

of all acceptance. They well deserve to be the country-women of Florence Nightingale—and no higher panegyric can be pronounced.”

THE *Journal of Psychological Medicine*, which was established in 1848 by Dr. Forbes Winslow, and has since then appeared under his able editorship, is to be discontinued—at least, in its present form. In an amiable and kindly spirit, Dr. Winslow lays down the editorial *bâton*, which he has so long wielded to the satisfaction of his numerous readers.

OUR obituary of this day contains a notice of the death of an old member of the Association, Mr. Henry Swift of Liverpool. The decease of this gentleman is attributed to typhoid fever, contracted in the discharge of his duties as one of the medical officers to the parish of Liverpool—an appointment which he had held during the last eighteen years. He was also, since the beginning of the present year, surgeon to the northern division of the Liverpool police.

L'Imparziali relates that a woman at Florence lately produced four children at a birth. The placenta was single, and had attached to it four cords.

M. Reybard's conclusions, in the late discussion on urethrotomy, in the Surgical Society of Paris, are: 1. When the stricture interferes with micturition, is superficial, and of small extent, it may be simply incised. In this way, we obtain a temporary result, which may be also obtained by dilatation; but which is obtained more rapidly by incision, and without accidents. 2. In other cases, where a radical cure is desired, we incise superficially, and dilate largely, once only; this proceeding is expeditious, and gives definite results. M. Reybard obtained, in fourteen cases, fourteen cures without accidents. 3. Deep strictures must be incised largely; and the operation is serious, on account of the deep nature of the incision required. In this deep urethrotomy, M. Reybard has often observed accidents, but has only lost one patient in seventy.

A PUTRID WELL. At a meeting of the Truro Town Commissioners, an extraordinary fact was brought to light. The surveyor admitted that there was a public pump in Rosewin Lane, which had been used by the poor people in that populous neighbourhood for the last two years, and was found to emit such a stench that workmen now employed could not stand over its mouth. The well was found to contain a large quantity of decomposed wood, from the decayed pump-tree and other sources, and a common sewer opened into it. The poor people of Truro have to trust altogether to these public pumps for their supply of water for culinary purposes; and as they are “few and far between,” the effect upon the health of the neighbourhood by the use of water in such a filthy condition is incalculable. It appeared that complaints had been made respecting the pump two years ago, and the grievance had only recently been remedied.

Association Intelligence.

BRANCH MEETINGS TO BE HELD.

NAME OF BRANCH.	PLACE OF MEETING.	DATE.
SOUTH MIDLAND. [Autumnal.]	Infirmary, Northampton.	Thurs., Oct. 22, 1 P.M.
BATH AND BRISTOL. [Ordinary.]	York House, Bath.	Thursday, Oct. 22, 7.15 P.M.
SHROPSHIRE SCIENTIFIC. [Ordinary.]	George Hotel, Shrewsbury.	Tuesday, Oct. 27, 5 P.M.

SOUTH-EASTERN BRANCH: WEST KENT DISTRICT MEETING.

THE next meeting will be held at the Town Hall, at Maidstone, on Friday, October 30th, at 2 P.M.

Dinner will be provided at the Mitre Inn at 5 o'clock. Tickets, 5s., exclusive of wine.

FREDERICK J. BROWN, M.D., *Hon. Sec.*

Rochester, October 13th, 1863.

SHROPSHIRE SCIENTIFIC BRANCH.

THE next meeting will be held at the George Hotel, Shrewsbury, on Tuesday, October 27, at 2.30 P.M. Dinner will be ordered at 5 P.M.

SAMUEL WOOD, *Hon. Secretary.*

Shrewsbury, October 14, 1863.

BIRMINGHAM AND MIDLAND COUNTIES BRANCH: GENERAL MEETING.

A GENERAL meeting of this Branch was held in the Medical Department of the Birmingham Library, on Thursday, October 8th; ALFRED BAKER, Esq., President, in the chair. There were also present twenty-two members and visitors.

Paper. A paper was read on

A Successful Case of Ovariectomy; Remarks on the Selection of Cases, and on Certain Details in the Operation. By F. Jordan, Esq.

Reports of Societies.

LIVERPOOL MEDICAL INSTITUTION.

