

by foot-splints; the left knee still remains much contracted.*

The portions of bone removed measured, (by a tape drawn from the point of insertion of the round ligament to the upper edge of section,) over the head, curve of neck, and great trochanter, four inches and three-quarters; and from similar points below two inches and a half. The head of the bone was denuded of cartilage, and a carious cavity, admitting the end of the finger, existed at its under surface; the under part of the neck was also softened and damaged by caries. The trochanter and remaining shell of the bone retained a seemingly healthy firmness. The cancellous structure was filled with pale yellow lardaceous pus.

REMARKS.—The propriety of resecting the head of the thigh bone, in advanced disease of the hip complicated with dislocation, practised first in this country by Mr. White in 1822, and revived by Professor Fergusson in 1845, and since recommended by that eminent authority, has been the subject of much discussion, and various strong protests and objections urged against the operation have been most ably met and commented upon by Mr. Henry Smith, who has frequently directed the attention of the profession to the particular circumstances which render a resort to excision not only justifiable, but a duty. The details of the above interesting case may possibly aid in disarming of influence the sweeping and strongly expressed unfavourable opinions which have been hastily promulgated: for although in its present stage no confident prediction of permanent benefit can be hazarded, nevertheless, an auspicious commencement, and upwards of seven weeks progressive amelioration, create a hope that the constitutionally-depraved condition of the system may in a degree expend itself through the outlet still existing at the hip, and the skin ulcerations resulting from long pressure be obviated, by the further favourable progress of the case allowing of a more frequent change of position. But whatever the termination—temporarily amended health only, protracted disease, or death from phthisis—it must be conceded that the operation, severe and formidable as it may appear, has, at least in this instance, given a chance of life, and afforded marked comfort and relief to a helplessly-deformed girl, who, harassed by pain, and worn down by slow and wasting hectic, must, had she survived, have remained in a crippled and pitiable condition to the end of her life.

Lynn, December 3, 1849.

* [At the time of going to press the patient is still going on favourably; in our next number we hope to be able to give a good account of this interesting case. Mr. Cotton deserves the thanks of the profession for publishing it while still uncertain in its results.—ED. JOURNAL.]

Provincial Medical & Surgical Journal.

WEDNESDAY, DECEMBER 12, 1849.

WE regret to find—as appears from a letter inserted at a further page—that our remarks on the “fungoid” theory of cholera have given umbrage to a member of the Cholera Committee of the Bristol Microscopic Society; but in our own vindication we feel it necessary to assure that gentleman and our readers in general, that our observations were intended to be such as might be expected of us as impartial commentators on passing events, and that nothing was further from our minds than, as is insinuated by the writer of the letter alluded to, to “discourage the efforts of the Bristol Committee or to exalt the researches of the College of Physicians at their expense.

So far, indeed, from discouraging the interesting labours of Messrs. Brittan and Swayne, we appeal to our leading article of October 17, as evidence that, entertaining as we did, a doubt as to the correctness of the “fungoid” theory, we said all that could be anticipated in commendation of researches which, whether true or false, in reference to the conclusions drawn from them, were admitted by us to be honestly and candidly conducted. Our words were, “we would in the mean time congratulate Mr. Brittan on having struck upon a track which may probably lead to results of incalculable importance, and we trust that there are among the members of this Association, many who are both able and willing to aid him in his investigations.” Surely this is not discouragement.

In taking a view unfavourable to the “fungoid” theory of cholera, we claim for ourselves that independence of judgment, which our Editorial position should rather add to, than diminish, and we need not inform the writer of the letter that in that opinion we are by no means singular. The opinion we still maintain, and we believe, in the present state of knowledge, justly. Glad shall we be, if eventually the discoveries of Messrs. Brittan and Swayne be proved to be truths, to avow our error, and most proud to think, that to this Association human nature is mainly indebted for the announcement of the cause of the most deadly pestilence of modern times.

The writer of the letter in question affirms

that our statements are absolutely incorrect, in saying "that bodies identical in appearance were found in other secretions, and in other diseases, and when present in cholera stools were seen not to be so on their first dejection," &c. In reply to this we beg to refer him to the letter of Dr. Jenner (Report of the Cholera Committee of the College of Physicians) who distinctly states that "on examining microscopically, four alkaline stools, passed at different stages of *typhoid fever*, I found in them bodies which appeared to me identical with those described and figured by the Bristol Committee." And again, we invite his attention to a paper by Dr. Basham, (*Medical Gazette*, October 19,) in which he states that he has found cholera cells in the urine of dyspeptic patients; and further, that in several specimens of cholera stools, these cells were not present on the first evacuation, but appeared after the lapse of some hours.

There is one other part of the letter which calls for notice, viz., the remark that "such a statement proves the anomaly of having irresponsible Editorial articles in a journal the *property* of a particular class of men." If we rightly understand this passage, it would imply that the Editors of this journal are to have no opinion of their own, but are to be subservient to the *proprietary* in every view they may express. We venture to hope that such an opinion is not prevalent in the Association, for we respectfully submit, that, to say nothing of the well-known fate of those who try to please everybody, to be thus shackled would utterly annihilate the usefulness of the Editorial function. We most emphatically disclaim the writer's insinuation that we have favoured metropolitan scientific efforts, and discountenanced those of the provinces. We take no special interest either in the metropolis or in the College of Physicians, and we do, on the contrary, most cordially sympathize with the provincial portion of the profession in everything which affects its interests and honour; but at the same time we are confident that we should not earn the approval of the Provincial Medical and Surgical Association, by supporting against our conviction any doctrine solely because it emanates from one of its members, or by refusing to acknowledge the merits of those who are not included within its ranks.

In conclusion we repeat, that in expressing the opinion we have done on the subject in dispute, we have been actuated solely by the wish to do

what is right: we have neither favouritism nor antipathies. We shall be only too glad to find ourselves mistaken, and that so simple an explanation of the origin of cholera shall be the correct one, and be owing, moreover, to the energy and talent of members of our Association.

Reviews.

First Annual Report of the Hospital for Consumption and Diseases of the Chest. By THE PHYSICIANS OF THE INSTITUTION. London: Churchill. 1849. pp. 42.

HAVING taken an active part in the original establishment of this noble Institution, it is with peculiar satisfaction that we have the opportunity of perusing this, the first Report of its operations. It is, on the whole, a most valuable statistical document, and is well calculated to enhance the reputation for close and accurate observation, which its compilers are known to possess.

There are some, we are aware, who doubt the wisdom of placing consumptive patients in the wards of a hospital, and we have recently seen objections to the plan, based, however, as we believe, upon erroneous premises. An inspection of the admirable arrangements in the establishment from which the present Report is taken, would, we are assured, materially modify such opinions. The hospital is a splendid building, specially erected for the purpose, and every means which science can suggest as applicable to the hygienic and medical treatment of tubercular disease has been scrupulously carried out. Not the least of these admirable arrangements, is the adoption of a plan of ventilation suggested by Dr. Arnott, by means of which the temperature of the most genial climate is combined with the free supply of pure air. The comfort which this affords to the majority of the inmates is mentioned in the Report.

The information comprised in this document is distributed under three heads:—1. The number of patients treated, and the facts of their history which have reference to the origin and progress of the disease. 2. Some of the principal signs and symptoms of phthisis. 3. The duration of the disease, and the results of treatment. On each of these points we shall give copious extracts.

The total number of cases of phthisis comprised in the Report is 4358, of which 888 were in, and 3470 out-patients.

In reference to sex, the experience of the Institution is not in accordance with general observation, the result of which is, that the female sex is more liable to the