

perature, and so prone to be loaded with organisms as to have been regarded with repugnance in all times. In proof of this, he adduced the authority of Frontinus, Curator of the Roman Aqueducts in the first century; and of Fabretti, at the close of the 17th. At Boston, it was found that the water brought from Lake Cochituate was bad on account of animalcules. Dr. Letheby disagreed from the idea of Dr. Frankland, that the fleas in the water of St. Mary's Loch could do no harm to the human system. He quoted from the evidence of Mr. Homersham, C.E. (Report of the Royal Commission), to the effect that the soft water of Manchester was injurious. Among foreign authorities, Moleschott attributed frequent diarrhoea in the Netherlands to the still-running river water; Boussingault asserted that the saline substances in water were necessary for alimentation; Dupasquier, Riche, Osterlein, Poggiale, Boudet, Tardieu, Lefort, Bouchardat, Agassiz, and other eminent men, also spoke to the same effect. As to the variability of temperature of lake-waters, and the uniform coolness of spring water, the evidence of MM. Commaille and Lambert at Rome were adduced. There were, it was true, objectors, but they were few, and their statements incomplete. The best and tallest men were to be found over the lime and coal formations, and drank hard water. The same was the case with the Patagonian savages, the most gigantic of the human race. Experience showed that the same was the case with cattle, sheep, and horses; the finest came from hard water districts. Government Commissions in England, France, and Austria, had declared in favour of hard water, and condemned the misapplication of the chemical impurity to minerals found to be universally present in natural springs and streams. A more striking fact than all was the high death-rate in soft water districts.—A discussion followed, in which Mr. Radcliffe, Mr. Holland, Dr. Tripe, Dr. Rygate, Dr. Tidy, Dr. Stevenson, Mr. Lord, Mr. Wanklyn, Dr. Druitt, and others, took part. Dr. Letheby having replied, the meeting, the last of the present session, terminated.

MEDICAL SOCIETY OF THE COLLEGE OF PHYSICIANS, IRELAND.

WEDNESDAY, APRIL 26TH, 1871.

HENRY KENNEDY, M.B., in the Chair.

DR. HENRY EAMES reported a case of Leucocythæmia. The patient was a stone-cutter, aged 35. Five years ago, he was suddenly seized with a violent pain in the left hypochondriac and lumbar regions. Subsequently he had troublesome attacks of vomiting after or during meals. However, he remained tolerably well until January 1870, when a large tumour made its appearance in the left part of the abdomen after a severe cold. Diarrhoea then set in, and the stools were often jelly-like. He suffered from similar recurrent attacks during the remainder of last year, and, at times, from intense pain in the left side. Otherwise, the tumour gave him no annoyance, except from its increasing weight. The diagnosis of leucocythæmia was made in England. When admitted to hospital, the patient's skin was yellowish, but the conjunctiva were clear. Some œdema about the ankles and legs was present, and increased considerably when he was long in the upright position. He was not very anæmic in appearance. There was no cardiac murmur. The abdomen was much enlarged, measuring thirty-four inches and a quarter in circumference at the level of the umbilicus, and thirty-seven inches half way between that and the ensiform cartilage. The entire left half of the abdomen was dull on percussion, and the right edge of a vast tumour could be distinctly felt, running down from the ensiform cartilage, a little to the left of the mesial line, to the symphysis pubis. Two well-defined sulci were observable in its right border. The blood showed a simultaneous decrease of the red discs and increase of the white cells, the estimated proportion being one of the latter to three of the former. Of thirty-five ounces of urine, the quantity passed in a selected period of twenty-four hours, two samples were analysed. The first was slightly acid, and its specific gravity was 1015.7. The solid matter amounted to 4.31 per cent.; the urea to only 1.06 per cent. The second specimen contained 4.9 per cent. of solid matter, and 1.08 per cent. of urea. The deficiency in the quantity of urea was very remarkable in this case. The patient was presented to the meeting, and specimens of his blood were exhibited under the microscope.

