as the parties are alive, I may confidently speak as to their present condition; and I may say, that I know of no operation in surgery more successful, or capable of conferring greater benefit on society, than the great discovery of Stromeyer.

CASE I. *Talipes Equinus: Foot resting on the Toe.* (Reported in *Lancet and Medical Times*, February 1844.) Mrs. Martin, of Newmarket, aged 46, about seven years since, after a severe attack of hysteria, or what was termed so, was left with rigid contractions of the muscles at the back of the legs, which had existed ever since.

December 3rd, 1843. The heel was drawn up, the tarsal and metatarsal bones forming a straight line with the legs, the patient resting on the end of the great toe. Mechanical apparatus had from time to time been applied, without effecting the slightest benefit; and she appeared to have abandoned all idea of ever walking. Having operated in several cases of this kind, I at once recommended it, to which she readily acceded. On the day above named, I divided both Achilles tendons, after the plan of Stromeyer, with but slight pain or loss of blood; they were found much enlarged and thickened; the feet were placed in pasteboard splints; and on the third day, gentle extension was applied, so that on the seventh day, the feet were brought to right angles with the legs, and the patient able to stand.

It is scarcely necessary to recapitulate the daily rapid progress of this case. It is sufficient to state, that in six weeks she walked some distance to church, and was quite cured. In November 1857, I received a letter from her husband, in which he stated that the operation had continued up to that time most successful; that her feet were in perfect form; and that she could walk any distance, as well as she could before her deformity came on. There was no soreness left; nor did she ever feel any pain in the parts operated upon.

CASE II. *Talipes Varus: Feet resting on Outer Ankle.* Henry Webb, of Dullingham, aged 8, was born with this deformity; he had never walked on the soles of the feet. An operation was performed on February 26th, 1846. I divided both tendo Achillis, and treated the case in the usual way. He could walk well in six weeks.

January 1859. This lad (now a fine man, a farm labourer, living at Dullingham) has a perfect cure.

CASE III. James Hitchcock, aged 12, came under treatment on July 3rd, 1846. This was a very severe case. He was a heavy boy; and, from having walked on the outer ankle for so many years, the distortion was very great. There was partial paralysis of the left side; the thigh, leg, and foot, were considerably smaller. The operation was performed.

1858. His condition was much improved; but he retained a tottering gait, which, no doubt, will always continue.

CASE IV. *Double Talipes Valgus.* Mary Cusbourne, aged 6, of Burwell Court, came under care in November 1843. This child was sent me by the Newmarket Board of Guardians, as she was a burthen on the parish. The operation of dividing the tendo Achillis produced a perfect cure.

December 1858. She had not the slightest return of the disease; and walked perfectly.

It would be useless my reporting more cases; but I could enumerate many others that have been done at various intervals, from the years 1842 and 1843, and I do not know of a single instance where there has been the slightest return of the deformities; of course, I mean where the operation has been successfully managed in the first instance.

Many of the early cases were published in the medical periodicals of the day; and it is satisfactory to know of their result after some years have elapsed.

PATHOLOGICAL CONTRIBUTIONS TO MEDICAL JURISPRUDENCE.

By WILLIAM BOYD MUSHET, M.B. Lond., late Resident Physician at St. Marylebone Infirmary.

VI.—STRANGULATION.

A MALE child, aged about 6 months, was found in the Canal, and brought to me, on March 17th, 1857. It was reported to have been twelve hours in the water. It was dressed in a frock petticoat, and the usual articles of clothing, and had a ligature of twisted diaper, of about the calibre of the little finger, tied once very tightly round the neck, the knot being rather to the left of the median line. The ligature caused the skin to be raised in folds beneath the chin, and in the middle line posteriorly. It was so tight and adherent from the wet, that I

thought it advisable to divide it behind with scissors, in preference to attempting to untie it, from fear of lacerating the skin and interfering with the appearance produced by its application. On its removal, a line of constriction was found to exist *entirely round the neck*, over the larynx. Posteriorly and laterally, this line was *whiter* than the adjacent skin; and there was no trace of ecchymosis. In front, the line was *darker*, and had a *greyish, pearly, semishining (parchmenty?)* appearance, with a *faint brownish border* at its upper margin. A very faint ecchymosis was discoverable at the site of the knot, and here the skin was slightly grey in colour. A faint but evident discoloration, of about the diameter of a pea, in a line with the lobe of the right ear, also existed in the circle of constriction.

