

## EDITOR'S LETTER BOX.

### CLIMATE OF MADEIRA.

LETTER FROM T. H. BURGESS, M.D., TO THE EDITOR.

SIR,—In a late number of the ASSOCIATION JOURNAL, Dr. George Lund, of Madeira, has undertaken to controvert some general remarks on the climate of Madeira, which I had occasion to make in my recent work on the "Climate of Italy".

Free discussion is always desirable on disputed subjects, especially those relating to so conjectural a science as medicine. It is the only sure method of arriving at the truth. But, in order to be useful, such discussion should be fair as well as free, and not open to the charge of misrepresentation.

Dr. Lund says: "Dr. Burgess, a recent author on the climate of Italy, declares change of climate *in disease* to be a delusion." I never wrote or thought anything of the kind; but I did write the following sentences, which Dr. Lund has not quoted: "In pointing out the inutility of the Italian climate for consumptive invalids, I should be sorry to be understood as denying the sanative effects of climate in all diseases. In several affections of a painful and distressing kind, the benefit to be derived from a well selected and appropriate change of climate is incalculable." (p. 3.) Dr. Lund complains that I have not given the whole of long sentences in my quotations from works on Madeira, in a general summary of those foreign climates most frequented; and yet his very next quotation from my work is as choice a specimen of interpolation as I have ever met with. It consists of seven lines; the three first of which are taken from page 1, the fourth line from page 3, and the remainder of the sentence from the middle of page 2, of my work.

This is the so called quotation: "There is no greater popular delusion than the belief in the existence of some undefinable specific virtue in the climate of Italy for pulmonary consumption. (page 1.) This foreign climate delusion is not confined to the rich invalid" (page 3); *he adds*: "It is only when the disease is confirmed, and softening exists, that, in the great majority of instances, the patient seeks in a foreign clime that relief or cure which he believes nature has denied him in his own." (page 2.) So that Dr. Lund makes one "add" to a sentence in page 3 one which *precedes* it in page 2!

Dr. Lund says, correctly enough, that, "having no personal knowledge of the island, I have formed my opinions from the works of White and Dr. Mason, and the statements of Drs. Heiniken and Gourlay." But, that I have omitted to mention Mr. Murray's "Guide Book" because it was in favour of the climate, I altogether deny. No writer could speak in more glowing terms of the climate of Madeira than Mr. White, whose work I placed foremost in my necessarily short sketch of the climate of that island. Corinne herself could scarcely surpass him. Strangely enough, the eminent authority whom Dr. Lund cites in opposition to my statements is liable to the same charge of "want of personal knowledge of the island"; for Sir James Clark acknowledges his obligation to Drs. Heiniken and Renton while collecting materials for his article on Madeira. Indeed, if the merits of the deservedly popular work on the "Sanative Influence of Climate" were to be limited to those parts in which the distinguished author writes from "personal experience" of the climate, a considerable, and not the least deserving, portion of the work might be omitted. Well, Dr. Lund, who is a practitioner at Madeira, and has "personal knowledge of the island", will surely be able to enlighten, with original observations made on the spot, his medical brethren not so favourably situated. Can the reader believe that, in his long and laboured defence of the climate of Madeira, Dr. Lund does not give a single original idea, fact, or observation; that he is obliged to draw upon other writers for all his statements, and to prop up his defence by extracting Dr. Renton's tables from Sir James Clark's work? So far, then, as his "personal knowledge of the island" goes, he might as well have written on the climate of Kamtschatka. One might suppose that a practitioner, so deeply interested in preserving the fame of the climate of Madeira, would have something else to offer than a mere *rechauffé* of stale and familiar observations, the fruits of others' industry.

