

vented no new name, and worshipped no new goddess, for the disease of 1817; a pretty sure sign, Dr. Macpherson adds, that they did not think the disease a new one.

NOTES ON BOOKS.

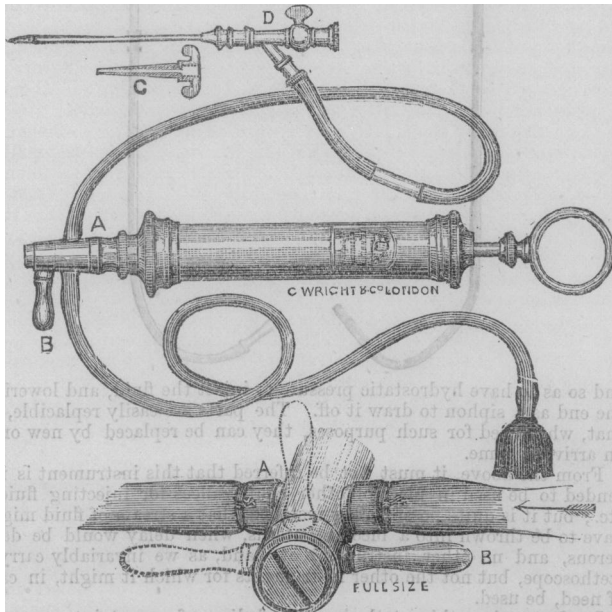
An Index of Surgery. Being a Concise Classification of the Main Facts and Theories of Surgery, for the Use of Senior Students and others. By C. B. KEETLEY, F.R.C.S., Senior Surgeon to the West London Hospital; Surgeon to the Surgical Aid Society. Second edition. London: Smith, Elder and Co. 1884.—Mr. Keetley is making his *Index*, by dint of judicious revision and addition of new material, a valuable dictionary of contemporary surgery. The student preparing for the higher examinations at the College of Surgeons and at the universities, can refer to any question which he hears discussed freely at his hospital, yet is not satisfactorily explained in the popular text-books. We do not think, however, that this work can be read through systematically by candidates. As we observed, in reviewing the first edition, the *Index* is particularly suitable for the hard worked practitioner, who cannot visit hospitals, and has no time to read through new text-books, nor long communications on special subjects in medical journals, or in the annual publications of societies.

REPORTS AND ANALYSES

AND
DESCRIPTIONS OF NEW INVENTIONS
IN MEDICINE, SURGERY, DIETETICS, AND THE
ALLIED SCIENCES.

IMPROVEMENTS IN SYRINGES.
By R. F. BENHAM, M.R.C.S., ETC.

HAVING observed for some time past the great inconvenience and expense one experiences in having to use various forms of syringes for the innumerable purposes for which they are required, both in medical and in surgical cases, I have been induced, in consequence, to modify the mechanism of the extremity of the ordinary type of syringe, so that one syringe may be used for numberless different purposes. The modification to which I refer will, I have no doubt, be readily understood from the accompanying diagrams.



A is a hollow T-shaped piece of metal, which is attached to the ordinary syringe in the place of its nozzle C. The handle B is attached to a coned plug, in which there is a rectangular aperture, so

that by turning the handle B either to the left or to the right, the way, so to speak, is opened to either the inlet or the outlet aperture, or *vice versa*, as desired. To the end of each transverse extremity of A, a piece of thick rubber tubing is attached, as in the ordinary aspirating syringes. To one extremity of the tubing a hollow weight is connected, whilst at the other various attachments may be adjusted; for instance, if the syringe be required for the purpose of washing out a cavity or syringing a wound, the nozzle C of the syringe may be attached to the extremity of the flexible tube, and thus fluid may be driven in either direction by simply turning the handle B to the left or to the right at will. Apart from the advantages to be obtained by applying this modification or addition A to an ordinary syringe, it may be mentioned that, first, it is impossible for one aperture to be opened before the other is completely closed, notwithstanding they may be of considerable size; secondly, no matter how small the extremity of the nozzle C may be, it does not impede the flow of the fluid when the syringe is being refilled; thirdly, when the nozzle of syringe is once *in situ*, it may be allowed to remain so until it is no longer required; fourthly, as there are no valves or complicated mechanism, the working parts cannot possibly get out of order or become corroded; fifthly, the attachment A may be applied to all existing syringes by simply causing the size of its screw to be made to correspond with the nozzle, while the other portions, such as a cannula and trocar, may be adapted at will. In conclusion, I may state that Messrs. C. Wright and Co., of 108, New Bond Street, have in stock various sizes of the attachments as above described, and that, on their receiving an ordinary syringe, they will supply them accordingly.

