Pellier's speculum, whilst I used the needle recommended by Scarpa. The steps of the operation were exactly those generally laid down for our guidance, therefore I need not trespass too much on your Journal or your reader's time by enumerating them. The eyes have been kept covered with a light piece of linen up to the present time,—eighteen days from the operation,—when he can distinguish any object (even of the size of a shilling,) at seven yards distance. Very little inflammation has resulted from the operation, and the only after-treatment has consisted in partial exclusion of light, the application of cold water, and the administration of three doses of a purgative medicine.

The points which I consider of so great interest in this case are—1st, the transmission of the disease to only the male subjects of three generations, none of these escaping, whilst all the females do; 2nd, the termination of the imperfect vision at a certain period, in cataract; 3rd, the improvement in sight after that was removed, even compared with what it was before its formation; 4th, the fact of the nerve of sight retaining its power, though uncalled for, for so long a time; and lastly the slight inflammation succeeding the above operation.

CASES IN THE HOSPITAL PRACTICE OF T. M. GREENHOW, ESQ., SENIOR SURGEON TO THE NEWCASTLE-ON-TYNE INFIRMARY.

(Reported by Mr. C. J. GIBB, Assistant.)

FRACTURED CRANIUM.

CASE I.

James McPherson, aged 10, a fine healthy-looking boy, of the nervous temperament. Admitted July 20, 1845, at four p. m., having an hour before fallen down some high wooden stairs, and struck his head in the descent against a bannister which was at the bottom. He was picked up insensible, bleeding from the nose; the insensibility disappeared, and was followed by vomiting. Is much inclined to sleep, more apparently from the shock of the accident and subsequent travelling than from any injury to the head, as when he is disturbed his conduct is natural; complains much of pain of the right side of his head, and struggles violently when it is examined; eyes are unaffected; vomiting continues at intervals, and epistaxis has ceased. The right side of the head is greatly swollen, especially over the temporal fossa, which is so puffed up and doughy to the feel, as to make the examination of that part of the skull difficult; after a continued pressure has partially removed the echymosed blood from a little above the zygoma, the skull is found evidently fractured, feeling irregular and depressed.

To have four grains of calomel directly, with six leeches to the temples, and cold lotion to the abraded head.

21st. Much the same. Bowels not free; sleepiness gone. To have an enema, and the leeches and calomel again.

22nd. Pain relieved; slight squinting this morning; bowels free. The effervescing draught and the calomel at bed-time.

24th. Doing very well; less pain, and swelling much reduced; scarcely any constitutional disturbance. Fretted so much that he was taken home.

31st. A little weak and feverish at times only; squinting gone. Has had a few purges, and continued the lotion.

August 12th. Delicate yet, with an occasional headache; swelling of scalp almost entirely gone, and the fracture of the skull can be found extending from under the zygoma, a little in front of the ear, up on to the parietal bone, and is capable of admitting into its grooved concavity the points of three fingers. To be careful and take a purge now and then.

Attended once or twice afterwards and recovered completely.

CASE II.

Wm. Hessionton, aged 14, a healthy sailor boy. Admitted June 24, 1846, at five p.m., an hour before which he had fallen down the hold of a deep ship. Was sensible when picked up; at present is collapsed, vomits occasionally, squints, cannot see, and is much inclined to rest. Bled much immediately after the accident, but more since, from a wound about an inch long, a little internal to the left parietal prominence. There is an extensive fracture of the skull at this part, which appears to pass backwards, but from the great ecchymosis of the scalp, its exact extent cannot be defined; there is, however, a large table of bone so depressed, that the point of the finger within the wound, is able to be introduced between it and the adjoining naturally elevated edge of the bone.

Head to be shaved, and cold applied; five grains of calomel directly, and purging infusion in the morning.

25th. Collapse gone, and reaction proceeding; sensible; head uneasy and pained; slighter strabismus; pupils dilated, and sees indistinctly.

A purging injection, the calomel at night, and the cold as usual.

26th. Easier; bowels purged; no strabismus, and sleeps much. To omit the calomel.

27th. Greatly purged; delirious at times, crying much. Castor oil directly.

28th. Seems much less oppressed and pained; purging ceased; mouth very sore from the calomel. A borax gargle.

29th. Expression of face natural, and free from suffering; less fever, and less swelling of scalp, the wound of which is healed; quite sensible and lively.

July 1st. Doing well; is weak, and has a slight headache, but otherwise is as well as before the accident. The swelling of scalp is almost gone, and the injury to the skull can be plainly made out—a portion of bone, six inches long from before backwards, three inches broad in front, and one behind, has been completely broken off from the rest of the skull, and the anterior extremity, consisting of the back part of the left parietal bone, from the prominence to the central line, is surprisingly depressed, whilst the posterior extremity is close to the attachments of the muscles of the neck, and almost as much elevated above the surrounding bone as the front extremity is depressed.

