

over his left breast, but healed promptly after free evacuation and bichloride injection.

Case 3 was a most desperate one. A man 52 years of age was admitted to Mercy Hospital, with a compound fracture of the lower third of the femur. He was emaciated to the most extreme limit, his face haggard and eyes wild, but glazed and sunken in their sockets: his skin cold and moist, and his pulse small, thin, frequent and very difficult to count; his tongue dry and parched, could scarcely be protruded through his bloodless lips. He had an immense bed-sore over the lumbar region, extending down to the coccyx and over the buttocks. His right leg below the knee was discolored and had a large, foul ulcer. His left leg was twice its normal size. At the seat of fracture, at the lower third of the femur, were two large openings communicating with the bone, and through which was a rubber tube half an inch in diameter, and at least a yard in length, this extending almost a foot and a half outside of each of the wounds! Below the knee the leg was immensely oedematous and was confined in a large wooden crate, or cradle, extending from the knee to the ankle. At the lower part it had cut through until the tendo Achillis was exposed, although, well padded at the sides! This contrivance, which looked something like the boxes they transport peaches in, was so arranged as to swing the limb, and hence keep up all the motion possible at the seat of fracture. The stench from the wounds was almost unbearable, and they were literally alive with maggots, even the immense so called drainage tube being absolutely occluded with them.

This poor man had been injured nearly five weeks before, and, I say it with shame, had been attended daily all that time, by two men called doctors. He lived about thirty miles from the city, and the day before his "doctor" had told his friends "he had done all he could for him and they had better take him to the city." And he had endured the long trip in this awful condition.

With but the faintest hope of doing him any good, I gave him several drachms of whisky hypodermatically, and administered the A. C. E. anæsthetic. On examining the wound, we found that the whole thigh was infiltrated with the most putrid pus infested with maggots. Not less than two quarts of this was expressed, as two large sinuses extended, one in front to Poupart's ligament, and the other far up in the gluteal region. These sinuses were an inch or two in diameter, and were surrounded with a foul, greyish-black membrane. The bone was broken in several fragments, which were lying loose in the wound. Although I had not contemplated amputation, as the patient's condition forbade it, yet I thought it worse than useless to try to rally him under his present condition, and so amputated at the upper third of the thigh. I washed the wound with

water so hot that it instantly seared, as it were, the ends of the cut vessels, and afterwards drenched the sinuses time and again with water as hot as I could bear my hand in, and dusted the whole freely with iodoform. The flaps, of course, were left open. He reacted slowly, but Dr. McManus gave him hypodermics of whisky and ether almost every half hour during the night, and enemata of hot milk and whisky, with all the artificial heat he could get around him. He rallied perfectly, and although his convalescence was long and tedious, he recovered, eventually, with a new lease of life.

It seems astonishing in all three of these cases, and especially the last, that, notwithstanding the great quantity and deadly quality of the pus, nature had so carefully guarded them from pyæmia. It is also noteworthy that, although antiseptic precautions were almost impossible, yet the antiseptic dressings of the wounds certainly had much to do in the success of the operation.

DR. KOENIG: I feel like congratulating Dr. Davis on the result of his surgical interference, but I also feel like asking him to change the subject of his paper. He stated that he simply wanted to give us an evidence of the recuperative power of nature. It seems to me the subject should be the life-saving power of mercury. We have all seen how nature bungles, how she is unable to save life without the aid of the scientific physician. I think we should divide the credit, giving a large portion of it to mercury, or other antiseptics, and less to nature.

(*To be concluded.*)

SPECIAL CORRESPONDENCE.

Differential Criticism of the Spinal Cord.

To the Editor:—Nearly three-fourths of a century ago Longet, by very careful experimental research, concluded that sensory impressions were conducted solely by the posterior column of the spinal cord to the brain, and in his day this theory was generally accepted. Soon after Longet, or in 1823, Bellingeri demonstrated by experiments on living animals that sensory impressions were conducted to the brain through the gray matter of the cord exclusively.

Flint, in his text-book, p. 678, makes the following inquiries: 1. Does or does not the white substance of the posterior column of the cord conduct sensory impressions to the brain? 2. Does the entire substance of the cord act as a conductor of sensibility? 3. Does both the gray matter of the cord and the white substance of the posterior column act as conductors, or does either one act to the exclusion of the other?

"These questions," he further says, "may now be considered as definitely answered by the most positive and unmistakable results of experiments upon living animals, which leave no doubt with regard to the part of the cord which acts as conductors of sensory impressions." To the first query he says that whatever may be the function of the posterior white columns, they do not serve as conductors of sensory impressions. The sec-

ond question is as positively answered in these words: "When the gray matter is divided with very slight injury to the white substance, sensibility in the parts below the point of section is totally destroyed." And the answer to the third question is deduced from the answers to the first two. What can be more positive!

Again, Ranney, "Applied Anatomy of the Nervous System," p. 300, says, "The sensory fibres found in the posterior root (of the spinal cord) ascend in the column of Burdach for a short distance only, when they pass into the gray matter of the posterior half of the cord."

