others, improvement began as soon as the hypodermic injection was commenced; and it was the occurrence of iritis, when all the other symptoms of syphilis were disappearing, which necessitated the continuance of treatment. In this case, the gums were affected, and the first attack of iritis came on while the patient's mouth shewed the effects of mercury. This affection of the mouth I did not, however, regard as evidence that the system was more under the influence of mercury than the systems of those who did not show this symptom; but rather as an accidental complication, which occurred in consequence of the syphilitic affection of the mouth; and as soon as, under the use of alum, the gums had recovered, I resumed the hypodermic injection. It is noteworthy that, though this patient was undergoing mercurial treatment for so long a period, her general health, as well as the specific symptoms, continued uniformly to improve.

Case XI was treated with greater regularity than any of the others; and ten injections, administered regularly every third day, effected a cure.

In Case XII, although the patient attended very irregularly, a cure was effected with less than a grain of the bichloride, nine injections being made in the course of seven weeks.

As I stated at the commencement of this paper, the cases are not numerous enough for very positive conclusions; but certainly the result of the treatment in ten of these cases is sufficient to encourage a fair trial; and my further experience is at least as favourable to this plan, as that which I have here recorded. I have made no mention of cases which have come under my care since the commencement of the present year, reserving the records of these until sufficient time has elapsed to make the cases complete; and also trusting that the method will receive a fair trial in institutions which will furnish cases enough for accurate statistical deductions, and render further publication on my part unnecessary.

CASE OF BENDING OF THE RADIUS IN AN ADULT.

By ROBERT FARQUHARSON, M.D.,

Medical Officer to Rugby School; late Assistant-Surgeon Coldstream Guards.

ON the 15th of last October, I was watching a football match on Rugby School Close, when J. S., aged 18, asked me to look at his right arm, which had been injured during the game. On cursory inspection, I could detect nothing far wrong; and, considering his symptoms due to a severe bruise, merely recommended rest and fomentation. Next day, he again presented himself, stating his conviction that he had bent his forearm by the accident. Naturally rather incredulous, I made a careful examination, and found that he was quite right, and that a well marked distortion really existed. Both bones were affected in some degree; but the chief strain had been experienced by the radius, which described a considerable curve, with the convexity inwards. No feeling of crepitus could be detected, nor any trace of irregularity along the margin of the bone; and motion, although attended by slight pain, was altogether unaffected. The deformity readily yielded to firm manipulation over the knee; but, as it speedily returned on the withdrawal of the force, it was necessary to apply an anterior and posterior splint.

On October 20th, the splints were removed; but the bend of the radius, though decidedly less marked, could still be observed. Reduction, if I may so call it, being effected as before, the splints were re-adjusted. On October 26th, on uncovering the arm this morning, it was found to have entirely regained its normal shape; a slight degree of weakness and stiffness only remaining. Since that date, it has rapidly recovered strength, and has never given rise to uneasy sensations of any kind.

REMARKS.—Systematic writers on surgery insist on the great rarity of such an occurrence as the above after puberty, and even hint at its impossibility, save in connexion with degeneration of the osseous tissue. But, in my patient, no such predisposing cause could exist; for he was not only stout and well developed, but of special activity in those games which most severely test the frame. We must, therefore, look upon the case as one of an exceptional nature, in which rendering of a perfectly sound bone took place, irrespective of fracture; and the record of such an event may save others from the error, into which I so nearly fell, of overlooking the true nature of the injury; for, although the consequences of such an omission might not be very serious, the resulting deformity, however slight, would sooner or later have proved an annoyance, and brought discredit on the medical art. It is, therefore, fortunate that the marked way in which my attention was drawn by the lad to the nature of his lesion prevented my being led astray by the recollection of our ordinary surgical principles.

CLINICAL MEMORANDA.

[Under this head, we shall publish from time to time, as materials accumulate, short records of remarkable cases in practice which are sufficiently rare, interesting, or instructive, to deserve record, but do not call for lengthened statement or comment. Brevity and point should be the valuable characteristics of cases forwarded for this column.]

MULTIPLE VESICAL CALCULI.

By WILLIAM NEWMAN, M.D. Lond., F.R.C.S. Eng., Stamford.

J. B., aged 75, just came to me in May 1867, complaining of pain in passing urine. This was of some months' standing. He also passed some blood at times. He was relieved by medical treatment; the use of any instrument he strongly opposed.

Nearly a year afterwards, he again came with the same symptoms, and was again a little relieved. In December 1868, he had actual retention of urine; and I then passed a catheter and struck some calculi. They were easily moved by an instrument. Occasional attacks of retention happened afterwards, until his death in May 1869, from exhaustion.

I made a *post mortem* examination of the bladder, and found a hundred and five separate small calculi. Most, if not all, had an uric acid nucleus, and an outer coating of phosphatic material. Their total weight was over three ounces. The bladder, contrary to my expectation, was only slightly altered from the healthy condition; its interior towards the base only was somewhat reddened. The prostate was markedly enlarged.

OBSTINATE GASTRIC IRRITABILITY, TREATED BY HYPODERMIC INJECTIONS.

By JOHN HARRISSON, Esq., Congleton.

JAMES MITCHEL, aged 19, suffered during three years from severe attacks of vomiting, which were induced by all kinds of solid food, and by all liquids. Pure water was not always rejected. Sometimes, and sometimes only, a few spoonfuls of beef-tea, milk, or mutton-broth, would not cause sickness. He was obliged to leave the table several times during each meal, and lost many dinners daily in his attempts to retain one. Excessive weakness, depression of spirits, and pallor were the obvious results of this disease. He was treated by me, and by various other medical men, during his illness, without any benefit, and was for six weeks an in-patient of a large hospital, where great care was bestowed upon his diet and treatment, without avail. He was fed entirely upon milk, and milk with lime-water; a teaspoonful only was given each half-hour; but he did not improve.

The patient came under my notice again in June 1868. I had just then successfully treated a most obstinate case of vomiting consequent on pregnancy, by the hypodermic method, (*Vide BRITISH MEDICAL JOURNAL*, August 23rd, 1868) and resolved to try the same plan with this patient. At first, one-fifth of a grain of morphia was injected; afterwards, the dose was gradually increased to one grain. At the end of a fortnight the strength of the injection was gradually diminished, and was finally discontinued in six weeks from the date of the first injection. During the period of treatment, the patient steadily improved in every respect, the vomiting ceased, he gained flesh, and was soon able to work hard as a farm-labourer. Once or twice during the past year, nausea and slight sickness have been felt by him, but ordinary remedies have easily removed these threatening symptoms.

CASE OF HERPES CORNEA WITH HERPES ZOSTER, SUCCESSFULLY TREATED WITH ARSENIC.

By C. CURRIE RITCHIE, M.B., Manchester.

HENRY F., aged 9, was brought to me on April 7th, 1869, on account of a "breaking out" on his skin, which was said to have appeared about three weeks previously, after scarlet fever. He was small for his age, and somewhat strumous in appearance; he presented a well-marked example of herpes zoster, the eruption being rather plentifully diffused over the side of the nose, cheek, chin, neck, and trunk on the left side. I observed that he was also suffering from phlyctenular kerato-conjunctivitis of the same side, the vesicles surrounding the lower part of the cornea like a row of pearls: there was but little injection or haziness of the cornea. On inquiry, I found that the boy had complained of his eye being painful and "watering" about a fortnight before, but little attention had been paid to it. I prescribed two-drop doses of liquor arsenicalis with quinine and iron, three times a day, after regulating the