who all tell me that they themselves have observed the same facts, and fully agree with me in the remarks I have before stated on this subject.

I think the above cases are quite sufficient to convince all parties of the truth of my previous observations, and that they were not hypothetical. I am therefore inclined, and justified in coming to the conclusion, that persons who reside in these marshy districts, should not totally abstain from stimulants, for by so doing they render themselves more liable to an attack of fever, and greatly endanger their lives. I must confess that I am surprised that men of deserved eminence in our profession should step forward and totally condemn stimulants; why they do it, I know not, nor, I believe, do they; stimulants have been recommended in moderation from time immemorial. I would ask the question, what would the physician do without a stimulant? To wish totally to suppress the use of it because a few have suffered, is, I imagine, bad policy. Rather let each of us strive to impress upon the minds of all the beneficial effects of its moderate use, and its ruinous effects when taken in excess. Let us hear what a learned writer in the *Medical Times* says:—"If persons in such climates (*i.e.* hot climates) drink wine, spirits, or malt liquors, there is an excess of function in the whole nervous system incompatible with health, and the person soon wears out. But if, on the contrary, the air be damp and stagnant, and the soil level, the respiratory function is worse performed; there, the air doing less, the food is required to do more, and the stomach and digestive organs not being able to digest the food in sufficient quantity to supply the nerves, the latter are *empty* and *craving*, though the former is full. Here we have the strange phenomenon of a person eating heartily, perhaps too heartily, and still craving more; such a person complains of a "sinking" of the stomach, and is always relieved by good wine and brandy; provided that the digestive organs, and the liver in particular, are not previously injured by their use, this will be desired by all those who are influenced by 'total abstinence' doctrines, because, until very recently, we have been in the habit of viewing all food for one use only—namely, nutrition, overlooking in our philosophy the other great function in the animal machine—namely, the generation of the galvanoid force, which is to the body what steam is to the ship, or what gravity is to the earth as a planet." Now, there is some good sound reasoning in the above remarks. I hold the man that cannot reason to be a fool; he that will not is a bigot; and he that dare not is a slave. I am most desirous that my observations should not be misunderstood, or that any wrong interpretation should be given. For a long time I have paid particular attention to malarious diseases. I ascertained that malaria had a peculiar effect upon the population, and that it was more destructive amongst a class of people called teetotallers. I published the result of my observations, but not with the view of annoying, or with any vindictive feeling towards, the teetotallers, but with the idea that, if my statement was confirmed by the experience of others, it would put parties in possession of a fact, that would make them hesitate before they adopted or recommended any dietetic rules, which would be prejudicial to health. No one can doubt for a moment the good effects, morally speaking, of teetotalism;

but if we find that it does in any way exert a baneful effect in certain localities, founded upon pathological facts, we should not hesitate to speak out, even if it retard for a time its progress in the higher and healthier districts of England.

Spalding, July 30th, 1844.

CASE OF VACCINIA AND VARIOLA OCCURRING TOGETHER, THE VARIOLA NOT MODIFIED.

By F. W. PITTOCK, Esq., Sellinge, near Ashford.

(Read at the Anniversary Meeting of the Provincial Medical and Surgical Association, Aug. 7, 1844.)

May 2nd, 1844. A. P., aged one month, was vaccinated in both arms.

May 8th. I examined the vesicles, and from their being in a forward state, I punctured one of them, and obtained an abundant supply of fluid lymph, with which I vaccinated six children on that day.

May 9th. Early in the morning, the child was attacked with violent febrile symptoms, the countenance became flushed and anxious, the breathing quick and hurried. In the evening vomiting ensued.

May 10th. The chest and body were suffused with an intense redness, which in the evening seemed converted into innumerable papulæ; the mucous membrane of the fauces and throat was also as thickly studded.

May 11th. The papulæ were more prominent; in some parts they were well defined vesicles, in other parts they were conglomerated together. The constitutional symptoms increased in severity, and the child died on the 12th of May.

Under the same roof, but in quite a distinct dwelling, at the time I vaccinated this infant, there was a case of small-pox, and the young woman, the subject of it, had nursed the child, (a circumstance I had not been aware of) previous to its being vaccinated. If I had waited my usual time, namely, until the same day of the following week, before I took lymph from the child, I should then have been aware of the suspicious symptoms which developed themselves, and should not have vaccinated from it. I afterwards reproached myself for not having been on my guard with respect to the particular circumstance of the vaccine vesicles, not being, as they usually are on the 6th day, small and imperfect, but on the contrary, being full and prominent, and giving almost a forced appearance, with the characteristic marks of the 7th day; the mother herself remarking how well her child had taken. Immediately the varioloid symptoms commenced, the vaccine vesicles appeared to recede, and the lymph to be absorbed; a distinct zone of healthy skin, for the space of a fourth of an inch, surrounding the vesicles over which the variola did not spread. I naturally felt somewhat anxious to know the result of the cases vaccinated from the child that died, nothing however particular occurred excepting that the children had febrile symptoms of a character more severe than ordinarily attends vaccinia, but still none decidedly varioloid, and the vesicles were all strongly developed, but passed through their usual stages well.

