among the first who saw the body of Abdul Aziz on the morning of his death; and he assures me that the ex-sultan's mother, his wives, his eldest son (Iusuf-Izzetdin Efendy), his daughters, and all the women and eunuchs of the harem, declared to him that his Majesty *had killed himself*; and besides, the Hazzadar-ustâ (the comptroller of the female household), gave Dr. Millingen, who had not yet seen the suicidal implement, another pair of scissors, and told him that they were exactly similar to those with which Abdul Aziz had destroyed himself, and which he received from his own mother; an act which the Hazzadar-ustâ considered, under the circumstances of the ex-sultan's position and state of mind, as highly imprudent and blamable.

From the foregoing statement, it is clear that no other inference can be drawn regarding the death of Abdul Aziz Khan, than that he committed suicide. All the testimony obtained on that occasion concurs in establishing this fact. The appearance presented by the body, and the nature and direction of the wounds found on it, show that these wounds were self-inflicted; and the position of the blood stains indicates that they were made while his Majesty was seated upon the sofa, resting his left arm on the edge of the back cushion; attacking that arm first, and afterwards the right arm, thus causing the stream of blood flowing from the left arm upon the matting to deviate into his lap. The other stain of blood marked upon the sofa was caused, I believe, by the flow of blood from his wounds when he fell exhausted on his right side upon the sofa. The implement found near him corroborates this explanation; and it is a fact well known to psychologists, that persons suffering from mental derangement, especially from *lypmania* of a religious or suicidal character, are *insensible to pain*, and that this spontaneous analgesia is as strongly marked in such cases as it would have been under the influence of artificial anæsthetics. The testimony of his own family, that of the other inmates of his household, and the unsettled state of his mental faculties, add a mass of evidence which no sophistic subtleties can shake. It now, therefore, only remains for me to refute the remark which has been made, that "the character sustained by Abdul Aziz, as the visible leader of the Mohammedan faith, would have rendered death by his own hand a heinous offence in his estimation", by remarking that, notwithstanding suicide is far more frequent amongst Christians than amongst Mohammedans, yet it is as sinful for a Christian to destroy himself as it is for a Turk.

BROMOHYDRIC ACID.

By J. MILNER FOTHERGILL, M.D., M.R.C.P.,
Assistant-Physician to the West London Hospital, etc.

THE utility of the bromide of potassium is now generally acknowledged by the profession, and its effects upon the nervous system are often of the greatest service. At the same time, it is not readily combined with several agents with which it may be advantageously administered, as quinine, for instance. Last year, I abstracted for the *London Medical Record* (April 20th, 1875), a paper by Dr. De Witt C. Wade on this agent, which appeared in the *Peninsular Journal of Medicine* in February 1875. He described there the usefulness of bromohydric acid, especially in obviating the headache which is produced in some persons by quinine. From what he said, I handed over his paper to the dispenser of the West London Hospital, and commenced to prescribe the new remedial agent. The formula is as follows, for the production of the acid in quantities of two quarts. Dissolve 3x, 3vi, gr. xxviii of bromide of potassium in four pints of water, then add 3xiii, 3i, gr. xxxvii of tartaric acid. The bitartrate of potash is precipitated, and the hydrobromic acid remains in a clear bright, almost colourless, fluid, possessing an acid taste and the ordinary acid properties, as well as the peculiar properties of bromide of potassium, as compared with any other salt of potash.

The accuracy of this last statement may be challenged by some readers. I will, therefore, briefly relate the conclusions arrived at after a twelvemonth's experience of the drug. It certainly does prevent the occurrence of headache, after each dose of quinine, in those who before had to desist from taking quinine for that reason. It is, perhaps, not invariably successful, but its power is very marked. It also prevents the fulness felt in the head by some persons, especially those labouring under cerebral anæmia, after doses of iron. It is also useful in nervous conditions, and, with quinine, is excellent in those cases where there is much nervous exhaustion from excessive indulgence in tea or in alcohol; this being tried in a case of nervous excitability and sleeplessness, where there had been much resort to chloral-hydrate.