SUGGESTION FOR A SOLDIER'S POCKET DRESSING-CASE.

As great interest has lately revived on the subject of the antiseptic treatment of the wounded on the battle-field, a little pocket-case has been constructed for me by Messrs. Weiss. This is intended as a mere voluntary suggestion as to the possibility of every soldier on active service being provided with a simple antiseptic dressing; so that, in the case of overwhelming numbers of wounded, or from other reasons a surgeon not being within reach for some time, the wounded man would be enabled by himself, or with the aid of a comrade, not only simply to bind up his wound at once, but also to apply an antiseptic covering until skilled aid arrived. This little case is rather larger than a full-sized cigar-case, weighs under 9 ounces when filled, contains amply sufficient for a first dressing, is rounded off at the corners, and could, without discomfort or inconvenience, be carried in a breast-pocket on the left side.

The contents are as follows: 1, a large strip of protective; 2, a collapsible tube to contain an antiseptic cream (*e.g.*, of iodoform and eucalyptus); 3, a packet of carbolised tow, compressed; 4, about six yards of carbolised gauze bandage. Iodoform-wool, salicylic silk, or whatever antiseptic preparation might be in vogue, could be substituted, if preferred, for the cheaper carbolised tow. If, however, the question of expense could be overcome, I would suggest a small cylindrical dredger containing powdered iodoform instead of the collapsible tube, and compressed boracic wool instead of the carbolised tow, the iodoform-boracic dressing having proved of the greatest value in the treatment of gunshot-wounds in the late Egyptian war.

EDGAR M. CROOKSHANK.

A NEW FORM OF STETHOSCOPE.

By E. T. AYDON SMITH, L.S.A.

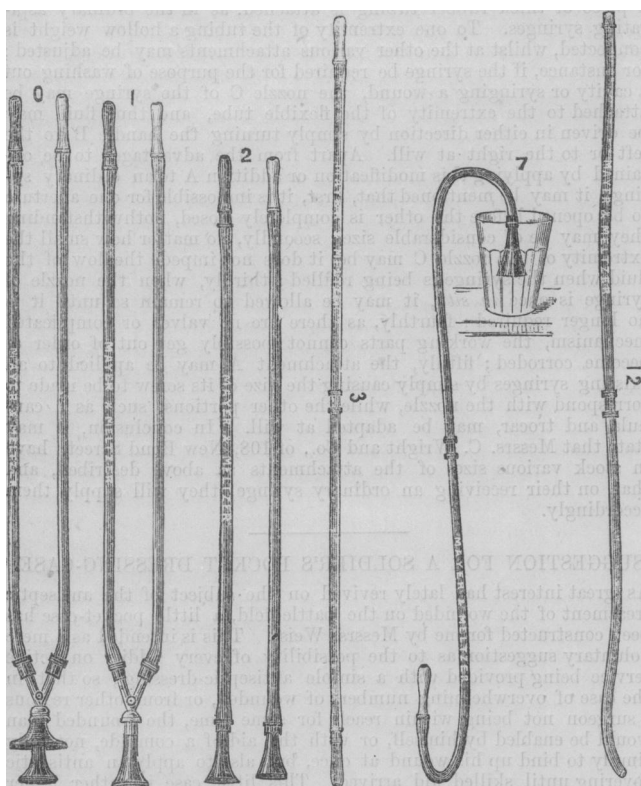
In originating this instrument, my primary object was to produce a stethoscope which would carry the sound to the ears direct, and not through tubes of different calibre, or through any cavity in the instrument which might in any way modify the sound.

I also intended that it should be of the smallest possible bulk, and capable of acting as a simple, a binaural, or a differential stethoscope, as required. I finally designed that it should act as a companion to the busy practitioner, in being useful for other purposes in an emergency.

I have had an instrument made by Messrs. Mayer and Meltzer, of Great Portland Street, the chest-piece of which is formed by a pair of ear-specula. The tubes are Jaques' India-rubber catheters, and the ear-pieces those of an otoscope.

