pretended cures so frequently boasted of are cases of *pseudo-tinea*, and not *favus*, properly so called.

As to the rare occurrence of *favus* or *true* porrigo, Mr. Erichsen says, "Willan has seen one boy in a school infect fifty others in the course of a month. It is only when the disease occurs in this way that it is of frequent occurrence, being otherwise, but *rarely met with* in this country."

Having endeavoured to make manifest the general agreement between Dr. Corrigan's, M. Gibert's, and Mr. Erichsen's description of the character and nature of true porrigo, I beg to offer a few remarks upon a most important point with regard to which Dr. Corrigan differs from nearly every writer upon cutaneous diseases—viz., the *contagion* of porrigo.

Dr. Corrigan observes, "Porrigo is stated by writers on skin diseases to be contagious, but I maintain that it is not at all so. It is said to be contagious, but I deny this, for were it so, it would be a disease of much more frequent occurrence than it really is. I can confidently assert that I have never seen porrigo attack two persons in the same family."

Now, I will not trespass by giving quotations from numerous authors to prove that, in their opinion, porrigo is contagious. I will mention the names of a few who believe that it is contagious, and will give one or two extracts in reference to the fact. We may mention Willan, Bateman, A. T. Thomson, Mahon, Gallot, Gibert, Cazenave, Schedel, Bielt, Erichsen; the only name that I can find opposed to the contagion is M. Alibert, who, it would seem, at one time admitted it, at another time doubted it.

In Mr. Sheppard's translation of Gibert's work is the following passage:—"The contagion of tinea is recognized by nearly all pathologists. Once or twice in the wards of Bielt, familiar intercourse and kissing have been seen to propagate the disease in young persons, which then manifested itself in the neighbourhood of the mouth. In a patient even who had worn a wig belonging to an individual tainted with *favus*, the disease showed itself on the arms and legs. This singular circumstance is explained by the fact that ~~this~~ man, in retiring to bed every night, was in the habit of removing his wig, and nearly every morning he found it in contact with his arms and legs."

In Mr. Erichsen's book is this statement:—"Of the ready transmission of *favus* by contact there can be no question; for, notwithstanding the opinion of Alibert, that English physicians had been too hasty in admitting this, it is now most satisfactorily proved by numberless cases, some remarkable examples of which I shall mention in a subsequent part of this work."

But although porrigo is so generally believed to be a contagious disease, it is admitted that the contagion is by no means inevitable, nor even regular in its operation. Some of the same authors, whom I have mentioned, state this as the result of their observation. M. Gibert says, "Nevertheless, for this contagion to take place, there should exist certain conditions of age and temperament, particular vitality of the integuments, special communication, &c. Many facts collected by M. Alibert, and the experience of M. Gallot, cited by the same author, prove transmission of the disease is very far from being certain in all cases in which it appeared natural that the contagion should have been effected." Schedel says, "*Porrigo lupinosa*

is most undoubtedly contagious, but not necessarily so." Cazenave says, speaking of *porrigo lupinosa*, "Porrigo is an essentially contagious disease. In some instances, however, it is impossible to transmit it by contagion."

If we are to reject the existence of contagion because many escape its operation, then we must reject it altogether; for in *what* disease is contagion inevitable? We know that in some diseases admitted by all to be contagious, the contagion is far less active and certain than in others. And this appears, from the united testimony of good authorities, to be the case with true porrigo.

In conclusion, I would ask any candid inquirer, whether there is any thing very remarkable in the fact that Dr. Corrigan has met with, (I use his own words,) "a dozen, or, to be nearer the truth, only six," cases of true porrigo, in none of which the contagion operated? I would also ask, whether it is not unaccountable that a gentleman of Dr. Corrigan's talents and professional reputation should, upon the experience of a "dozen cases, or, to be nearer the truth, only *half* that number," deny, without hesitation, what is positively stated by the whole body of cutaneous pathologists, viz., that true porrigo is a contagious disease?

It may, perhaps, appear to some, that the question, either way, is not very material. The disease is, doubtless, one of rare occurrence; but it is one of most serious importance when it does occur; and we have abundant evidence to prove that it is only when proper means for preventing its spread by contagion are neglected, that many individuals suffer from it. It will surely be wiser for us, as well as for Dr. Corrigan's immediate pupils, when we meet with cases of porrigo, to err upon the *safe* side; and not, upon the authority of six cases, act in opposition to directions that are founded upon far more extended observation.

Worcester, June 10, 1845.

INSPECTION OF AN EYE SIX YEARS AFTER EXTRACTION OF AN OPAQUE LENS.

By JOHN WALKER, Esq., Surgeon to the Manchester Eye Hospital.

A few days since an opportunity presented of inspecting the eye of an elderly female, from whom, six years and a half before, I extracted a cataract from each eye. The account of the examination may perhaps prove interesting to a portion of the readers of the Journal. The great age of the person, (87,) at the time of the operation, the long period, (eight years,) which she had remained dark, the entire absence of any untoward symptom afterwards, and the very successful result, formed altogether so striking a case, that I was induced to publish a statement of it, which I did, shortly after the recovery of the patient, in the *Medical Gazette* of that period. From that time to the day of her death, (13th inst.,) her sight continued unimpaired, so that with the aid of her cataract glasses she was enabled to read the smallest newspaper type.