In forms of excited action of the heart, connected with general nervous excitability or nervous exhaustion, hydrobromic acid is most useful. Given with quinine (of which it is a capital solvent) and digi-

talis, it gives better results than the bromide of potassium and digitalis; this is a favourite combination with me at both my hospitals, and is agreeable as well as effective. In all hysterical conditions connected with ovarian excitement, it seems to have all the properties of the bromide of potassium. It is equally useful in the vomiting of pregnancy, and seems to exercise quite as powerful an influence over acts of reflex origin as does the bromide. It is especially adapted for the relief of menorrhagia associated with sexual excitement, and is even more effective here than the bromides themselves. It is also of use in whooping-cough, and combines conveniently with quinine, forming an effective measure in this troublesome affection. With spirit of chloroform and syrup of squills, it forms a most agreeable and palatable cough mixture of no mean potency. It is also of use in case of cough of reflex origin. Where there is gastric irritability, it is the most useful of all acids, possessing the usual properties of acids generally and of the bromine as well.

The dose of the acid, prepared as above, is one drachm as a full dose. Half a drachm is the dose I ordinarily employ. Bromohydric acid has the further advantage of not producing the troublesome eruption so often the result of doses of the bromide of potassium, at least so far as my experience has yet extended. There are many qualities about this acid to render it an useful member in our therapeutical *armamentarium*.

Dr. Wade states that it is useful in the treatment of fever. It would seem the acid *par excellence* where there is much cerebral excitement in pyretic affections, but of this I have no personal experience.

SURGICAL MEMORANDA.

UNUNITED FRACTURE OF FEMUR.

THE case of ununited fracture recorded in the *JOURNAL* of to-day (June 24th), leads me to report a somewhat similar one which came under my observation in July 1873. A male, aged 27, apparently in good health, broke his right thigh, while hunting, about its middle. The limb was put up in the usual way, but, after seventeen weeks, union had not taken place. Under these circumstances, I saw him. It was agreed, in consultation, that the whole limb and pelvis should be enveloped in starched bandage, the patient be put upon crutches, and sent to Margate. There he was under the care of Messrs. Curling and Hicks of Ramsgate. In about two months he returned to town, union having taken place. He has ridden many a race since. This gentleman was of an active restless disposition, and doubtless constantly disturbed his splint and fracture.

Another case, more recently under my care in the London Hospital, came home from sea, in a similar plight. Starched bandages were used; and several months elapsed before union occurred.

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CONTRACTION OF THE PALMAR FASCIA.

IN the Remarks on Glaucoma by Mr. Jonathan Hutchinson in the *JOURNAL* of June 17th, he states that "the contraction of the palmar fascia in finger-contraction is irremediable". It may be interesting to Mr. Hutchinson and the readers of the *JOURNAL* to be informed that Dr. Otto Madelung, of the University Hospital at Bonn, has treated these cases successfully by means of an operation which he describes in a pamphlet published by Messrs. Triebner and Co. The operation consisted in laying bare the palmar fascia, and carefully dividing the contracted fibres. Dr. Madelung adduces several cases in which the treatment was permanently successful.

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DISLOCATION OF THE HIP, IN A GIRL AGED EIGHT YEARS, REDUCED BY MANIPULATION WITHOUT CHLOROFORM.

FROM its extreme rarity, the peculiar accident, and the mode of reduction, induce me to publish the following interesting case.

On the evening of Tuesday, April 25th, I received a message requesting me to see a daughter of Mrs. W., residing some distance from my house, who had received a severe injury to the hip. I was unable to see the case that night; and requested my assistant, Mr. W. B. Boughton, to do so, who, immediately on seeing the case, diagnosed it readily. It appears that this child was being pursued down the street by two boys, with iron hoops. She entered a passage dividing two