There were no external marks of violence. Slight excoriation was observed about the groins and scrotum. The fingers were clenched; the nails pale; the palms and soles a little sodden. The tongue was slightly protruded. There was no foam at mouth; no lividity of the tongue or lips. The pupils were contracted; the conjunctivæ were pinkish, slightly chemosed; the palpebral conjunctivæ were darkly congested. Dark patches of redness were observed about the mouth, nose, and glabella. The rest of the body was pale, flabby, and emaciated. The left central incisor had passed through the gum.

NECROPSY fifty-four hours afterwards. The brain was not extra-congested. A few veins of the pia mater were rather prominent posteriorly; and there was fine ramiform injection over the surface of the hemispheres. There was no sub-arachnoid effusion. The brain-substance was firmish. About a drachm of serum was found in the ventricles. The puncta vasculosa were not abnormally numerous. A little dark fluid blood existed in the longitudinal and lateral sinuses. About three drachms of serous fluid were found at the base. There was no contusion, laceration, or ecchymosis, about the seat of ligature, either subcutaneously or among the muscles. No foreign body was found in the mouth or throat. The larynx was uninjured; its lining membrane was pale; and no froth or mucus was present on the surface.

Chest. About two drachms of serum were found in the pericardium. The lungs on both sides were collapsed, especially posteriorly; they were not diseased. There was no fluid in the pleura, or adhesions. The heart was healthy, flaccid, not distended. Some black fluid blood was found on the right side; and a little, also dark and fluid, on the left. The bronchi and their branches were natural; and there was no appearance of frothy mucus.

Abdomen. The stomach was filled with food—apparently, half-digested bread—of sweetish odour. The mucous membrane was dark pink, neither softened nor eroded. The liver was not congested. The large intestines contained yellowish fluid muco-feculent matter. The small intestines contained less fluid, of the same character. The mucous surface was uniformly injected, with ramified vessels at spots. The mesenteric glands varied in size from that of a pea to a bean. The spleen was pale and firm. The kidneys were not congested. The bladder was empty. No fluid was found in the peritoneum.

REMARKS. The inspection in this case did not reveal the presence of any obvious cause of death—the appearances being insufficient to justify the opinion of drowning or *vital* strangulation. The only deviations from the natural standard were, the collapse of the lung (a common phenomenon in infants dying under many different circumstances), and the hyperæmic state of the small intestines. These conditions, with the emaciated appearance of the body, and the character of the faecal excreta, would have inclined me to conjecture—had the child come under notice without history, and the ligature absent—that death had ensued from exhaustive diarrhoea, as the band of constriction, unless specially attended to, might have been overlooked. The mark passed continuously round the neck, and the ligature was tolerably large and soft. In front, the usual *parchmenty* appearance was perceptible, but the remainder of the circle was completed by a line whiter than the surrounding skin (bloodlessness). The redness of the face and state of the conjunctivæ were most probably consequences of the immersion. To sum up, an unqualified dictum could not be asserted. The utmost that could be conceded was, that the appearances were not *antagonistic* to strangulation; but no positive conclusion could be arrived at, whether the constricting force was applied immediately *ante* or *post mortem*. In favour of the latter event, certainly, no

motive could be suggested; nevertheless, medical testimony should be ever uninfluenced by any theory of probability.

The case was elucidated by the confession of the mother, who admitted that she applied the ligature to the child whilst alive, and at once threw it into the water.

46, Upper Baker Street, N.W.

CASE OF TAPEWORM.

By W. COLLYNS, Esq., Exeter.

J. P., aged 41, under butler at Haldon House, shewed me, about six weeks ago, nearly six yards of tapeworm, which he had just voided, after taking a drastic purge (extract of jalap and aloes) the night before. I advised him to try kousso; and, having prepared him by low diet, without animal food, beer, or spirit, and a dose of castor oil twenty-four hours before, I administered to him half an ounce of the *fresh* powder of the herb, infused for fifteen minutes in boiling water. He drank this dose at 10 A.M. on February 4th, having swallowed a tablespoonful of lemon-juice half an hour before. At about 1 P.M. he voided many yards, and pieces of the dead worm; and at 7 P.M. he voided some more, together with the head of the worm. The next morning, he took another dose of oil, but no more worm has passed; and he expresses himself so much relieved as to feel better than he has during the preceding three years. He is able to eat with a good appetite, is quite well, and in good spirits—quite the reverse of what he used to be.

Inventions and Appliances

IN MEDICINE AND SURGERY.

A NEW CHLOROFORM INHALER.

