ERYSIPELAS PHLYCTENODES, Zoster, or "Shingles", is a species of erysipelas. It appears in groups or clusters of phlyctenæ, and commonly selects for its development the integuments of the thorax or abdomen. It is less frequently seen on the face and extremities. There is commonly some slight febrile disturbance of the system, and great soreness of the parts involved; and after the eruption has disappeared, it leaves a painful sensation beneath the skin for a considerable time.

There does not appear to be any settled treatment of this disease, either internal or external; and, therefore, it is generally left to take its course. I am not prepared to state from facts, that the solution of the nitrate of silver would at once obliterate this form of erysipelas; but, judging from its decided effect in the preceding form of the disease, there is every probability that it would be equally effectual in this.

Southampton, January, 1853.

CASE OF UTERINE HÆMORRHAGE, APPARENTLY SIMILAR TO THAT RECENTLY REPORTED BY MR. HARRINSON.

By WILLIAM EDWARD CROWFOOT, F.R.C.S.

THE perusal of Mr. Harrinson's case of uterine hæmorrhage induces me to publish the following case, which occurred in my practice a few years since, and which appears to be of a similar character. Two analogous instances are given in the *Practical Observations on Midwifery*, by Drs. McClinton and Hardy, p. 194.

CASE. In August, 1841, I was summoned, in the middle of the night, to a poor woman who was in labour, under the care of a midwife, at the distance of three miles from Beccles. She had been frequently pregnant, but in every instance, except the last, her children had been born dead, in consequence of hæmorrhage either previous to, or during her labours. On the last occasion, I attended her, and ruptured the membranes immediately upon my arrival, and the child was born alive. In consequence of her poverty, she engaged a midwife to attend her, who, when she had been three hours in labour, assured her that she was doing remarkably well. In spite of these assurances, the poor woman felt that all was not right; complained of extreme faintness; told her husband she was confident she should die, if not immediately delivered, and begged him to lose no time in coming for me. Her fears proved but too correct; for almost before he could leave the house, she expired. Upon my arrival, an hour after her death, I made an examination *per vaginam*, and found little or no external hæmorrhage, but the os uteri completely dilated, the vertex presenting, and the head firmly wedged in the bones of the pelvis. The midwife could in no way account for the disastrous result, and said that everything appeared to her to be going on naturally; that the patient had no loss, but only complained of a great feeling of faintness.

On the following day, I made a *post-mortem* examination of the body, which was that of a fine, well-formed female, of thirty-five years of age. Upon opening the abdomen, the viscera were found healthy, but pale and anæmic. The placenta, which had been attached to the posterior surface of the uterus, was separated throughout a large extent from its attachment; and coagulated blood, to the amount of six pounds, with a proportionate quantity of serum, was effused between it and the uterus. The head of the fœtus was so firmly wedged in the pelvis, that I had some difficulty in withdrawing it; and this circumstance accounts for the non-escape of the hæmorrhage externally. Had the membranes been ruptured at the commencement of labour, this poor woman's life might possibly have been saved.

Beccles, Suffolk. January 10th, 1853.

BIBLIOGRAPHICAL NOTICES.

THE CLIMATE OF ITALY, IN RELATION TO PULMONARY CONSUMPTION; WITH REMARKS ON THE INFLUENCE OF FOREIGN CLIMATES UPON INVALIDS. By T. H. BURGESS, M.D., etc. London: 1852.

AMONG the desiderata of the present day, as far as the treatment of pulmonary affections is concerned, it must be admitted that the choice of a suitable climate for patients is one of very great importance. While hospitals have been established for the treatment of phthisis and its cognate maladies, and while a more perfect knowledge of physical diagnosis is daily on the increase, it is surprising how little attention has been paid to the choice of a suitable sojourn for the consumptive invalid. How many, alas! have been sent to linger out their days on the inhospitable shores of a foreign land, without regard to its suitability, either economically or medicinally; a warm climate being in some cases only regarded, and a constant sea-breeze in others; no care, no thought, is bestowed on the capabilities each may present as a residence for the sick and dying; and while some weary from their very flatness, others partake so much of the mountainous in their character and external features, as to render walking exercise impossible. Too little importance has been attached to the natural air of the sick; and medical men have yet to be informed that Great Britain itself possesses spots to which pulmonary invalids may resort with benefit.

"The purpose," says Dr. Burgess, "of this volume is to show, that to send *consumptive* patients to Italy or to the South of France, for the benefit of their health, is a mistake; and that the climate of the United Kingdom, as yet very partially and imperfectly understood, will afford to the English consumptive patient as great if not greater chances of recovery than that of either of the former countries, provided a proper locality be selected. If," he observes, "we contemplate the climate theory through the appropriate medium of the natural history of creation, we shall find that the argument is also in our favour. We may seek in vain along the entire range of organized existence for an example of diseased animals being benefited by a change from a warm to a cold, or from a cold to a warm country. There appears nothing in the book of nature so violently inconsistent. The fishes, which inhabit the waters of the British Islands, will not thrive in the Arctic seas, nor those of the latter in the oceans of the tropics. The birds of the forests of America generally die in this country, unless reared like hothouse plants; and so with the wild animals which live and flourish in the jungles of Asia and the scorching deserts of Africa. Man, although endowed with the faculty of enduring such unnatural transitions in a remarkable degree, nevertheless becomes sensible of their injurious results. The child of the European, although born in India, must be sent home to the climate of his ancestors, or to one closely resembling it, in order to escape incurable disease or premature death. The accident of birth does not constitute the title to any given climate. The natural climate of man is that in which not only he himself was born, but likewise his blood relations for several generations. This is his natural climate, as well in health as in disease. * * * *Change of air in his own climate*, or removal to one nearly approaching to it, is the natural indication, and will accomplish whatever good climate can effect in consumption." (p. 21.)

"If there be on earth a spectacle of misery utterly deplorable," says Whiteside, "it is that of consumptive patients, in an advanced stage of that fatal disease, wandering through Italy in search of health. Unacquainted with the language, the people, and the habits of the country, they endure an accumulation of vexations, increase the suffering they had hoped to mitigate, and hasten the progress of a malady they fondly expected climate would retard or avert. There can scarcely be a question, that a residence at home, in a favourable situation, would be preferable to a cheerless residence in many parts of Florence, Rome, or Naples; and yet a patient may be sent abroad at such a period of the year as to render it impossible to procure a healthful abode with a sunny aspect and some of the comforts he would require. The churchyards of the towns in Italy frequented by English invalids, teach a melancholy lesson on this subject." (Whiteside's "*Italy*.")

Dr. Burgess justly observes, that a revolution must take