general attention the letters published in this day's number, as they afford a cheering and convincing proof that the soundest principles of Christian ethics deeply pervade the profession of Medicine.

THE BRANCH MEETINGS.

THE length of our reports of the Branch Meetings leaves us very little space this week for leading articles, and obliges us to postpone much matter which we had prepared in the departments of Bibliographical Notices and Periscopic Review. The great interest and value of the reports, however, will make them generally acceptable to members. If it were possible to prevent so many Branch meetings happening simultaneously, the result would be felt as a general benefit to the Association; as it would enable the proceedings of the Branch meetings to be promptly reported, without disturbing the usual plan of giving a varied character to the contents of each number. We are very far from thinking that our Branch meetings are too frequent: nay, we are every day becoming more and more convinced that the best method of increasing the usefulness and augmenting the power of the Association is for district meetings to be multiplied, and for members to feel that attendance upon them is a duty which they owe to themselves and to their profession. Formal business assemblies are not always required; and a meeting may often be productive of great present and prospective advantages, although its proceedings claim but a small amount of space in these columns.

The remarks upon the importance of more frequent meetings made by the President of the Suffolk Branch particularly arrested our attention; and we think that resolutions in accordance with the spirit of his speech might well be acted upon throughout the Association. If the medical profession ever attains to its legitimate social status and political power, it will be by its members being better organised, and meeting more frequently with each other, not merely for scientific improvement, but for the purposes of brotherly intercourse, and of discussing the medico-political and professional topics of the day. Then, and not till then, will it be possible to form any conception of the immense and ever augmenting benefits bestowed upon the medical profession by Sir Charles Hastings, when he founded the PROVINCIAL MEDICAL AND SURGICAL ASSOCIATION.

ORIGINAL COMMUNICATIONS.

IMPACTION OF THE RECTUM FROM UNGROUND WHEAT.

By T. INMAN, M.D.

CASE. A. B., aged 60, was admitted into the Northern Hospital, July 5. He was a poor Irish emigrant, and seemed too ill to give any account of himself. The sickening odour which proceeded from his breath and body prevented a prolonged examination of his person. He was, on his admission, making constant but ineffectual attempts to vomit, and told us that he was purged. Further inquiry indicated that "he was not purged at all, but that every thing came up the other way". The pulse was very weak, and the man seemed almost in a dying state. The symptoms being those of strangulation of the bowel, I examined the groins, and found that there was a double scrotal hernia. There was, however, no tenderness on pressure, nor anything to show that the mischief was there. The first object was to gain as accurate information as possible respecting the condition of the bowels; whether there was really constipation, or not. Castor-oil was ordered, and his strength was supported by wine.

The oil operated freely, producing copious watery evacuations, which were seen by the house-surgeon. On my next visit, the man was evidently worse; and he then informed me that ten days ago they had given him wheat instead of rice, and that "nothing had passed through him since". Having heard of a similar case, where peas had been eaten too freely, I directed an enema to be administered, to ascertain whether there was any lodgment in the rectum. The man, however, died before it could be administered, twenty-four hours after admission. He had hiccough before death, and an intensely sickening breath, which had something of a spirituous odour; at least, after trying to think what it reminded me of, this came the nearest to it. On making a post mortem examination, the same odour was very strong about the bowels. The bowels were much distended with flatus; the ileum was, in some parts, perfectly contracted, in others distended. The whole of the intestines were gorged with blood, and congested; but there was no effusion of lymph. The inguinal canals were very large, and quite clear from any part of the gut. The colon was greatly distended with flatus. The sigmoid flexure and the rectum were stuffed full of wheat: a great part of this had been chewed, and consisted of the husk alone; the rest consisted of grains, swelled and distended by the absorption of fluid,—about a quart was collected in all. It had a small similar to that exhaled by the breath; but I cannot say that there were marks of fermentation.

REMARKS. Had this man been seen earlier, or had he been able to give us a clear history of his case on admission, I think it exceedingly probable that his life might have been spared; for an examination of the rectum, or the effects of an enema, would have made the case clear. As it was, the absence of clear information, and the necessity for procuring it before proceeding to act, rendered delay necessary,—and that delay was fatal. To give an idea of the conflicting nature of the history I received, I may mention that the man said he was never purged. The patients in the wards said he was constantly going to the stool; the nurse, that he passed liquid motions; and that the house-surgeon, who saw them afterwards, imagined the man had diarrhœa.

Liverpool, July 1853.

THE LOCAL TREATMENT OF CARBUNCLE AND FURUNCLE.

By RICHARD FLINT, Consulting Surgeon to the Stockport Infirmary.

It is the distinguished triumph of modern surgery to be able to relieve and cure many of the ailments within its province, by methods less painful and protracted, and more certain than were formerly employed. The diseases at the head of this short notice cannot, I fear, be classed under this category. I was only aware, in an inquiry into the recent epidemic which has so severely and widely extended its visitations as to remind us of the "Plague of boils in Egypt", that the old treatment in the great hospitals of the country and with the most eminent surgeons, remained unchanged, and was holding its inglorious sway, from the comfortless and hopeless poultice, to the deep crucial incision of the scalpel; yet having at least the merit of being as impartially and equally inflicted on a professional brother, as on the laity or public at large. This practice by fomentations and poultices of every kind and description, soothing and stimulating, with ointments and plaisters of a like quality, has, from time immemorial, been the common inheritance of household and professional surgery. And it has often been pursued with the most indefatigable zeal and perseverance, without relief to pain and suffering, which have been in many cases intolerable, and with scarcely discernible progress in the condition of the diseased parts; until both surgeon and patient, full of disappointment and vexation, have looked to the knife as their only remaining alternative—if haply it be in time—to arrest or prevent the tendency to direful symptoms which too frequently result from the larger carbuncle or sloughing boil.