January 30th. The temperature of the bedroom was 28° Fahr. at 2 P.M.; a minimum thermometer showed 23° since the previous day.

January 31st. I found him, at the time of visit, sitting out in the sun. The next day previously to the "visit," he wilfully left Maloja for Italy, descending 3,800 feet in five hours. It was reported that he gained strength slowly, but made a good recovery.

This man, who was a plasterer, contracted his pneumonia from the effects of rapid and extreme variations of temperature, and irritant coke-fumes. Although he was a native of Italy, tainted with malaria, and not a robust subject, he made a good recovery in the dry air of the Engadine during the coldest part of winter.

Externally, in a Stevenson's screen, thermometers indicated the following temperatures, during the man's illness: mean temperature, Fahr., 18.6° (9 A.M.), 25.8° (noon), 27.7° (3 P.M.); maximum, 38° Fahr.; minimum, 4° Fahr. The "mean weight of moisture suspended in the air," calculated at noon by Apjohn's formula, was 11 grains per 10 cubic feet of atmosphere; (at Kew, the mean for the whole month of January equalled 25 grains per 10 cubic feet). The mean "drying power of the air," or weight of vapour which 10 cubic feet were still capable of absorbing, was 5.3 grains.

MASSAGE AS A THERAPEUTIC AGENT.

By WILLIAM MURRELL, M.D., F.R.C.P.,

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MASSAGE is of such inestimable value in the treatment of many intractable diseases, that it is to be regretted that so little is known about it in this country, and that it is so rarely employed as a therapeutic agent. It is often spoken of as a new method of treatment, but it has been in general use on the continent for a long time, and, more than ten years ago, received the adhesion of Billroth, Langenbeck, Esmarch, and other authorities. In a crude and primitive form, it is very ancient indeed, and is probably as old as surgery itself. Amongst the Greeks and the Romans it was extensively employed, both as a means of hastening convalescence from long tedious illnesses, and to relieve pain, and render supple bruised or injured joints. The writings of Plato abound in references to this mode of treatment, and its virtues seem to have been very generally recognised.

It is to be feared that there is a certain amount of prejudice against the employment of massage, arising, probably, from the fact that it is frequently confounded with "shampooing" and "medical rubbing;" but it is, in reality, a scientific mode of treatment well worthy of attentive study at the hands of skilled physicians and surgeons. The literature of the subject is extensive, and it would be impossible to give, within the limits of a short article, even an abstract of it. There are several kinds of massage, but the system almost universally adopted in Germany is that associated with the names of Mezger and von Mosengeil. Mezger may be regarded as the father of the modern phase of massage, while Professor von Mosengeil, by his accurate and painstaking experiments, has done much to establish it on a sound scientific basis. Those who have studied under the last named distinguished surgeon, and have had an opportunity of seeing him practise his method, will appreciate the fact that there is much more in it than at first sight appears. It is essential for success that the various processes should be carried out systematically, and in a definite order; although, of course, the same method of treatment is not applicable to every case. Every "movement" begins and ends with *effleurage*, the palm of the hand, and sometimes the knuckles, being employed for the purpose. It is always centripetal, and is performed with considerable rapidity and force. *Pétrissage* is a more complex process, and is by no means easy to acquire, although it looks simple enough. *Friction* is performed with the tips of the fingers, and is used in conjunction with *effleurage*, chiefly in the treatment of various affections of the joints. This term, which was originally introduced by von Mosengeil, is an unfortunate one, for it has nothing in common with what we ordinarily understand by friction. *Tapotement* is a kind of percussion, and may be performed either with the tips of the fingers, the partially closed hand, or its ulnar or radial border. Mezger rarely employs electrical treatment in conjunction with the manipulative processes, but von Mosengeil attaches much importance to it, and, in suitable cases, uses both the interrupted and constant

currents to stimulate the motor points. He dispenses with complex apparatus, and his sessions are of short duration, rarely exceeding five minutes. On the continent, the physician or surgeon is usually his own operator, it being considered inexpedient to employ, even as an assistant, anyone who has not been thoroughly and systematically trained, a process which requires, at least, two years of unremitting attention. It is known that, in many instances, incalculable harm has resulted to patients from ill directed efforts, or the selection of unsuitable cases. For the treatment of women and children, an accomplished *masseuse* is essential; but she must be well educated, and should have such a knowledge of anatomy and physiology as will enable her to carry out the instructions of the physician intelligently. It is not at all necessary that she should be physically strong, aptitude being of more importance than mere muscular strength. The hands must be soft; and, if proper precautions be taken, there is never any risk of abrading the skin.