Dr. Lund says, in reference to the variations of the atmosphere, that, out of 324 observations in this climate (he does not say by whom), we find only nine strong winds, and *one presumed gale*. Did the reader ever before hear of such a nondescript as a "presumed gale"? What does it mean? It is of a piece with another phrase equally unique, in which Dr. Lund talks of "enabling the system to throw the tubercular materials out of

the blood." Dr. Lund is very angry with Dr. Mason, who has written the best work on the climate of Madeira that has yet been published, because he takes an unfavourable view of the climate in relation to phthisis; and endeavours, to the best of his ability, to disparage the work, and throw discredit upon its statements. For example, he has again recourse to misrepresentation, when he says, "Dr. Burgess informs us that the instruments used were improperly placed: a fact which alone vitiates the whole of the results." From this, it would appear that I stated from my own knowledge that the instruments were badly placed; whereas I merely found the assertion in the volume of Dr. Lund's non-medical friend, Mr. White, who is an ardent supporter of the climate in a sanitary point of view; and, on the principle of hearing both sides, I gave the statement on Mr. White's authority. Of the truth of the assertion I had no means of judging. Dr. Mason and Dr. Gourlay both agree as to the frequency of consumption amongst the natives of Madeira; but Dr. Lund enters a caveat against the opinion of Dr. Mason, "because he did not speak the language!" Dr. Lund winds up his letter with the following strange jumble:—"Dr. Burgess thus sums up: 'Madeira, with all its sanitary fame, is no exception to this rule;' [that is, it affords no proof of salubrity] 'as the meteorological observations of Drs. Heiniken, Gourlay, and Mason, incontestably establish.'" "Setting all other considerations aside", says Dr. Lund, commenting on this extract, "we [I] do not think that these three observers bear out this assertion in *their own cases*. Dr. Gourlay was not consumptive. Dr. Heiniken was originally sent out as a dying case, lived nine years on the island, and ultimately died from accidental exposure to the night air in an open boat. Dr. Mason, notwithstanding his neglect of means for preserving health, and devoting himself instead most assiduously to meteorological observations, lived in Madeira two years." What have "their own cases" to do with the meteorological observations referred to? Does it strengthen, or invalidate, or in any way affect them, to know whether those gentlemen had consumption or not? Where are we to look for positive information respecting the salubrity of this island, but from the local practitioners? Yet it is strange that so earnest an advocate as Dr. George Lund could produce nothing of his own to support his views. I am sure he will profit by the following remarks of the gifted editor of Dr. Mason's work on the "Climate of Madeira":

"It is singular that, in an island so celebrated for its salubrity, no regular meteorological records should be kept, or, at least, published; and that such difference of opinion should exist as to certain features in the climate. Dr. Mason most justly remarks, that the memory of the 'oldest inhabitant' is little to be depended on, if not supported by written and recorded observations; and it strikes me that the medical practitioners resident in the island can hardly allow the subject to be longer neglected, in the present advanced stage of science, without subjecting themselves to the reproach of indifference relative to the charge sometimes urged against them, of withholding the truth, under a dread that the *far famed climate of the island will not bear the test of close and accurate examination*."

Since the publication of the article on the "Climate of Madeira", of which Dr. Lund so grievously complains, I have been favoured with several communications from persons who had resided in the island, fully confirming all that I had stated. I have had besides painful experience of the effects of a temporary sojourn at Funchal on several consumptive invalids, two of whom were hurried to the grave by their visit to Madeira. The particulars of these cases I shall publish *in extenso* in a new edition of my very obnoxious work. Meanwhile, I have only to state, that Dr. Lund has entirely failed to subvert any of the objections to the climate of Madeira urged by Dr. Mason, namely, "dampness, rains, injurious effects of the Leste (African blast), and heavy precipitation of dew".

