remember, when practising in London, and meeting the late Dr. Merri-man, that he told me of an infant of three months dying from the effects of two drops of laudanum; but here, gentlemen, I hear of infants so educated to it, if I may say so, that they give them doses of Godfrey and laudanum that perfectly stagger all my preconceived notions. Can we then wonder, after what I have narrated, that there should be so great a mortality amongst the infants of this country, or such miserable, feeble, and brownish yellow countenances so striking amongst many of its inhabitants? What can or should be done to discourage this almost wholesale murder amongst infants, and contamination amongst adults? I am not able to answer this question, but grieve at so extensive a cause of degeneracy and ruin.

I am sure you will excuse my calling your notice to these poisons of the blood; as they demand, I think, a most anxious consideration. I had intended to have named two or three interesting cases of the morbus Addisonii that I have met with in practice, where I was able to follow them up to their issue in death, and to verify the diagnosis of each by a *post mortem* examination; but I am admonished by time that I have already detained you sufficiently long, and must not, therefore, enter on so large a subject.

ON A RARE FORM OF INJURY OF THE LEG.

By RICHARD QUAIN, F.R.S.

IN his able Address in Surgery at the late anniversary meeting of the British Medical Association in Dublin (BRITISH MEDICAL JOURNAL for August 17th), Dr. R. W. Smith describes an instance of very rare form of injury—the separation of the lower epiphysis of the tibia. “The disjunction” (to quote some of Mr. Smith’s words) “of the lower epiphysis of the tibia is undoubtedly among the rarest in this class of injuries. I am not aware of any well authenticated example of its having been placed upon record, with the exception of one that I published in 1860.”..... “The patient was a boy aged 16 years.”..... “I did not see him until six months after the occurrence of the accident.”

On account of the infrequency noticed by Dr. Smith, it occurs to me that the publication of a case observed by myself very soon after the accident which caused it, may contribute something towards completing the history of the injury. I therefore send an outline of the case from notes made at the time.

On October 22nd, 1851, a well built, healthy-looking lad, 17 years of age, was admitted into University College Hospital, on account of an injury near his left ankle, which occurred on the same day a short time before his being brought to the hospital. The patient stated that, while dragging a piece of iron about twelve feet long over a heap of earth in the street, he slipped and fell, his left foot being doubled under him. No further account of the position of the limb in the accident could be got.

The entire injury was found to be at the lower part of the leg. “The tibia there projects forwards; and below the prominence is a depression—between it and the foot. The projection of the bone is an inch and half higher than the lower margin of the fibula, and three-quarters of an inch above the lower edge of the malleolar process of the tibia. The space between the prominent tibia and the end of the great toe on the injured side measures three-quarters of an inch less than in the other foot.” The ankle-joint was uninjured.

Two other facts I looked upon as peculiar to this injury—diagnostic of it; namely: 1. The edge, so to call it, of the displaced bone was rounded; and the end or lower surface was felt to be smooth, and as it were rugous—very unlike the hard, angular, almost sharp feel of actual broken bone, and corresponding exactly with the condition of a bone not fully developed, where the epiphysis is connected with it by cartilage. 2. There was an absence of the soft swelling which surrounds the broken ends of bone where any displacement exists—the swelling occasioned by the effusion of blood from vessels torn by the sharp bone at the seat of fracture. Swelling likewise accompanies the displacement of bone at a joint. In that case, however, it results from increased secretion of synovia, not from blood. It was, no doubt, the freedom from swelling which permitted the outline of the prominent bone and the hollow below it to be so clearly defined as they were. The same circumstance permitted the easy examination of the edge and the end of the bone where it projected.

The diagnosis made out at the time was, separation of the shaft of the tibia from the epiphysis. The case has not hitherto, I believe, been published, except in the account of it given to pupils in the ward of the hospital and in a clinical lecture.

The replacement of the bone and the treatment (by means of starched apparatus) presented no difficulty and no circumstance requiring notice.

CASE OF TRAUMATIC APHASIA.

Recorded by the Patient; with Remarks by J. P. BRAMWELL, M.D.,
Perth, President of the Perthshire Medical Society.

