Association Intelligence.

British Medical Journal.] ASSOCIATION INTELLIGENCE. [April 4, 1863.

scared the sun before the ravages of the influenza of 1782, and he supposes "that the material which thus rendered the air unwholesome and muddy, probably caused the epidemic catarrh which prevailed in that year." Some sensible people in this country have, moreover, told me, that the influenza of 1843 was in like manner ushered in by continual dark and noisome fogs. Be this as it may, there is, in my opinion, no doubt that this our last epidemic influenza was in some way or other occasioned by the aforesaid dense and offensive fog: and it was, moreover, very remark-

able, that the smell of this fog, being quite unlike common fogs, was that of a highly concentrated ozonic gas, which immediately irritated the mucous membrane of the lungs, and most likely also the other mucous mem-

branes of the body.

SOUTH-EASTERN BRANCH.
WEST KENT DISTRICT MEETINGS.

The third meeting for the session was held at Graves-

end on March 27th, 1863; T. HECKSTALL SMITH, Esq., President of the Branch, in the chair. There were also present twenty-seven members and visitors.

New Members. Two new members were proposed and elected agreeably to the rules of the Association; viz., Joseph Stewart Burton, Esq., Woodlands Lodge, Black-

heath; and John Christopher Armstrong, Esq., of Gravesend.

Death of Mr. G. W. Martin. The meeting desired to express their sympathy with Dr. Adam Martin of Roch-

ester, in the bereavement which he has lately sus-

tained in the death of his son.

The Secretaryship. Dr. Dulvey tendered his resigna-

tion as honorary secretary to the West Kent district meetings, on the plea of ill-health and family affliction.

Mr. J. M. Burton proposed, and Mr. Hunt seconded, the resolution to accept Dr. Dulvey’s resignation; and they, at the same time, testified to the great ability, zeal, and success of Dr. Dulvey’s administration of the duties of secretary.

Mr. Fay followed in the same strain, and stated that the institution of the district meetings was solely due to Dr. Dulvey.

Dr. Dulvey returned thanks, and said that he rejoiced to see district meetings in so flourishing a condition on his ceasing to hold office.

"That Dr. Frederick James Brown of Rochester should be the secretary."

This resolution was put and carried unanimously.

Communications. The following communications were made:

1. Ascites and Anasarca in the Fetus; a successive case to that reported in the autumn of 1861. By J. M. Burton, Esq.

2. A conversation was induced by Mr. Hunt (of London) on the Epidemic Prevalence of Scabies at the present time. One gentleman recommended for the cure of the disease sleeping in powdered sulphur strewn over the sheets. The eruption now prevalent is said to somewhat resemble rufus.

3. Mr. Durham of Guy’s Hospital demonstrated the use of the Laryngoscope. He was assisted by Mr. Hillien, who kindly made himself the subject of the experi-

ments.

The usual thanks were voted, when the members and visitors adjourned to dinner.

ERRATA.

At page 338, column 1, of last week’s Journal, in the list of new members admitted into the Metropolitan County Branch, for “Clark, Alfred, M.D.”, read “Clark, Andrew, M.D.”; and for “Norton, Richard, M.D.”, read “Norton, Robert, M.D.”

Reports of Societies.

ROYAL MEDICAL AND CHIRURGICAL SOCIETY.
TUESDAY, MARCH 24TH, 1863.

RICHARD PARTRIDGE, Esq., F.R.S., President, in the Chair.

ON DIPHTHERIAL NERVE AFFECTIONS. BY EDW. HEADLAM GREENHOW, M.D., F.R.C.P.

The author began by stating that the epidemic sore-

throat which, under the name of diphtheria, had lately engaged so much attention, was well known to be fol-

lowed by nervous phenomena of a peculiar kind. These consisted chiefly of impaired, excessive, or perverted sensibility, together with more or less complete paralysis of the muscles of the face, pharynx, tongue and lips, extremities, trunk, and neck; the frequency of the occurrence of these symptoms in the several sets of mus-

cles being nearly in accordance with the order in which he had placed them, the first named being the most frequently and the last the least frequently affected.

The author had had the opportunity of watching the course of several cases of these diphtherial nerve affec-

tions in patients under treatment at the Middlesex Hos-

pital, and the present paper was in a great degree based on those observations. He did not mean to infer that every attack of diphtheria was followed by some of these secondary nerve affections, for he had seen patients recover perfectly without experiencing any of them; nor to assert that their intensity was always proportioned to the severity of the primary disease, for he had sometimes seen them follow comparatively mild attacks of diph-

theria. Nevertheless, as a general rule, he had certainly observed these nerve affections to be more frequent after the worst cases of diphtheria, and to bear some propor-

tion even to the local severity of the particular case he had noticed, for instance, that the paralysis and anesthesis were sometimes more complete on that side of the fauces which had been most severely affected by the primary disease.

The author had found that a brief period of convales-

cence—generally not exceeding a few days, but in some cases extending to weeks—almost always intervened be-

tween the disappearance of the sore-throat and the ac-

cession of the nerve symptoms; and cases had fallen under his notice in private practice in which patients who had recovered sufficiently from diphtheria to be sent home for change of air, had subsequently fallen into a helpless condition from diphtherial paraly-

sis. The fact of this interval seemed to him important, inasmuch as it went far to show that the paralysis could not be entirely attributable either to the albuminuria which so often accompanies the acute stage of diphtheria, or to the anæmia which closely follows it, as patients who had often got rid of the former symptom, and had even begun in some cases to regain flesh and strength, before the accession of the paralytic symptoms.

The author had observed that these nerve affections do not at once attain their maximum of intensity, but are progressive even in the same sets of muscles; and also that if several of the sets of muscles which he had enumerated should be attacked in the same individual, they do not become affected all at once, but in succes-