OCTOBER 1ST, 1863.

A. B. STEELE, Esq., Vice-President, in the Chair.

Testimonials from Medical Men. Mr. LOWNDES drew attention to a letter that appeared recently in the *Medical Times and Gazette*, with reference to the printed testimonials affixed to “Martin's Infant Preservative”.

Dr. STOOKES explained that, until he saw the letter referred to, he was not aware that his name had been so made use of. Mr. Martin had come to him for a certificate of the harmlessness of this medicine, to satisfy the coroner in a particular case. He thought the mixture contained carbonate of magnesia, chloric ether, and syrup. Mr. Steele, however, who had also seen the prescription, thought it contained a very small quantity of laudanum. When he saw what use had been made of this certificate, he wrote to Mr. Martin, and received an answer which he read, and which stated that the use of the certificate as an advertisement was quite without Dr. Stookes's knowledge.

THE CHAIRMAN said the dose of laudanum was very minute. Mr. Martin had called on him also for a cer-

tificate, and had said positively he only wanted it for the satisfaction of the coroner.

Mr. TOWNSON spoke very strongly of the impropriety of any physician lending his sanction or support to any such nostrum.

Dr. STOOKES said he had directed Mr. Martin to remove his name from the wrapper alluded to.

OPENING ADDRESS. BY THE CHAIRMAN.

Mr. STEELE said that, though the Society could not congratulate themselves on being a numerous assembly, yet they were consoled by the reflection that to their little band was due the credit of evincing, by their presence, a sincere desire to promote the efficiency of the Institution, and thus to discharge an important duty to the profession. It seemed to him that no member of this Institution, who habitually absented himself from the meetings, except, of course, he were prevented by unavoidable causes, could be held excused from a serious dereliction of duty; and he would further affirm, that no practitioner of the town, however successful his career, or however brilliant his acquirements might be, could be said thoroughly to appreciate and faithfully to discharge all that he owed to himself and to his profession, so long as he stood aloof from this Institution, and deprived it of that aid and support which his influence and means might be expected to afford.

After alluding to the building in which they were met, a building such as the medical profession in no other town in the kingdom had the privilege to possess, and to the valuable library here preserved, he spoke of the advantage of the meetings held twice a month, to hear cases and papers read and discussed, and for the exhibition of pathological specimens; and he thought it impossible to conceive that the result of a number of men of education and refinement coming together month after month, to deliver themselves of thoughts and opinions, to discuss and criticise each other's views, sometimes, indeed, to engage in a keen intellectual combat, could be otherwise than conducive to the progress of our art, as well as most useful and instructive to the individuals taking part in it. He was persuaded that much good was effected by the members of the profession coming into contact with, and thus becoming better known to, each other; and he regretted that attempts to combine with the meetings a more thorough development of the social element had not hitherto succeeded.

On those comparatively rare but important occasions when an united expression of opinion on professional subjects seemed to be called for, this Institution afforded facilities for attaining that object with energy and promptitude; and that these advantages had not been neglected, the annals of the Institution sufficiently testified. Looking back for a few years, many could recall a memorable occasion when an esteemed and highly deserving member of our profession was the subject of a base and cruel attempt to blast his reputation; and when, at a meeting held in this building, the verdict of the profession overwhelmed his assailants with defeat and dismay, and at once restored him to the position from which he had for a time been wrongfully excluded. On a later occasion, when a certain form of quackery, especially mischievous and contemptible from the fact that its main supporters are renegade members of our own profession, ventured to thrust itself into closer contiguity than was deemed reputable or tolerable, this Institution came boldly forward to maintain its position and dignity, and that with no uncertain voice.

On a still more recent occasion, the practitioners of Liverpool, as represented by this Institution, published, without respect of persons, their solemn protest against the prevailing iniquity of medical men prostituting their talents and their influence in behalf of those who, for their own base and sordid ends, essayed the ruin of the very men to whom they were indebted for the greatest

kindness and consideration. He alluded, of course, to the subject of medical prosecutions; and thought they had in this matter lately seen the good effects of the firm and dignified position assumed by the profession on this most important point of medical ethics. At the recent trial at the Liverpool Assizes, although it was rumoured that some medical men were so regardless of their own self-esteem, and of their duty, as to lend themselves to aid the prosecution, yet they were, on that occasion at least, spared the humiliating spectacle of medical advocates coming publicly forward to swear away the reputation of a professional colleague. He thought he might venture, in the name of the Institution, thus to express his cordial sympathy with those gentlemen who, as defendants, had been subjected to so harassing and annoying an ordeal.