It is no easy matter to say in what class of diseases massage proves most useful. Unfortunately, its employment has been advocated in many cases, for which it is essentially unsuited. Accurate diagnosis is of the utmost importance, and the sphere of usefulness of this remedy will, with increased experience, become more accurately defined. My best results have been in infantile paralysis; and it was in consequence of the success achieved in certain obstinate cases of this disease, that my attention, as has been elsewhere stated, was directed to the subject. Progress is often slow, but the ultimate results are most satisfactory. The nutrition of the parts is maintained until new cells in the spinal cord take on the functions of those which have undergone degeneration, or have been destroyed. Massage is, undoubtedly, of much value in many cases of obstinate neuralgia, and succeeds admirably in some forms of muscular pain, such, for example, as those described by the late Dr. Inman under the term "myalgia." There is a general consensus of opinion that it is well adapted for the treatment of chronic joint-affections; and most of those I saw treated by von Mosengeil were such as would, in this country, be considered incurable, or would drift into the hands of "bone-setters." There are some diseases of internal organs in which it is, undoubtedly, useful. Not long ago, a gentleman, aged 68, came to me complaining of shortness of breath, and increasing disinclination to take exercise. He had been in business, and had led a most active and energetic life. Three or four years ago he retired, and, from that time, experienced a gradual falling off in health. His appetite was poor, his bowels were obstinately confined, and he was nervous and anxious about himself. He was found to have a loud apex systolic murmur, and the heart's action was weak and irregular. I suggested massage, which was carried out systematically four days a week, for a period of six weeks. He improved from the very first, and, before the conclusion of the course, was better than he had been for many months. His appetite returned; his hands and feet were warmer; the bowels became regular; he slept well at night; and his spirits improved in a most satisfactory manner. In other cases of obstinate constipation, especially in women, I have known massage of the abdomen do a great deal of good.

In a well-known group of symptoms from which women frequently suffer, massage is essentially useful. I recently saw a lady, aged 45, or thereabouts, a professional singer, who was labouring under the impression that she was going mad. She was so nervous that she was quite unable to accept an engagement, although she had been constantly before the public, and had hardly missed a night for twenty years. She told me that she felt she was not to be trusted, and that, if left alone, she would do herself or her children an injury. She was afraid to go near an open window, so great was the temptation to throw herself out; and she even begged that the knives might be removed from the table at dinner. These symptoms were greatly intensified after each monthly period, and she insisted that she was suffering from cancer, or some organic disease of the stomach or womb. She was restless at night, and would often get up in the early morning, and walk for hours, until thoroughly exhausted. She was given full doses of the bromides—a drachm, or more, four times a day—but with only temporary benefit. Massage was then tried; and it seemed, to use her own expression, to soothe her, and calm her, and make her forget her troubles. The case was a prolonged one, but now, at the expiration of three months, she is much better, and will soon be able to resume her professional duties. In several other cases of restlessness and inability to sleep, the same method of treatment has proved efficacious.

Dr. Graham, of New York, speaks highly of massage in the treatment of neurasthenia. He uses it for those "who, in spite of rest, change and medication, have become chronic neurasthenics, the result of business reverses, overwork, worry, loss of relatives, disap-

pointed hopes, or, as a sequel, of some affection that has existed in some part of the system, but which has recovered, or has become of secondary importance." These symptoms may be somewhat ill-defined; but, I have certainly found massage of the greatest use in what, for want of a better name, has been called "spinal nervous weakness," or "neurasthenia spinalis."

In the treatment of corpulence associated with constipation, massage is of much value. Some months ago I saw a lady, aged 38, who, as the result of much good living and little exercise, had become inordinately stout. She was very short of breath, and was disinclined for exertion of any kind. She had been fond of literary pursuits, but even those had lost their charm, and were irksome to her. She was extremely irritable, and a source of trouble and anxiety to her friends and relatives. Massage was prescribed, and in two months she lost a stone and a half in weight, and improved notably in other respects.

For many forms of menstrual disturbances, massage may be safely prescribed. I recently saw a young lady, aged 19, who suffered intensely at each monthly period, the pain being so severe, that hypodermic injections of morphia had to be resorted to. Massage of the abdomen and pelvis was prescribed, and from that time there was no return of the trouble. Cazeaux has reported several similar cases, in detail. In the convalescence from acute illnesses, this mode of treatment is a great help and comfort to the patient. There can be no doubt that massage is a very valuable therapeutic agent, and is likely to yield good results in many complaints other than those I have roughly indicated.

OBSTETRIC MEMORANDA.

ANTEFLEXION AND DOUBLE OVARITIS CURED BY REPEATED LEECHING OF THE CERVIX UTERI, AND AFTERWARDS BY GALABIN'S ANTEVERSION PESSARY.

MRS. R. came under my care a year and a half ago. She suffered much from mental delusions, and was unable to walk from excessive pain. The patient, for some days, was kept in the recumbent position; and, when the inflammatory symptoms had to some degree subsided, an examination, by means of the speculum, etc., was able to be made. A very much hypertrophied anterior lip was disclosed, and a digital examination showed a very severe anteflexion; this was so great that it caused distressing bladder symptoms; defecation also caused a great amount of suffering. The treatment, which lasted nine months, was at last followed by a most happy result. The patient is now enjoying the best of health, with no probability of a return of the old malady.