The stethoscope is shown complete in Fig. 0; but, for greater portability, the larger chest-piece can be removed, and carried in the waistcoat-pocket, as in Fig. 1, although the whole instrument can

easily be carried in a watch-pocket, as it goes, when closely folded up, into an ordinary match-box 3 inches long 2 inches broad and 1 inch deep.



It will be seen by the woodcut that there is no cross-bar or elastic band in the middle, as in the ordinary binaural; so that the hum produced in some by the breath from the nose of the auscultator impinging on an elastic band is avoided.

It has a small tube communicating with the interior, and, by holding the instrument when in use in such a way that the index-finger is free to close it or leave it open (Fig. 6), the sound can be heard as



Fig. 6.

conveyed by either the simple or the binaural stethoscope, without moving the instrument, a greater depth of sound being obtained when the tube is closed.

It is converted into a differential stethoscope by placing one of the ear-specula in each tube, as shown in Fig. 2. By joining the tubes as in Fig. 3, it is an otoscope. By removing the ivory ear-piece, and joining one of the ear-specula (Fig. 10), it forms a useful means of administering an emetic or nutriment to a stubborn or an insensible patient, by passing the tube into the oesophagus through the nares, and using the speculum as a funnel. Fig. 7 shows it in use as a nasal douche.

In Fig. 11, it is shown as a tourniquet over the brachial artery, and

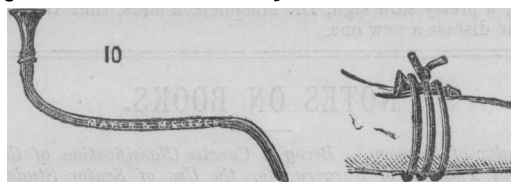
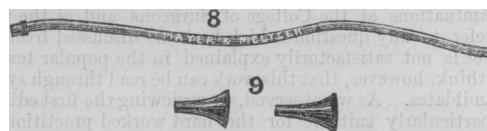


Fig. 11.

by using the edge of the larger chest-piece to compress the artery, the pulsation at the wrist can be stopped.

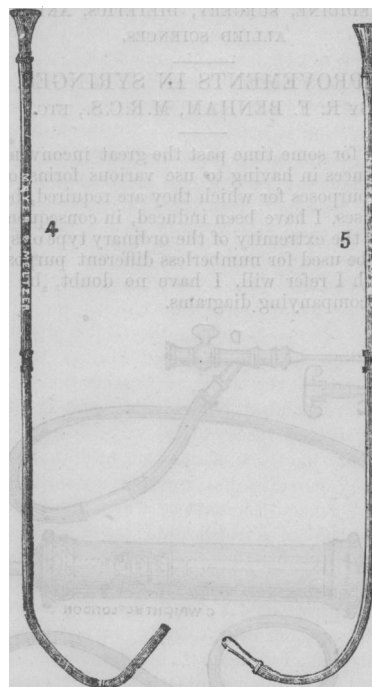
Figs. 8 and 9 simply show the catheters and ear-specula. If it



should have to be used as a female catheter, it will be found long enough when joined (as in Fig. 12) to reach over the side of the bed.

When connected as in Fig. 5, a sufficient hydrostatic pressure is obtained to administer an enema; but, if used for this purpose, care must be taken that the ivory ear-piece be not passed beyond the sphincter ani, or the India-rubber tube may be compressed so as to stop the passage of the fluid.

As shown in Fig. 4 (the ear-piece having been removed), it can be used to wash out the vagina, bladder, or any cavity, by raising the



end so as to have hydrostatic pressure to inject the fluid, and lowering the end as a siphon to draw it off. The parts are easily replaceable, so that, when used for such purposes, they can be replaced by new ones on arriving home.

From the above, it must not be inferred that this instrument is intended to be used in place of other contrivances for injecting fluids, etc.; but it is quite possible, for instance, that a stream of fluid might have to be thrown into a bleeding uterus, when delay would be dangerous, and no other instrument at hand, as we invariably carry a stethoscope, but not the other instruments for which it might, in case of need, be used.

In first using this stethoscope, a feeling of uncertainty may be conveyed as to whether the ear-pieces will retain their place in the ears; but when this passes off, it will be found to be a very convenient and serviceable stethoscope.