We had an opportunity, the other day, at St. George's Hospital, of witnessing the employment of a new chloroform apparatus, the invention, we believe, of Mr. Weiss, which has also been used at other hospitals, and appears to be well thought of by those who have watched its employment. It is a modification of Dr. Snow's inhaler, being provided with valves to regulate the quantity of chloroform admitted into the inhaler, and the instrument being made altogether less cumbrous. It consists of a bottle holding the coil of bibulous paper, and surrounded by a water bath, as in Snow's inhaler, to the front of which is connected the mouthpiece, which is made of flexible metal, plated—an improvement, in respect of cleanliness, on the leather of which other mouthpieces are made. This is connected to the bottle by a sort of hinge, so that the angle can be altered. At the top of the bottle is a glass receptacle, graduated for holding chloroform, and provided with a screw by which a certain measured quantity can be admitted into the bottle. This receptacle turns round upon its axis; and, by an ingenious arrangement of valves, the position of the upper receptacle, marked by an arrow on the rim of the lower, regulates the amount of the mixture of diluted chloroform vapour which is admitted into the air passing through the mouthpiece. Thus, when the arrow stands at one extremity of the scale, marked A, the patient is breathing pure air; when at the other, marked C, he is breathing the highest dilution which the instrument admits of, and which, if we understand the invention correctly, cannot be higher than in Snow's inhaler; when at intermediate points, the dilution varies in a known proportion. Thus, the object of the instrument is exactly the same as that of Dr. Snow's; viz., to ensure the dilution of the vapour. But it is said to effect this in a more equable and certain manner, so that the narcotic effect can be produced in pretty nearly the same time, viz., about four minutes, in all patients. If this is so, it will be a great advantage, as the danger of narcotism would be almost abolished if the equable action of the anæsthetic could be ensured. Further trial is, of course, necessary be-

fore pronouncing a judgment on Mr. Weiss's apparatus. At present, we shall only say that, from seeing it applied to three or four patients, we were inclined to think favourably of it.

MEDICAL REGISTRATION.

PUBLICATION OF THE REGISTER.

We have been requested by Dr. Hawkins to give notice that all persons who desire their names to appear in the Register printed for 1859, should apply to be registered before the 1st day of May, 1859.

A BILL

TO AMEND THE MEDICAL ACT (1858).

[Prepared and brought in by Mr. Secretary Walpole and Mr. Hardy.]

WHEREAS by an Act passed in the last Session of Parliament, chapter ninety, "The Medical Act," provision is made for the registration of members of the medical profession, and certain disabilities are imposed, after the first day of January one thousand eight hundred and fifty-nine, on members of that profession who are not then registered: and whereas, by reason of the time required for the collection and examination of the proper evidence on the first formation of "The Medical Register," it is expedient to amend the said Act as herein-after mentioned: be it enacted by the Queen's most Excellent Majesty, by and with the advice and consent of the Lords Spiritual and Temporal, and Commons, in this present Parliament assembled, and by the authority of the same, as follows:

I. The first day of July, one thousand eight hundred and fifty-nine, shall be substituted, in Sections Thirty-two, Thirty-four, Thirty-six, and Thirty-seven respectively of the said Act, for the first day of January, one thousand eight hundred and fifty-nine; and the said several Sections, and all provisions of the said Act having reference thereto, shall be construed and take effect as if the word *July* had been originally inserted in each of the said Sections instead of the word *January*.

II. Section Thirty-three of the said Act shall be repealed, and no person shall by reason of the said Act be or be deemed to have been disqualified to hold such office as mentioned in the said Section Thirty-three, or any appointment mentioned in the said Section Thirty-six, unless he shall have failed to be registered on or before the first day of July one thousand eight hundred and fifty-nine.

Association Intelligence.

BRANCH MEETINGS TO BE HELD.

NAME OF BRANCH.	PLACE OF MEETING.	DATE.
BIRMINGHAM AND MIDLAND COUNTIES.	Hen and Chickens Hotel, Birmingham.	Thursday, April 14th, 6 P.M.
[General Meeting.]		

SOUTH-EASTERN BRANCH:

SOCIAL AND SCIENTIFIC MEETINGS OF THE MEMBERS RESIDENT IN ROCHESTER, MAIDSTONE, GRAVESEND, DARTFORD, AND THEIR VICINITIES.

Social and scientific meetings of members of the South-Eastern Branch resident in Rochester, Maidstone, Gravesend, Dartford, and their vicinities, will be held on the undermentioned days:—

Friday, March 25th, 1859, at 3.30, at the Town Hall, Gravesend.

Friday, April 29th, 1859, at 3.30, at the Town Hall, Dartford.

The members resident in this district will be gratified by the attendance and assistance of any of the members of the British Medical Association.

JAMES DULVEY, *Honorary Secretary*.

Brompton, Chatham.