DR. GRIMSHAW read an account of a case simulating Typhoid Fever. A labourer, aged 24, was admitted on March 23rd last, having been four or five days ill. He had all the symptoms of typhoid fever: diarrhoea, ileo-cæcal tenderness, high pyrexia, the pulse being 120, and the temperature 103.5 deg. There were also rose-spots scattered over the abdomen. On the 27th, in the afternoon, sudden intense pain set in in the abdomen, the legs were drawn up, the feet became cold, and the pulse sank. These symptoms of perforation were speedily followed by

extreme collapse, and the patient died in a few hours. On *post mortem* examination, considerable evidences of peritonitis were observed. On the internal surface of the intestine, no ulcerations appeared, but there were numerous patches of hyperæmia. In the vermiform appendix, however, a perforating ulcer was discovered, and in its neighbourhood a foreign body or concretion was found. This proved to be composed in great measure of the calcium and ammonium phosphates. The man died on the ninth day of his illness.—In the course of the discussion that followed, the Chairman remarked that the case seemed to him to have been one of essential fever.—Dr. DUNCAN took the same view, and asked whether the early date of death in the illness might not explain the absence of the usual appearances of ulceration of Peyer's patches.—Dr. GRIMSHAW briefly replied, and the Society adjourned.

CORRESPONDENCE.

CLUB ELECTIONS.

SIR,—In answer to Mr. Manley's letter on club elections, I think that, when the facts are truly stated, Messrs. Duncliffe and Evans will not appear quite so black as Mr. Manley has painted them. The following statement will explain the unfortunate transaction.

On Monday, June 5th, at 5.30 P.M., a deputation from the Committee of the Trinity Church Sick Society called at my surgery to say they were going to elect a surgeon to the Society that evening, at three shillings a member *per annum*, and to ask if I would be nominated. In my absence, my sister, from previous knowledge that I held such contracts at the terms stated, sent an answer to this effect—"that if Mr. E. Evans were elected by the majority of the members he would accept the appointment." Had I received the application in person, I should only have consented to be put in nomination on the same terms with Mr. Manley. I very much regret the mistake; and if Mr. Manley had asked for an explanation, instead of denouncing me in such ungentlemanly terms to my partner, I should have offered him an ample apology. I am, etc., ALFRED P. EVANS.

West Bromwich, June 12th, 1871.

P.S. I send letters from the Chairman and the Committee's deputy, if you will kindly insert them.

The Hollies, West Bromwich, June 12th, 1871.

Dear Sir,—I am in receipt of your favour of the 10th inst., and copy of the BRITISH MEDICAL JOURNAL containing Mr. Manley's letter. In reply to your question, I, as Chairman of the meeting to which Mr. Manley refers, beg to inform you that I have looked at the minutes of that meeting, which were taken down at the time, and find therein no statement of any application having been made either by Mr. Duncliffe or yourself for the post of surgeon to the Club referred to.

It appears by the minutes that a resolution appointing you surgeon to the Club was proposed; but that an amendment was carried, to the effect that Mr. Manley should be the surgeon for the ensuing year if he would accept the office at three shillings per member; and, on his consenting to do so, he was unanimously re-elected.

Yours very truly,

FRED. C. JONES.

A. P. Evans, Esq.

West Bromwich, June 12th, 1871.

Sir,—I beg to say that I was deputed by the members of Trinity Church Friendly Society to see and ask you if you would become the surgeon to the Society. When I called you were not at home; but I saw your sister, who afterwards sent me a note to say you would, no doubt, do it; and on the strength of that I nominated you, and your name was very well received by the members present. To show that I did not take the matter up on my own responsibility, the members passed a resolution that if I were not back when my name was called I was not to be fined when the roll was called over. You can make use of this if you think proper. I am, yours truly,

To Mr. Evans, Surgeon.

C. BASSETT.

SIR,—Mr. Manley's letter asserts that the "episode in the history of club elections" therein described ends the last trace of any material good as the result of our recent agitation. *Ex uno disce omnes* will not be fair to us in Wolverhampton. A large club in this town having determined to change their doctor, gave the customary notice, and took steps to appoint a successor. The election took place last week; and I hear from members of the Committee that they were obliged to re-elect the old one, because none of those who had been invited to apply for the vacancy would accept the office for less than five shillings per head *per annum*, and they were determined not to give more than four shillings, the old rate.