She was leeches, altogether, fifty times, at repeated intervals; and, after the first three weeks, an anteversion pessary was introduced. This could not be tolerated; and, after a further rest in the recumbent position, another attempt was made—this time with success: as regarded the toleration, but it failed to keep the uterus in position. Nearly every known pessary was tried, with no better success. Then I bethought myself of that invented by my old teacher; it acted like a charm, the patient being now able to get up, and take short walks. The menstrual flow, which had been suppressed for two years, was now re-established, and the patient rapidly recovered.

HAYCAETH ADDISON, L.F.P.S.G., Holloway, N.

ABORTION: ADHERENT PLACENTA: PARTLY REMOVED, PARTLY LEFT TO NATURE.

MRS. G. S., aged 34, had nine children, born alive, and one miscarriage, after the first child. She was supposed to be about five months pregnant, when her youngest child was fourteen months old. There was a family history of insanity, and the patient herself had hallucinations, and had to be watched during the puerperal month. She had suckled her last child for the whole thirteen months, and had menstruated about every three weeks for the last twelve months, so that she did not know she was pregnant; for the last month there had been a continuous discharge, and she felt very weak. During the last week, for two days and two nights, she felt severe pain in the back and the lower part of the abdomen, and vomited twice.

On February 5th, she felt better, and went to bed at the usual time. She soon afterwards felt very restless, and had a good deal of pain in the back and abdomen, feeling a desire to pass urine; the pain was very severe, and the foetus was suddenly expelled into the chamber-
vessel, along with a good deal of hæmorrhage, during micturition. I saw her an hour later, and found her half stooping, half sitting on

the chamber-vessel, in bed. It was full of blood, and contained the foetus, which was between the fourth and fifth month. On examination, the uterus could be felt above the pubes, contracted, and the os would just admit the tips of two fingers. The lower edge of the placenta could be felt, adhering to the uterus. I gave a drachm of liquid extract of ergot, and obtained the assistance of a medical brother, to give chloroform. We were enabled to introduce the whole hand, gradually, and found the placenta firmly attached to the uterine wall near the fundus. We removed what we supposed to be about one-third of the placenta. We did not think it advisable to persevere any longer, for the patient's pulse was rather weak, and it was with difficulty that the placenta could be distinguished from the uterine tissue. The funis had been detached, close to its insertion into the placenta, when the foetus was expelled. The patient was kept under ergot, and I washed out the vagina night and morning with Condy's fluid. On February 7th, a large piece of placenta was washed out. It was very offensive, and larger than what we removed at the time. The temperature was 101° in the axilla, on the evening of February 6th. After this, the patient never had a bad symptom; and expressed herself better than she had been for the last month.

This case points out very clearly that it is better to remove only part of the placenta, than to persevere too much in efforts to remove the whole, when it is as completely adherent as in this case; and, further, that nature, if assisted, will complete all that we may be unable or unwilling to do.

CHALLONER CLAY, L.R.C.S. Ed., Salisbury.

CLINICAL MEMORANDA.

SUPERNUMERARY NIPPLES.

SINCE Dr. Champneys's paper has opened this subject, I should like to place on record two cases of the above that I have amongst my patients. In each case, the supernumerary nipple, with rudimentary mamma, is on the left side, between three and four inches beneath the nipple of the left breast. The nipple is about a quarter of an inch in diameter, and the same in length. There is an areola around it, and the diameter of the rudimentary gland is two inches. During the first week of lactation, there is a flow of milk from the nipple, and, during the whole time of suckling, there is experienced pain and fulness in the small gland, when the child takes the breast on that side.

J. BRENDON CURGENVEN.

SURGICAL MEMORANDA.

REMOVAL OF FOREIGN BODIES FROM THE EAR.

AFTER the various "best methods" of removing foreign bodies from the ear, that have lately been described in these pages, I shall, I fear, seem almost presumptuous in recommending yet another, and that hardly an original one.

The ordinary ear-scoop of the instrument shops is obviously quite unfit for the purpose. The object is to get a small instrument, which can be readily slipped behind the stone, or other body, impacted in the canal, without any risk of pushing the obstacle further in. This can, I believe, be best effected by taking a full-sized half-curved surgical needle, heating the point in the flame of a spirit-lamp, and then turning it slightly in. This forms a small but strong tractor, with a sharp point, which can, after a little manipulation, be introduced behind the foreign body with, as I think, greater ease than either a loop of wire or the ordinary scoop. When once the point is fairly behind the impacted body, it can, with a little traction, be readily coaxed out of the passage.

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The wire-loop is, no doubt, very useful for the removal of foreign bodies from the external auditory meatus, and comparatively safe, if the meatus be well illuminated. But by far the best and safest method is syringing; this has been insisted on by almost every authority on aural surgery; and, in my opinion, no other plan should be attempted until syringing has had a fair trial.

URBAN PRITCHARD, Professor of Aural Surgery, King's College.

VACCINATION.—The services of Dr. Hodgson, of Worthington, as public vaccinator for the district, have been handsomely recognised by a cheque from the Local Government Board for the sum of £57 18s.