

goitrous who drank the same water as those who had never suffered at all.

There is a general feeling here, which I am convinced is true, that the water will not produce goitre unless the person inherit some tendency to it. I have found, as others have, that the poorer classes are the most subject to it; and in many cases I am sure that those who take beer or spirits are less liable: among the well-to-do there are some teetotallers, and I have seen goitre in several of these.

In obtaining my returns I left forms at the houses, and these supply my first table; but, not being quite satisfied, I examined all the children in the school myself, and append the result.

Goitre is so common that, unless the neck be very thick, it is not considered to be anything abnormal; hence my first table will only show most unmistakable goitres.

Many well-known facts will also be seen brought out strongly—as the greater tendency in women, and the greater liability of the right side.

I obtained from the villagers their ideas as to causes, and subjoin these in the order of their belief:—Family; water; parturition; strains and coughing; overcrowding; cold, &c.

As to sources of relief, they mention—wearing of flannel; pressure of shirt-collar; heavy bead necklaces; change of residence, and climacteric change.

I have met with several dogs, setters and terriers, with enlarged necks; but do not know enough about a dog's thyroid. These tumours, on dissection, are found to rest on the trachea, and are firm fibroid masses which in life cause a difficulty of breathing.

Returns from 829 persons.—Of these, 181 confess to goitre, of whom 58 are men and 123 are women. These occur—

81	most prominently or altogether on the right side;
20	left side;
80	are central, or indifferently on either side.

I examined carefully 234 school children, and of these 168 were goitrous. Returns as follows:—

	Goitrous.	Right side.	Left side.	General.
Boys under ten years	76	51	13	1
„ from ten to thirteen years	54	34	9	0
Girls under ten years	52	41	12	2
„ over ten years	52	41	13	1

Nent Head, Alston Moor, Cumberland, July, 1872.

## STRANGULATED INGUINAL HERNIA OF THE RIGHT SIDE.

ASPIRATING PUNCTURE; ISSUE OF FLUID AND GAS;  
IMMEDIATE REDUCTION; CURE.

By DR. LÉON LABBÉ.

SURGEON TO THE HÔPITAL LA PITIÉ, VICE-PROFESSOR AT THE PARIS SCHOOL OF MEDICINE, ETC.

THE extreme importance which the process of reducing hernia after an aspirating puncture must rapidly assume in surgical practice, the limited number of facts which have been known until now, and the interest there is in encouraging medical men to follow this direction, induce me to communicate the following case which I have just had an opportunity of observing.

In the night of June 20th Mr. D—, aged seventy, an exceptionally strong and robust individual, after a violent fit of coughing felt an intense pain in the right inguinal region. This was followed in a few minutes by nausea and vomiting; whilst a somewhat large tumour showed itself in the right inguinal region.

On the 21st, at 6 P.M., I first saw the patient, together with his ordinary medical attendant, who had employed taxis with great care, but to no effect. I then tried taxis myself, but was equally unsuccessful. The nausea and vomiting still continued; pulse 75. Taking into account the circumstance that strangulation dated only about eighteen hours, and that probably the anatomical lesions would be very slightly advanced, I without hesitation proposed puncture with the aspirator, and without further delay I introduced the No. 2 needle. About ten grammes

(two drachms and a half) of a yellowish liquid immediately escaped, together with a quantity of gas which I cannot exactly estimate. The tumour, which was as large as the fist, flattened immediately; and a very gentle pressure exerted for one minute near the neck of the sac caused complete reduction of the hernia. The patient felt immediate relief, and expressed his satisfaction.

During the few hours which followed—from 6 to 11, and more especially between 8 and 11 P.M.—there was a little vomiting, and more particularly nausea. The patient was somewhat feverish, and had slight rigor. I had administered, as I always do after reduction of hernia, whether by taxis or operation, pills of the gummy extract of opium (each containing one centigramme—one-sixth of a grain,—to be taken one every two hours, so that ten or twelve centigrammes may be absorbed in twenty-four hours), with the object of bringing on paralysis of the intestines. At 11 P.M. the symptoms above alluded to all disappeared, and from that time the patient enjoyed the most complete comfort.

June 22nd.—Pulse 60; countenance normal; scarcely any tenderness in the abdomen over the inguinal region.

23rd.—Three natural stools; no pain or fever; appetite excellent.

Eight days afterwards the cure, which had been evident even on the third day, had become quite permanent. The patient's health is now excellent.

Paris, July, 1872.

## A Mirror

### HOSPITAL PRACTICE, BRITISH AND FOREIGN.

Nulla autem est alia pro certo noscendi via, nisi quamplurimas et morborum et dissectionum historias, tum aliorum, tum proprias collectas habere, et inter se comparare.—MORGAGNI *De Sed. et Caus. Morb.*, lib. iv. Proœmium.

#### ST. BARTHOLOMEW'S HOSPITAL.

HYSTERIA.—VESICO-VAGINAL FISTULA.—RECTO-VESICAL FISTULA.—TRACHEOTOMY.

(Under the care of Messrs. CALLENDER and MORRANT BAKER.)

THE notes of the following interesting cases have been communicated to us by Mr. G. B. Ferguson, house-surgeon.

CASE 1. *Hysteria; a number of needles and pins removed from the arms and legs.*—M. D—, a fresh-coloured, artless-looking girl, spare but not badly nourished, was admitted into the hospital with the following history:—About four years ago she was subject to fainting fits, but has never appeared very excitable. According to her own account she had a fall last July whilst in service, by which her left knee was injured, and was for some time exceedingly painful. In this condition she was sent home, and the knee was then poulticed. After a day or two a needle was seen protruding over the patella; this her mother removed. As the knee was now better, she returned to her situation; but in about a fortnight, the same knee again commencing to distress her, she was again sent home, and before long five needles were removed from the same situation. After a short time the arms and legs became similarly affected. Things proceeding after this fashion, 101 needles and pins, many of large size, curiously twisted and deeply imbedded, were removed by her usual medical attendant, Mr. Wicksteed, of Walthamstow. Although some years ago she had a habit of swallowing strange things—pieces of paper and the like,—she is sure she never swallowed any pins or needles, and cannot, she says, give any explanation of their appearance. During her stay in the hospital in February last, ten needles and pins were removed by Mr. Baker and Mr. Ferguson.

The facts that the right hand and arm presented two marks only where needles had been withdrawn, whereas the left hand and arm showed thirty-seven marks, that the girl was right-handed, that the pins were all destitute of heads, together with other circumstances, led to the conclusion that the case was one of hysterical deception.