After speaking further of these trials, and of the difficulty or hopelessness of trying to enforce that by Medico-Ethical Societies, which our feeling of duty to each other and our professional honour fail to bring about, the chairman passed on to a brief consideration of the recent Medical Act, and observed that this great desideratum that was to have exterminated quackery, and to have elevated true medicine to a position never before attained, had led to results which were, considering the time and trouble it had taken, most disproportionately, nay microscopically, minute. He compared the profession to the frogs in the fable who prayed to Jupiter for a king; first they got a stork who gobbled up their guineas; and next they were vouchsafed a log which proved an incumbrance without any compensating utility. Our reformers, like most reformers, went to work on the levelling principle; but, unfortunately, in our case, the levelling has taken place from above downwards, instead of from below upwards. The once honourable and respected section of our profession, the pure physician, was now lost in the *mêlée* of L.R.C.P.s, graduates who had never graduated, but had straddled up all the steps at once.

With regard to the suppression of quackery, nothing could be a more consummate failure than Section 40, which was just sufficiently obscure to lead us into useless and expensive litigation. By prosecuting these people ineffectually, we only increased their number and augmented their arrogance and rapacity. The duty of suppressing this nuisance belonged to the general public, who were the sufferers, rather than to the medical body; and we, perhaps, actually did good to these quacks when we led the public to believe that we were acting from fear for our own interest, rather than from our wish to eradicate a public evil.

In conclusion, the chairman said that the progress and position of the Institution sufficiently testify that there was no just cause for apprehension as to its continued prosperity. The meetings, though not numerously attended, were kept up with increasing spirit and interest; and the building itself was maintained in a state of thorough efficiency; and that in spite of difficulties that would not exist if the whole profession of the town did their part.

On the motion of Mr. HAKES, seconded by Dr. WATERS, a vote of thanks was accorded to the chairman for his address.

PATHOLOGICAL DEPARTMENT.

Amputation at the Ankle-joint. Mr. BICKERTON showed a foot that he had just removed at the ankle-joint. It had been crushed in a railway accident, and he had been in hopes to save a part of the foot; but the deeper parts were so much more severely injured than the state of the integuments led him to expect, that he was obliged to give up the partial operation.

Long Retention of Acidity by Urine. Dr. BALMAN showed a specimen of urine from a patient who was suffering from a rather rare skin disease—absorption of the

pigment of the skin of the face. His skin, formerly dark, was becoming light and mottled; the hair of his head was black, but his beard was turning white. The peculiarity of the urine was, that though passed ten days ago, it was still highly acid; its specific gravity was 1025.

ROYAL MANCHESTER INSTITUTION:
MEDICAL SECTION.

WEDNESDAY, OCTOBER 7, 1863.

E. LUND, Esq., in the Chair.

ONE new member was elected, and seven proposed; and a large addition to the library was announced.

Conjunctivitis, etc., from Lightning. DR. SAMELSON exhibited a boy who, during a thunderstorm, was suddenly affected with symptoms of acute conjunctivitis—pain, redness, photophobia, etc. These symptoms lasted for a day or two, in conjunction with some pain in the bowels, and a parched and discoloured state of the mucous membrane at the orifice of the nostrils and mouth. Five days afterwards, a mere trace remained. The patient was the only one affected out of some thirty children present with him at school.

Dilated Aorta. MR. MIDWOOD exhibited a specimen of dilatation of the abdominal aorta from a patient who had died of dysentery.

Total Absence of the Iris in both Eyes. DR. SAMELSON exhibited the case of an adult man who has total absence of the iris in both eyes. There seemed to be little doubt that this state was congenital, as the patient had always suffered from weak eyes, although his sight had been by no means bad. There were several other points of interest in the case, regarding the condition of the lens, etc.; and as Dr. Samelson considers it to be one of remarkable interest and rarity, he proposes to publish a separate and exhaustive account. A conversation on the subject was adjourned till the next meeting.