Upon examining the vesicles on the 8th of May, I did not suspect variola could possibly make its appearance, particularly as there was total absence of

symptoms, and I did not hesitate to state, that although small pox was so very near, I did not apprehend the child would have it. The result shows I prognosticated wrong. It is evident that variola was in the system when I vaccinated the infant; and if I may venture to say so, through its agency, was vaccinia thus forced onwards and so strongly developed, as I have previously described, whilst its own peculiar symptoms were thus temporarily arrested, or that it suddenly developed itself on the 9th of May, and ran its hurried and rapid course to the 12th, when the child died. It may not be out of place to mention, that in a dwelling between the two cases of small pox, there were a mother and child who had never been vaccinated, until the day I vaccinated A. P.; these passed through the stages of vaccinia well, and had no small pox. Whilst narrating the particulars of a case, rather tending to throw discredit upon the prophylactic powers of vaccinia, I call to mind a circumstance which happened about two years ago, and which perhaps is not unworthy of notice. Late in the evening I was summoned to see a child very ill; it had been so some days; an eruption was now appearing which I recognised to be of the varioloid character; five other children lived under the same roof; there were no separate dwellings; all being well, I vaccinated them that night, and they all fortunately passed through the stages well, and escaped the small pox. The child with variola only came to the house three days previous to my seeing it, and died on the ninth day after the eruption appeared.

RETROSPECT.

CAUTERIZATION BY MEANS OF A RED-HOT IRON IN THE TREATMENT OF ULCERATIONS AND ENGORGEMENTS OF THE NECK OF THE UTERUS.

At the suggestion of M. Jobert, one of the surgeons to the Hospital at St. Louis, M. Laurès has produced a work on this subject. The former has for many years occasionally substituted, with the most remarkable success, the red-hot iron, in place of the various caustics employed in the treatment of uterine affections. The latter renders a service to the profession by pointing out the rules to be observed in order, by similar means, to obtain similar results.

The cauterization is made by a rod of iron introduced through an ivory speculum, that substance being a bad conductor of heat. The iron should be heated to whiteness to prevent it adhering to the part it touches.

If the vagina escapes, no pain of the uterine neck is produced at the moment, nor do any symptoms of reaction take place; menstruation is not affected by it, although in some cases the application has been made near the catamenial period.

This medication is particularly applicable,

1st. To deep, exuberant, fungous ulcerations, complicated by hæmorrhage, simple hypertrophy, engorgement, with softening, or induration.

2nd. To hypertrophy, with uterine catarrh, but without ulcerations.

3rd. To ulcerations, accompanied by a softening of the tissue of the uterine neck, which bleeds under the influence of the least pressure.

4th. To severe neuralgic affections of the neck.

5th. To ulcerations of a malignant nature, for which amputation has been recommended.

M. Jobert has been successful with the red-hot iron in cases of this nature, where the patient has submitted to two excisions.—*Gazette Médicale de Paris*.

THE USE OF MUSTARD IN THE CONVULSIONS OF CHILDREN.

Dr. Tripler recommends the employment of mustard in this formidable disease. He had an obstinate case, from teething, in which everything was tried that he could think of without success; as neither antimony, sulphate of zinc, sulphate of copper, ipecacuanha, nor any other emetic usually given, seemed to make any impression upon the stomach, he thought he would try mustard with a view to its emetic effects. In a few minutes it arrested a fearful attack of convulsions that had lasted five hours; and that too, without vomiting the patient for some time afterwards. He has since had three more cases, all in the course of a fortnight. With the first he tried the usual remedies, and also made an ineffectual attempt at venesection. He then gave a dose of mustard, and the patient was relieved in five minutes. With the other cases he used the mustard *at once*, and successfully. Its efficacy seems to have no relation to its emetic properties; for its sensible effect in these cases, is as frequently to purge as to vomit.—*Ferry's New York Journal of Medicine*.

THE DIFFICULTIES OF THE DIAGNOSIS OF BILIARY CALCULI.

Dr. Fauconneau Dufresne closes some researches of real practical utility by the three following propositions.

1st. *Calculi do not always manifest sufficient symptoms to enable us to be confident of their existence.* It is very certain even that the cases in which the symptoms are sufficient to characterize the disease, are extremely rare; for the special symptoms only show themselves in the cases where the concretions attain a considerable size, and cause a marked difficulty in the secretion or excretion of the biliary fluid; and again: it is extremely rare that we can affirm that the presence of calculi is the real cause of these symptoms. The only cases in which we can prove their existence are where these calculi are voided in the evacuations, or have become so large, that we are able when they occupy the gall bladder to recognize them by the touch, or even by hearing, which very rarely happens.

2nd. *The calculi may simulate another disease.* The cases of this kind are, as regards the general number of biliary concretions, very numerous. However, it is advisable to recollect that it is with chronic affections of the stomach, and especially cancer of this organ, that the symptoms caused by the presence of biliary calculi have been most frequently confounded.

3rd. *Another disease may simulate biliary calculi.* A thickened and degenerated state of the bile, with small fatty concretions, in passing through the biliary ducts, may give rise to symptoms analogous to those of calculi; nervous and colicky pains may also cause the same error.—*Gazette Médicale de Paris*.

PROPHYLACTIC REMEDY AGAINST PTYALISM.

Dr. Schoepf, Professor at the University of Perth, recommends the following tooth-powder, during the