Luxuriant vegetation may be very effective to gratify the senses, or to garnish graves;\* but it is no proof of the salubrity of any climate. Neither is "balmy air", *subject to vicissitudes*, in a foreign clime, a whit more likely to arrest the progress of tubercular consumption in a native of England, than the air of Devonshire, Hastings, Cove or Undercliffe, however it may please invalids or practitioners to foster a "fond delusion". Madeira is no exception to the rule; and if Dr. Lund does not

\* "The strangers' burying-ground," says Mr. White, "has a melancholy appearance, and one lingers, not unwillingly, among its rich and fragrant flowers, while reading with sadness the simple tale of many who, in the bloom and joy of youth, having sought these shores for a relief to their sufferings, through the influence of its balmy climate, and far removed from the endearing ties of friends and home, have only found that relief in the grave."

wish to see the rival climate of Malaga (the latest novelty) attract all the wandering consumptive invalids thither, he will, by devoting himself "most assiduously to meteorological observations", endeavour to make out a better case than his last essay, in favour of the sanative fame of the "Island of the Blessed." (*Herodotus.*) I am, etc.,

T. H. BURROWS.

Half Moon Street, Piccadilly, Oct. 10th, 1853.

[In reperusing Dr. Lund's article, we find that the author's desire is to give an impartial view of his subject. His opinions are supported by Mr. Dyster's paper in last number.—EDITOR.]

#### DR. DAVEY'S REMARKS ON DR. SWAYNE'S CASE.

LETTER FROM J. G. DAVEY, M.D., TO THE EDITOR.

SIR,—Will you allow me to correct the observations attributed to me in the report of the Bath and Bristol Branch, at p. 804 of the ASSOCIATION JOURNAL for October 14th? Instead of saying that the "convulsions", in the instructive case read by Dr. Swayne, were dependent, *primarily*, on the injury done to the brain, I said that they *were*, it would appear, so reputed; but that I could regard them only as a mere sequence to the injury, *i. e.*, as the immediate effect of the succeeding inflammation of the parts affected, involving, as such a pathological condition did, more or less effusion, thickening of structure, and such like; and that these so interfered with the normal relationship of the cerebro-spinal system and its bony parietes, or, in other words, so altered the relation of the containing and contained parts, that the spinal functions were necessarily interrupted, and *convulsions*, THEREFORE, were induced.

My object was merely to draw the attention of the members to the *fact*, that, inasmuch as the *brain* has really nothing to do with the normal motive powers else than *indirectly*, it can in no way be *directly* or "*primarily*" concerned in convulsive movements: such I do consider to depend on "*spinal irritation*" (I am represented as having expressed the very opposite opinion), but *not* to arise "*because the relation between the brain and spinal chord has been disturbed*", to quote the words attributed to me in the Journal. These involve so much mystery, and are altogether so incomprehensible, that I am desirous not to be held responsible for the same.

I am, etc.,

JAS. GEO. DAVEY, M.D.

Northwoods, Bristol, Oct. 19th, 1853.

#### MR. WINCHESTER'S METHOD OF TREATING FRACTURES.

LETTER FROM W. H. WINCHESTER, ESQ., TO THE EDITOR.

SIR,—From your editorial remarks in the JOURNAL of 21st October, on the "Prevalent Treatment of Disease", particularly of fractures, I am induced to think that an account of my method of treating these cases, with a description of the apparatus, may not be unacceptable to your readers, especially as it was designed whilst practising in the country, and for the very purpose of obviating the difficulties of which you speak.

In seeking for an efficient apparatus, my chief aim was to imitate nature; and, as perfect uniformity, a symmetry between the two halves of the body, is nature's invariable law, so I conceived, if by any means I could contrive an apparatus which should assume the form of nature, or, in other words, be capable of being moulded to a sound or healthy part for the use of an injured or diseased one, such mechanical appliance would not only be rendered as perfect as it is possible, and be generally useful, but afford the surgeon a fixed principle of action, and an unerring guide in the treatment.