Other American authors are equally positive in stating that the sensory tract of the spinal cord is the gray matter, and almost certainly that portion of the gray substance near the central canal.

As students of medicine and seekers of truth, we have accepted this without mental reservation.

In opposition, however, to the foregoing, Byron Bramwell, of Edinburgh, in his recent work on the spinal cord, is positively contradictory.

By examining this work it will be found that Figs. 29, 30, 31, 38, 59 and 61, distinctly show the sensory tract of the cord to be the posterior white column, or the column of Burdach, and not the gray substance, according to Flint, Hammond, Ranney and others.

The explanatory text in Bramwell confirms the cuts in every instance. I am after the truth, if it is known. Who is right? STEWART LEROY McCURDY, M.D.

Dennison, O.

Shall The Journal be Removed to Washington?

To the Editor:—I prefer Chicago.

WM. T. CORLETT, M.D.

Cleveland O.

To the Editor:—I have waited until the present before expressing my opinion upon the action of the Trustees of THE JOURNAL, at their late meeting, advising that at the end of the present year, THE JOURNAL should be permanently established in a central office at Washington. The only argument offered in favor of the change was by one of the new Trustees who stated that *he voted for it because he was pledged to that course of action before his appointment.*

Few know better than myself the events which led to the establishment of THE JOURNAL, and its location in Chicago. It was but natural to expect that there would exist a rivalry between the leading centres of our great country for its possession, since it is easy to understand the power and influence which such a journal might exert if made the exponent of local interests. Fortunately for the Association and the Nation, the guardians of the interests of THE JOURNAL, have thus far been enabled to hold in restraint all ulterior influences, and have treated the interests of the different sections of our country with impartial justice.

There can be no doubt that a very much better journal could have been furnished by the expenditure of a much larger sum of money, but no one can now question the wisdom of the Trustees and the self-sacrificing economic care of our first editor, Dr. Davis, in adopting the "pay as you go system."

In its rapid growth and development, our journal is now justly considered the peer of any of the great weeklies of the Eastern cities, and under wise and energetic control it should become the leading exponent of the best medical thought in America. With such a history and such a promise of future good, what gain is to be expected by a change of location to Washington?

Is it because Washington is the capital city and the centre of the political influences of our country? Some have felt that already the greatest danger to our Association and its journal lies in the fact that a political ele-

ment has entered into its organization and is seeking control. If there is reason for apprehension in this direction, it would be a strong argument for its removal from Washington had it been established there instead of at Chicago.

Is it because Washington is a greater literary, medical, or educational centre than Chicago? We have all watched with amazement the wonderful growth of Chicago, until she has become the second great city of our country, and great as she is in wealth and commercial activity, those who know her best, know that she is lavishing her money upon libraries, art collections, universities, and schools of learning, until we in the East look with jealous eye at our fast departing preëminence. No city in the world has equalled her in growth and prosperity, and none give greater promise for the future.

As a center for ease of access, or for rapid distribution, Washington offers nothing in consideration. Whatever else may be said of medical journalism in common with every other publication, it must be considered as a business enterprise. "Can it be made to pay?" was the doubtful question asked at the baptism of our journal. "What are the profits already?" is the query meeting every suggestion for improvement, and "is it possible to defray the necessary expenditure?" The income of THE JOURNAL is dependent upon two factors, the subscription list and the advertising sheet. Can the Trustees show that in either respect the income is likely to be increased by its removal to Washington? The subscription list will depend, in a very large degree, upon the character of THE JOURNAL, and no one can doubt that its interest and value can at least be made equal in its present location to that of any other. I do not suppose that any one will advance the argument that it is really necessary to remove THE JOURNAL to Washington in order to provide for it a competent editor.

It is equally clear that THE JOURNAL can be published as economically in Chicago as in any other of the great centres of our country.

When we take into consideration the legitimate income to be derived from the advertising department, it requires little proof for the demonstration that the larger the local centre from which a journal emanates, the greater is the value of that journal for advertisers. On this account our journal is especially fortunate in having its home in Chicago, and we cannot help thinking that it would be most unfortunate and detrimental to its interests to remove it to Washington.

Boston, New York, Philadelphia, Baltimore, Cincinnati, Louisville, Nashville, St. Louis, each have their medical weeklies dependent largely upon local interests. Remove our journal from Chicago and the field will be open for the establishment of another weekly medical journal dependent in a large degree for its support upon its legitimate advertising.

Let the business interests of our journal continue to be transacted upon strictly business principles; secure for its management the best talent to be obtained and trust the future for its greatly increased usefulness. When the time comes that our finances will warrant the expenditure of a large sum of money for buildings and the accessories for a large publication house, then, and not till then, let the Association discuss the question of an elaborate home. For the present, at least, our Trustees have more vital subjects demanding their attention in increasing the value of THE JOURNAL and making it the worthy repository for the best medical thought and science of the new world.

HENRY O. MARCY, M.D.

116 Boylston st., Boston, Mass.,
January 19, 1891.

To the Editor:—Let THE JOURNAL remain in Chicago. It is certain that the place wherein it is published will largely impress its own character upon it. The fact that