15th. Has been doing well, and is so strong that he was dismissed cured.

Remarks. The necessity of not interfering with the fractured skulls of children when there are no urgent symptoms of compression of the brain, even although the depression should be both great and

extensive, could scarcely be better enforced than by the preceding cases: if the fractures had occurred in adults the treatment would have been the same, but the results in all probability less favourable. Had the trepan been used, it is impossible to say what might not have happened, but from the great mortality attending it, the prognosis must necessarily have been unfavourable.

The extent of bone injured in the last case was surprising, and no less curious, from the elevation of the one extremity, compensating in some degree for the extreme depression of the other. In the other case, from the great brittleness of the squamous portion of the temporal bone, so extensive a fracture with depression must have been attended with much comminution; and yet so efficient is nature in repairing the injuries of youth, that recovery ensued without a single bad symptom.

PROVINCIAL

Medical & Surgical Journal.

WEDNESDAY, AUGUST 19, 1846.

The Bill for the Registration of the Legally-qualified Practitioners of Medicine was received too late last week for more than a very brief indication of its contents. We are now enabled to give insertion to it entire, and it is due to its originator, Mr. Wakley, to state that the several provisions are both simple and effective, and leave little if anything to be desired for the purposes for which they are intended. The Bill, in its present state, embodies the whole of that part of Sir James Graham's late measures referring to the registration of qualified practitioners which was likely to prove advantageous, while it avoids all those invidious distinctions with which the late Home Secretary had encumbered and weakened his proposed plans. It has the further important recommendation of "practicability," which we much question whether the former scheme, with its supplemental divisions and appendages, possessed. Whether there is time for the bill to pass this Session is yet doubtful, but as a preliminary measure of great importance to the whole profession, on which future measures for the improvement of our medical institutions, and the due regulation of the constitution of the entire body may be based, we trust it will meet with general support. With these few observations we commend the provisions of the Bill to the careful consideration of the members of the Association.

A BILL FOR THE REGISTRATION OF THE LEGALLY-QUALIFIED PRACTITIONERS OF MEDICINE IN GREAT BRITAIN AND IRELAND.

PREPARED AND BROUGHT IN BY MR. WAKLEY AND MR. WARBURTON.

Ordered, by the House of Commons, to be printed, 7th August, 1846.

[NOTE.—The words printed in *Italics* are proposed to be inserted in the Committee.]

1. *Preamble.—Registrars to be appointed.*—Whereas the laws relating to the practice of medicine in Great Britain and Ireland are numerous and complicated, and the public possess no means of distinguishing between legally-qualified physicians, surgeons, and apothecaries, and the pretenders to a knowledge of medicine and surgery, and it is desirable that the names and qualifications of legally-educated practitioners should be duly registered by competent authority, be it enacted, by the Queen's Most Excellent Majesty, by and with the advice and consent of the Lords Spiritual and Temporal, and Commons, in this present Parliament assembled, and by the authority of the same, that it shall be lawful for one of Her Majesty's principal Secretaries of State for the time being, and he is hereby required, within one month from the passing of this Act, to nominate and appoint three fit and proper persons, being at the time of such appointment qualified to be registered under this Act, to be registrars for carrying this Act into execution, one such registrar to be called the "Medical Registrar for England," another the "Medical Registrar for Ireland," and the third the "Medical Registrar for Scotland," and also from time to time to appoint such clerks and other officers as the said Secretary of State shall deem necessary for the assistance of the said registrars in carrying into execution the provisions of this Act; and the said Secretary of State may at his discretion remove any registrar or other person so appointed as aforesaid; and upon any death, resignation, or other vacancy, may appoint other proper persons to be such registrars, clerks, and officers, respectively: provided always, that there shall be paid to the said registrars, clerks, and messengers, out of any moneys to be received by the said registrars by virtue of this Act, such salaries as shall be from time to time fixed and allowed by the Lord High Treasurer or Commissioners of her Majesty's Treasury, who may also allow such reasonable travelling expenses as may have been incurred by any registrar, clerk, or messenger, in the performance of his duties under this Act, and such other reasonable expenses of putting and carrying this Act into execution, as the said Lord High Treasurer or Commissioners of her Majesty's Treasury shall think fit.

2. And be it enacted, that all moneys received by the registrars aforesaid in carrying this Act into execution, shall be paid by them into the Bank of England, at such times and in such a manner as the Secretary of State aforesaid shall direct, to the credit of the Lord High Treasurer or Commissioners of her Majesty's Treasury, and in the name of the "Medical Registration Fund of Great Britain and Ireland."

3. *Register of names and abode of Medical Practitioners to be kept.*—And be it enacted, that the several