WHEN about twenty years of age, being incited by exaggerated descriptions of the genial climate and fertile soil in the western states of America, I emigrated from Scotland to those parts; and, having purchased land, began, along with the other pioneers of civilisation, to cut down the forest and cultivate the ground. Having brought, in the course of three years, a considerable space of land under cultivation, I was enabled to let, as a favour, to Wilson, a man with a family, who had recently come to that quarter, half of a field for the purpose of raising wheat, retaining the other half for my own use. When the wheat harvest came (about the middle of July), I hired two men (Vert and his son) to cut down my half of the field; but, when they were thus employed, Wilson and his family came and began to cut, insisting that half of the wheat of the whole field was his, and not what grew on his half of it. High words arose; but, through the intervention of Vert, it was agreed to refer the matter to the man who sowed the wheat when he returned towards evening; and that, in the meanwhile, each party should begin to reap on opposite sides of the field. Accordingly, Vert, putting aside with his hands some very tall rye, was proceeding towards the house, I following close after; when, as it were, a flash of lightning passed before my eyes, and I became on the instant unconscious. On recovering my faculties (which I thought I did immediately, although, as I was afterwards informed, I lay senseless for the space of ten minutes), I was sitting with my hands full of blood, which continued to trickle from my head. On looking around, I saw Wilson* at some distance behind with a club in his hand, and Vert amongst the rye some paces in advance, and became immediately aware of what had happened. As I perceived that Vert was terrified, I attempted to say something for his encouragement; but, to my surprise and horror, I found I could only utter unintelligible sounds. I remained sitting for some time, not from inability to rise, but from amazement, making repeated attempts to speak. At length, having taken Vert’s arm, I went to my house at about two hundred yards distance, and sat down, hoping that in a short time I should recover the faculty of speech; but, finding I was deceived in this respect, I determined to call in the only medical practitioner in the district, who lived at the distance of about three miles. Accordingly, having intimated to Vert by signal to hand me writing materials, I took a sheet of note-paper for the purpose of writing the doctor, with whom I was intimate, that I wished his attendance. But here a new surprise awaited me; for, having dipped the pen in the ink, I found that I could not express my desire by any words whatever. I attempted to write the word “Doctor”, but could proceed no further than the initial “D”; however, by showing that letter to Vert, and pointing in the direction in which the doctor lived and other pantomimic gestures, I made him understand my desire; and he accordingly sent his son for the medical man, after which I went to bed, and soon fell into what appeared to be a placid sleep, out of which I was with some difficulty aroused on the doctor’s arrival. On perceiving the doctor, I immediately extended my right arm, and drew up my shirt sleeve; in reply to which signal the doctor said, “You wish to be bled, which is exactly what is required.” After failing to draw blood from any vein in the right arm, he had recourse to the left, and succeeded: dark blood flowing very slowly at first, but afterwards in a full stream. To what extent he bled me, I cannot exactly say; but several who saw the quantity said that they had never seen so much drawn from any man. I may here mention that this doctor’s medical education consisted only of an apprenticeship to another practitioner in one of the older states; and, although I think he erred in using his lancet too freely, having repeated the bleeding twice or thrice to a less extent afterwards, at intervals of two or three days, in other respects his treatment was judicious.

For the first six days and nights I lay on my back, almost motionless, having no pain, nor uneasiness, nor sensation of hunger or thirst; and, although I was observant of all that was said and done in my presence, I distinguished the lapse of time only by the light of day and the darkness of night. I did not sleep during all this time; but, on the morning of the seventh day, I awoke apparently from quiet sleep; and, as the fringe of the bed-quilt tickled my upper lip, I attempted to remove it with my right hand; but, to my surprise, my hand was not obedient to will. I discovered also that the nerves of sensation were completely paralysed from the points of the finger to the shoulder. Sensation was also gone in my right leg and foot. On discovering this, I attempted to pray mentally, but failed, not from any confusion of ideas, but from

* Wilson was a left-handed man; and, being behind when he dealt the blow, struck me on the left side of the head immediately above the ear.