The right eye was the one removed for the purpose of examination. On a superficial view, nothing unusual was noticed in the external appearance of the

organ, except that the cornea was somewhat more than usually sunken, falling in so as to allow of a considerable concavity, probably from the absence of the crystalline lens. The eye-ball appeared as large and its coats as firm as usual. A slight dark line indicated the sight of the former incision of the cornea in its upper segment, the substance of the cornea having become opaque since death. On making a circular section of the sclerótica, so as to divide the globe into halves, the vitreous body was found to possess its ordinary amount of consistency as well as transparency. Nor did anything unusual present itself in the appearances of the retina. A most remarkable change was however observed, (as may be imagined from the extreme age of the patient, now 93,) in the choroid coat. Almost the entire surface of this membrane (internally) had nearly lost all trace of its pigment, except a small portion around the ciliary processes, being generally of a light grey or ash colour, with dark streaks here and there, apparently the diminished choroidal vessels. On its external or sclerotic surface the colouring matter was more distinct than on its internal surface, although much paler than usual.

The more immediately interesting object, the capsule of the lens, was observed lying in close contact with, and adherent to, the hyaloid membrane and ciliary processes. Looking at it through a portion of the vitreous body, to which it remained adherent, it appeared of considerable size, flocculent, opaque, something like a piece of snow half dissolved in water, having an irregular-shaped central aperture, which had afforded free access for the passage of light, and no portion of which was visible through the pupil during life. The hyaloid membrane and vitreous humour being carefully removed, the capsule appeared to be less dense, its greatest bulk being at its circumference, whilst the centre had either undergone absorption, or its divided portions had receded towards the circumference; it was of a silvery white shining appearance. The capsule having been displaced, the uvea, (also nearly colourless,) was next brought into view, and the pupil observed to be of about the medium size, and of a circular shape. There was no adhesion between the iris and capsule.

The condition of the capsule, after the extraction of the lens, is the subject most likely to excite the interest of the surgeon. Doubtless, in most cases, a large portion of the capsule remains, particularly the circumference, removed as it is from the aqueous humour, whilst the centre alone disappears, in part probably from its elasticity, and to a certain extent by absorption. Generally speaking, the capsule continues firmly adherent to the hyaloid membrane and ciliary body. Sometimes, however, as in blows or other injuries, not only the lens will be broken up and disorganised, but the capsule severed from its connexions with the surrounding structures, as is proved by a case which occurred in my practice, in which, when performing the operation for extraction, both lens and capsule came away, the latter being much thickened and opaque, and exactly resembling the capsule just previously described. In another case, likewise, of capsular cataract, after having broken up the opaque membrane with a needle, it came forward into the anterior chamber, whence it was ultimately removed by absorption.

Manchester, June 21, 1845.

PROVINCIAL

Medical & Surgical Journal.

WEDNESDAY, JULY 2, 1845.

Our attention this week has been drawn to one of the many enactments recently added to the laws of this country. It is entitled A Bill to make certain provisions for proceedings in Bastardy, and its aim is expressly to help forwards the misguided woman in fixing upon the father of the child the burthen of its maintenance. The question is a difficult one, and involves many considerations of serious importance, but we much fear that the main intent of the bill is to relieve parishes from the expense of the child's support, and, like other matters to which we could allude, it is a short-sighted policy, and time will show its inaptness for remedying the mischiefs it is intended to counteract.

It is now several years since Malthus and his followers have arrayed themselves against marriage, and have spared no efforts in their power to induce the government to throw impediments in the way of matrimony. The intention was to relieve the parishes from the maintenance of large families, and stay the increase of a pauper population; the remedy, however, has proved worse than the evil, and, as the natural consequence, bastardy has increased, and will still increase, unless proper measures are taken by the legislature to mark the crime, wherever it may occur, and to fix the penalty for it equally on both the offenders. To allow either party to escape scatheless, is so far to afford encouragement to it. The female character, especially, must be elevated, and it is by the preservation to her of that standard in society which she ought to hold, and of due responsibility to public opinion, that we can alone depend for the cure of this evil.

When Napoleon, in his desire for the improvement of his subjects, devised plans for their reformation, he once consulted Madame De Campan upon the subject, and of her he asked, "How can we improve the education of females in France?" "By making good mothers," was the answer. This anecdote strongly bears upon one which we have ourselves heard as connected with the bill in question. Some time ago, when the law of bastardy was first changed and the female was required to support her child, two laundresses were overheard at their employment discussing the matter, though not aware they had hearers. The one said to the other, "How like you this new law, that allows the father to escape the expense of supporting his bastard?" "Not at all," answered the other woman; "but since it is now the law, and we can't help ourselves, mothers must take better care of their daughters—they must watch them more."