding on safe grounds. If Mr. SAYLES can send us a drawing of the instrument, which he says he has occasionally used for many years, with some substantial testimony of his having used it before Mr. FAY's instruments were deposited with the Society of Arts, we shall be disposed to award him the merit of originality to which he pretends. In the debates at the London Medical Society, and in the Westminster Hospital Report of the present Number, Mr. SAYLES may find the sort of information he seeks. It is not our business to puff Mr. FAY, or any other person; but, in the discharge of our duties, we shall not hesitate to award the palm of merit to the deserving man, whether English, American, or French, our motto being *palram qui meruit, ferat*.

A poor sexton, in the North of England, complained a short time ago to a traveller, that trade was dreadfully bad: "not a burial, Sir, have I had for these six months." Bad times, surely; but the trade of the three sextons to UNDERWOOD'S Mausoleum having dwindled to nothing, our friend JAMES has resigned the spade to his trusty colleagues, DARWALL and CONELLY. Alas, poor COP,

Mr. STONE, a reader of lectures on midwifery, attended the Hole and Corner meetings, for the purpose of preventing THE LANCET from publishing lectures; not his lectures, we presume, as he daily reads to his class the manuscripts of the late Dr. JOHN CLARK.

A correspondent inquires, if we have our price, because we have not given reports, of late, from the Middlesex Hospital; the reply is, that our friend JOE told us he had nothing there to sell. Joking apart, the cases having been worth nothing which have been admitted there for some time past, we have not felt disposed to trouble our devils with printing them.

The following case may serve to illustrate the sort of *discipline* observed at that Hospital:—

Yesterday afternoon, (June 26th,) a grand “set to” took place in *one of the wards* of this Hospital, between Tom Russell and another “lad of the fancy”—both patients here. At the commencement, betting was even; but after the second round, Russell’s opponent was the favourite, and 3 to 1 was readily taken by the dressers and nurses. The eighth round decided the point, and Tom was fairly thrashed; his antagonist having “queered one ogle,” Tom was “floored,” and, in the fall, **BROKE HIS LEG.** This is no joke.

Mr. BELL, in his clinical lecture of last week, recommended the pupils to take copious notes of all the cases alluded to by him:—“Gentlemen,” said Mr. Bell, “*every facility* will be afforded you for so doing, and without such attention on your part, my observations will be of little avail to you.”—It happens that Mr. Bell’s ideas of note-taking, have undergone some change. —How long have such facilities been afforded?

LONDON MEDICAL SOCIETY.

THE first meeting of the Society, for the present session, was held on Monday evening, the 24th of September.

Dr. CLUTTERBUCK, the president, announced to the Society, that during the last recess, the Council had been occupied with a subject of great importance to the Society, namely, the present state of the library. It had been found that the catalogue was in a very imperfect state; a revision of it had been made, and it was desirable that it should be printed; but not wishing to break in upon the regular funds of the Society, which would abridge the supply of new works, the Council thought it better to recommend that the necessary sum should be raised by the voluntary subscriptions of the members, and for that purpose a paper would be laid on the table for signatures. It is to be hoped that it will not be allowed to lie there long; as without such a catalogue, the literary treasures of the society are rendered almost useless.

The minutes of the last meeting having been read by Mr. FIELD, Dr. CLUTTERBUCK congratulated the Society on its prosperous condition, and expressed his conviction, that the present session would be as interesting as the preceding: and it would be in the recollection of the members, that the last session had been productive of more interesting and satisfactory discussion, than many of the former. In adverting to the more regular business of the Society, he observed, that no subject was more deserving their attention than the character of the prevailing diseases at the present period, as well as the state of the general health during the late recess. He saw many gentlemen present, who had extensive opportunities of watching disease, and he hoped that they would communicate the results of their observations, especially as during the autumn many diseases had assumed an epidemic character. By thus giving the results of their experience upon these subjects, whether orally or in writing, they could accomplish the essential objects of the Society. The question of contagion should not be lost sight of, as it was one of great importance, on account of its influence on treatment, and was as yet far from being settled; it was deserving therefore a thorough investigation, and the opportunities afforded to pathologists for making inquiries, were far from being limited. It was not to be forgotten that the healing art was, and probably ever would be, progressive; it was never likely to attain perfection, but we had a right to expect that something should be continually added to the store. By the joint