After considerable thought, and taking all the requirements of the surgeon into consideration, I contrived the apparatus, of which I send you an engraving; its superiority over every other splint consists in its simplicity, universal applicability, and efficiency. One and the same splint does the work of three or four. Whilst every other apparatus tends, more or less, to alter the original form of a limb,—whether made of metal, wood, gutta percha, or starch,—the direct tendency of this one is to preserve it, having, before its application, assumed the natural form. It consists of jointed pieces of wood, metal, or other suitable material, which have the power of being fixed at any desired angle; and in its application, is first laid against and fixed to the shape of the sound side, and then immediately turned and applied to the broken one, affording a complete support to the entire shaft of the bone, preventing retraction, and consequently

doing away with the ordinary means of extension, which are painful to the patient. To the country surgeon, a great saving of time will be effected in its use, as no unnecessary journey may be taken, but armed with this *scultus is parvo*, he may sally forth and give immediate relief to his patient.

I am, etc., W. H. WINCHESTER.

14, Westbourne Terrace Road, October 27th, 1858.

Fig. 1.

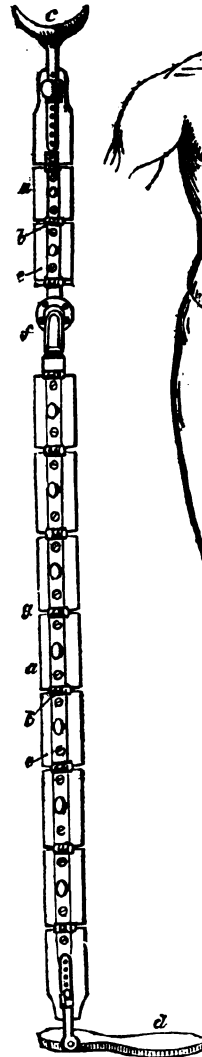


Fig. 2.

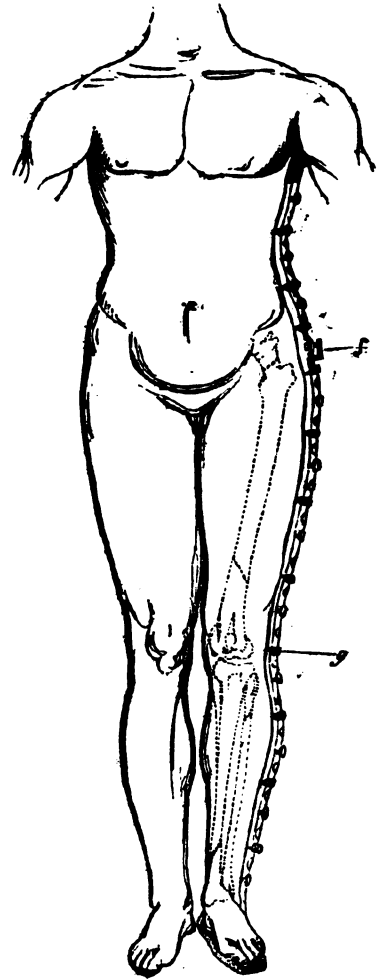


Fig. 1 shows the splint. *a a*. Pieces of wood, metal, etc. *b*. Joints, which are fixed at any angle. *c*. A crutch for the axilla, if necessary; and *d*. The foot-piece, both of which can be regulated to any length or angle. *e*. Studs for the straps.

Fig. 2 shows the splint applied to the broken side, after being adjusted to the opposite uninjured one. It will be perceived that even should both thigh and leg be broken, the same adjustment does, showing a great superiority over all other splints. It can be lengthened or shortened at pleasure, and a piece removed from any part, should there be a wound, without deranging the adjustment. *f*. Ball-and-socket joint for hip. *g*. Hinge-joint for knee.

Fig. 3.

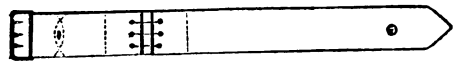


Fig. 3 shows the straps used in the application of the splint. The size of the sound limb is taken when the splint is adjusted by means of the buckle with the lacing fastened. When applied to the injured limb the original size is still maintained by the buckle; and should swelling occur the lacing is loosened, allowing the strap to expand by means of a piece of vulcanized India-rubber inserted. As the swelling subsides the strap goes back to its original size, and is again laced. By this means the necessity for loosening the strap is avoided.