in some degree be due to the same cause. And conversely, the administration of thyroid extract may possibly, by strengthening the resisting power of the tissues of old people, enable them to withstand, or even perhaps to expel, the organisms which are perhaps the cause of cancer.

This reasoning is, you will observe, entirely theoretical. As I have already said, I have no facts which show that the thyroid extract is of the slightest use in cancer. I hope you will clearly understand my position in this matter. Do not go away and say that I believe, or that I have suggested, that thyroid extract will cure cancer. I have made no such statement; I make no such suggestion. All I say is that for the reasons I have stated to you I am anxious to see the remedy tried in cancer. I think it is just possible that it may be beneficial in cancer, and especially, perhaps, in cancer of the skin. I repeat that I have no facts to support this idea—this bare possibility. But any plan of treatment which affords even the remotest possibility of being useful in such diseases as leprosy and cancer deserves a trial. This is my reason for bringing the matter before you and—through the pages of the BRITISH MEDICAL JOURNAL—before the profession.

I may add that I should like to see the remedy also tried in xeroderma pigmentosum, in epitheliomatous conditions of the skin, and in rodent ulcer.

NOTE.—The thyroid treatment of ichthyosis will be considered in a subsequent communication.

AN ANOMALOUS CASE OF STONE IN THE BLADDER IN A FEMALE.

BY JAMES OLIVER, M.D., F.R.S. EDIN.,
Physician to the Hospital for Women, Soho Square.

F. B., aged 30, married ten years, had had five children. The last child was born twelve months before the patient came under my observation. It was suckled for two months only, but the menstrual discharge did not reappear until six months after this confinement.

Since six weeks after this confinement she had complained of passing a thick purulent-looking material with the water and the motions. There was pain during and after micturition, which continued for about half an hour. She had never passed any blood with the water. She stated that ten years ago the abdomen became much enlarged, but the swelling suddenly disappeared when an unusually large quantity of urine was passed. The first child was born eight years ago.

There was nothing to note about the abdomen. The cervix uteri, which was lying towards the left side of the pelvis, was much torn. In front of the cervix was felt a short ridge in the vaginal roof, and anteriorly this ridge terminated in a small nodule which was tender to the touch. The body of the uterus was slightly and uniformly enlarged.

The catheter was passed, and on being withdrawn impinged against a solid body, which proved to be a phosphatic calculus with a uric acid nucleus. The stone was embedded in a pouch of the bladder. The urine drawn off was muddy and offensive; it contained a large quantity of pus, and its specific gravity was 1023.

REMARKS.—Ten years before this patient came under observation she had probably suffered from hydronephrosis, and it is quite possible that the calculus which produced this disorder was the nucleus of the stone removed from the bladder. Augmenting in size, it had probably lain during these years in a pouch or diverticulum of the bladder without producing any untoward symptom until the fifth parturition excited some inflammatory disturbance in the tissues which surrounded it.

MEDICAL MAGISTRATES.—Dr. T. J. Higgins, Louth, Lincolnshire, has been placed on the Commission of the Peace of the county of Lincoln.—Mr. J. West Walker, M.B. Lond., of Spilsby, President-elect of the Midland Branch, has been appointed to the Commission of the Peace for the Parts of Lindsey, county of Lincoln.

THE ELEVENTH INTERNATIONAL MEDICAL CONGRESS.

Held in ROME, March 29th to April 5th.

[FROM OUR SPECIAL CORRESPONDENTS.]

AN ADDRESS ON THE PART PLAYED BY NERVOUS DEBILITY IN THE PRODUCTION OF FEVER.

Delivered before a General Meeting of the XIth International Medical Congress, held in Rome, 1894.

BY PROFESSOR BOUCHARD,
Paris.

HAVING had the honour of being invited to present to the Congress the result of some of my observations or experiments, I have chosen some which relate to fever, and which, in some respects, appear to me to be of a nature to throw light upon questions of physiology, pathogeny, and pathology which are still undecided. What I have to submit to my colleagues is not a synthetic exposition of doctrines as to fever, but a series of fragmentary studies in which clinical facts, very common, but, perhaps, somewhat neglected, have been grouped, analysed, and controlled by experiment.

CAUSES OF RISE OF TEMPERATURE IN DEBILITATED PERSONS.

A fact which has, doubtless, been very frequently observed, but of which little mention is made and of which little explanation is forthcoming, is that patients suffering from fever who are brought to hospital have, at least four times out of five, a temperature higher by one degree and more than they will be found to have on the morrow and ensuing days. It is a well-known fact that visits received by patients suffering from fever cause an immediate rise in their temperature, and that during convalescence when the fever has subsided these visits often make it reappear in the form of a short, but sometimes violent, paroxysm. It is well known that an article of food taken inopportunistically during the course of a continued fever increases that fever, and that in febrile diseases the first food allowed is very often the occasion of a fresh rise of temperature. It is also known that muscular fatigue exaggerates or rekindles fever; that the getting up for the first time is often in the case of a patient who has recovered from typhoid the occasion of a rise in temperature, and that phthisical patients are often found, on returning even from a very moderate walk, to have a temperature higher by two degrees than when they set out. Lastly, I would call attention to the fact that in persons who are weakly or who are actually ill or who are convalescent, an intellectual or emotional disturbance is sufficient to rekindle or to induce fever. These causes do not produce fever in a healthy man, nor is the fever which is seen to follow them in persons who are ill generally attributed to them. Indeed, inasmuch as these facts, which daily observation confirms, are undeniable, they are interpreted in a different way. Thus, it is said that indigestion, bodily or mental fatigue, moral disturbances—factors whose etiological part in the development of diseases has been established empirically—may act in the same way to aggravate these diseases or to interfere with recovery therefrom. According to this view, the nervous, muscular, or digestive disturbance aggravates the typhoid fever or the tuberculosis; the fever is produced by intensification of these diseases and not by the disturbing influence, which is only an indirect cause. My belief is that these returns of fever, produced under such diverse circumstances by causes