

PROVINCIAL MEDICAL AND SURGICAL ASSOCIATION.

APPOINTMENT OF DELEGATES.

At a meeting of the council of this association, held at Worcester, on Jan. 16th, it was resolved, "that Mr. Crosse of Norwich, Mr. Ceoley of Aylesbury, Mr. Wickham of Winchester, Dr. Cowan of Reading, Dr. Macartney late of Dublin, and Dr. Hennis Green of London, be added to the delegates lately appointed by this Association."

On Jan 5th, at a meeting of the Council of the British Medical Association, the following gentlemen were appointed to act as delegates:—Dr. Webster, Dr. Marshall Hall, Dr. R. D. Thomson, Mr. Wakley, M.P., Mr. Davidson, and Mr. Evans. Upon this subject we beg to ask two questions, and in so doing we beg to state distinctly that we do not wish to offer any *personal insult* to the very irritable president of the British Medical Association. Why were the names of Messrs. Wakley, Thomson, Davidson, and Eales, not added to those of Messrs. Webster and Marshall Hall, in the report of the "proceedings of council" sent to the "Lancet," and published in that Journal on the 9th of January?

Were not eleven members of the council present when the delegates were chosen; did not four of the eleven refuse to vote because sufficient notice had not been given; and did not the other six gentlemen *nominate themselves*? Thus will be presented the very curious phenomenon of six *self-elected* reformers protesting against the *self-elected* members of the medical corporations.

TREATMENT OF FRACTURES IN PARIS.

THE treatment of nearly all kinds of fractures by the starch bandage, is now almost generally adopted by the Parisian surgeons: M. Lisfranc and M. Jobert (of St. Louis) alone, I believe, raise their voice against the practice. It is adopted in the practice of Velpeau, Roux, and Blandin, and with the most favourable results; and if equable pressure, firm support, and well adapted support too, and an apparatus, which no movements or efforts of the patient can displace, are advantages in the treatment of fractures, this "appareil amydoné" certainly deserves the highest praise; and from the consequences of its application, from its results, which I have witnessed so very frequently during the past winter, I should say (with deference) that, according to my judgment, it is one of the greatest acquisitions of modern surgery, inasmuch as it is called in to the aid of perhaps the most numerous and important class of surgical accidents. In treatment of fracture, the object of the surgeon is, to fit the splints he employs as accurately as possible to the fractured limb, as shown by the manner in which they are often made to follow the curves of the limb: but how far from approaching true adaptation is that obtained by wooden, or even pa teboard splints! Again, the bandages by which these splints are adjusted become slackened, or slip down, or the splints become deranged through the restlessness of the patient, or the involuntary movements of the muscles of the leg. Moreover, complete rest, on the part of the patient, is required, to aid the cure, and the irksomeness of weeks must be endured in bed, when the leg is fractured. Now, all these inconveniences (slightly exaggerated, perhaps), or rather injurious attendants of this mode of practice are prevented by the starch bandage, which conjoins in itself all the true elements and essentials for the most rational treatment of fractures, and is superior to the method of splints and bandages, inasmuch as it approaches nearer to that point (I speak still with much deference), which it would be the perfection of apparatus to attain. In compound fractures, where there

is more than mere lesion of the skin, this apparatus, of course, cannot be employed, as the wound may require dressing every day, so that its application is not universal; but in simple fractures, or in fractures with simple lesion of the skin, where the only object is to keep the bones in place, and prevent the actions of the muscles, what can we wish for, more appropriate to our purpose? But there is a great question which may be misunderstood; viz. when should the apparatus be applied? Some surgeons tell us, that if the fracture is put up at once, *before* inflammation commences, the swelling is prevented; this is, no doubt, true to a certain extent (for the bandage is well known to be a most excellent remedy for inflammation in many circumstances, and hence an evident impropriety in the practice of those who content themselves with applying leeches and lotions only, in the first periods of a fracture); but that it is true, to its *full* extent, I cannot understand, for is not inflammation, effusion of blood, and swelling, a natural consequence of fracture? And from this it follows, that to apply this starch apparatus *at once*, would be no less than a folly; yet this has been made an objection to it, that it cannot be used in the first period of a fracture: but this is evidently a most weak objection, and unworthy of notice. The invariable practice of all the surgeons who employ this method, is, to dress the fractures for the first days merely with the common splints and bandages; but when the moment of inflammation has passed, and when the process of union may be supposed to have commenced, and absolute rest rendered requisite, to apply the immovable apparatus. I cannot but insist warmly on this treatment; for I have seen it so extensively employed, and with such favourable results, that I must have been blind not to have noticed its excellences; among not the least of which is, that the individual may quit his bed, and avoid the tediousness of continued lying (than which nothing is more a subject of complaint with the patient, and which, I think I may say, is often a matter of real suffering to him): this fact alone would be enough to stamp its usefulness.

M. Roux treats all his fractures during the first interval by a linseed-meal poultice, smoothly applied over the fracture; then bandages, pads, and splints; these are changed every day, until the starch bandage is applied. This meal poultice is sometimes, but not always, employed by M. Blandin. I do not know what would be the practice of these gentlemen in regard to fractures of the thigh, as I only saw three cases at the Hôtel Dieu during the winter, and these were all compound, and, of course, not adapted for this treatment with the starch bandage.

In the treatment of fractures of the leg in this manner, the great point of M. Lisfranc's treatment, position, is lost sight of. This position is the great pivot on which all M. L.'s notions of the treatment of fracture turn: any method, which takes little or no account of this, receives M. L.'s unqualified disapprobation.—*Dr. Markham on the Surgical Practice of Paris.*

MEDICAL NEWS.

THE chair of Practice of Physic in the Newcastle School of Medicine is vacant in consequence of the resignation of Dr. Martin Hamilton Lynch, who is about to remove to London; but it has been determined that the election of his successor shall not take place before May.

It gives us much pleasure to announce that Dr. Weber, of Grosvenor-street, has been elected physician to the St. George's and James' Dispensary. Dr. Weber is a young German physician of much promise. While, on the one hand, the interests of the charity cannot fail to be advanced by his services, the election of Dr. Weber, on the other, shows that the governors acted on a liberal principle, which, we are sorry, has hitherto been too much neglected in this country.