Absorption of the Iris. In connection with the preceding case, MR. HUNT exhibited some drawings illustrative of the manner in which he believes that gradual absorption of the iris may occur.

Blepharoplasty Operation. MR. THOMAS WINDSOR showed a boy in whom he had succeeded, with considerable difficulty, in replacing the upper eyelid. There was still great deformity of the lower, upon which he intended to operate, and afterwards to communicate the case again to the society.

The Glucogenic Theory: its present state. DR. WM. ROBERTS gave an elaborate statement of the present state of the glucogenic theory, attempting to define, as far as possible, how much had been ascertained with certainty, how much was still *sub judice*, and what were the probable future developments of the theory. He gave a full and lucid account of the original observations of Bernard, Pavy, Harley, McConnell, etc., with regard to the presence and probable mode of production of the amyloid substance and its conversion into sugar. He referred also to some experiments of his own, which seemed, as far as they went, to confirm Pavy's views of the *post mortem* character of the ordinary saccharine changes in the liver. He also detailed the observations of Schiff, Pavy, etc., on the influence of various portions of the nervous system on the urinary secretion; considering that the sole positive deduction, as yet, from these is, that nervous influence must undoubtedly constitute one important link in the chain of causation in diabetes.

Correspondence.

IRIDECTOMY.

SIR,—I cannot allow to pass unnoticed the letter in your impression of October 10th, on "Iridectomy"; which, be it understood, means cutting off a piece of the iris, just as the operation is done for the making of an artificial pupil. That letter was published as an answer to some remarks of yours, rather depreciating* the operation as a cure for glaucoma.

Nothing, in my opinion, can be gathered from it that in the least invalidates what has been stated, nor is there a single fact commendatory of "iridectomy" in the sense alluded to.

The writer comes forward, as he says, "in justice to those who practise the operation, rather than in the hope of converting those who condemn it untried." In the first part of this sentence, there is something of a personal character, which I shall not comment on. But as regards the latter, I would remark, that if there be any persons of the class alluded to, I can add besides, that four of my own friends with ample opportunity have tried "iridectomy," and condemn it.

A long tirade follows about persons of the "tory" type of mind, who won't be converted, and who act as drags to the rapid progress of others; but not a word in argument about the real matter in question—not a thing about the principle. I was not disappointed, and breathed a hope that the writer's career may never suffer that violence from the "drags" that he speaks of.

He continues, "if iridectomy be not a remedy for glaucoma, where does one exist? In the hands of the most expert and judicious surgeons, it, doubtless, will not always succeed in restoring sight; but in a large proportion of the cases in which it is indicated, much improvement may be predicted, with as much confidence as justifies the operation for hernia or aneurism."

Surely he does not seriously mean "iridectomy" to be received on the argument of the first remark. That is impossible; and the latter is too weak for what he would wish to imply. We learn that it will not always succeed, but where indicated, etc. Why did he not tell us where? It is just this improvement about which observers differ. Those who trace the natural history of glaucoma, say that after the sight has been entirely and quickly lost from an acute attack, there is often recovery of it, sufficient to enable ordinary books to be read, by the natural process of repair. The comparisons to hernia and aneurism do not hold good, as the least reflection will shew. There is a principle in these operations which is acted on, and is unaltered, whether the operations succeed or not.

There is much said by the writer that has nothing whatever to do with the matter, that I need not notice, as to "iridectomy" for recurrent iritis, and for the linear extraction of cataract. But the following statement I cannot pass. "That it should be employed in hopeless cases, and so fall into disfavour, must have been anticipated; and that it would be discredited by inapt operators, and by those who do not attempt even to perform it properly, also was to be foretold, almost as a matter of course."

The allusion to inapt operators is an unhappy one. Every operation in surgery is at times—aye, and very often—badly done, and will be blundered at so long as they are undertaken; but this neither destroys the application, nor the usefulness of them, nor throws those

* Our correspondent should have said "questioning". What we suggested was, that all operations in surgery should be based upon definite principles; and that the principles (so-called) upon which iridectomy was based seemed to us to want definition. EDITOR.