

discarded it are equally successful with those who sedulously follow its rigid routine. In obedience to the germ theory and Listerism combined we are directed to open abscesses, only under the protective influence of the spray: yet as I said before, Prof. Bell, the strongest supporter of the practice at the Edinboro' Royal Infirmary discarded it in his case of necrosis of the tibia, on account of the extensive suppuration existing, and yet in what essential points did this differ from an abscess?

Before closing I would like to say a word or two with regard to the administration of chloroform, of which I saw several hundred cases, in none of which was there any evil result. In Edinboro' a handkerchief or napkin was usually doubled or twisted to suit the fancy of the administrator. A drachm or two was placed upon it and renewed as occasion required. One operator folded his napkin in a small rectangular form, poured the chloroform on one side and placing the edge of the cloth on the chin just below the lip, held it at right angles to the face. The mouth and nose thus remained uncovered. His theory was, that the vapor of chloroform, being so much heavier than the air, would not rise, but be drawn in with each inspiration. The patients usually went quietly under the influence of the anæsthetic. There was very little opposition to its administration, and they were kept quite unconscious until the operation was over.

At the London Hospital which has nearly 800 beds, and at which a very large surgical practice is done, it is the almost universal custom to administer chloroform through an inhaler. The amount required is thrown into the instrument—which is then clapped tightly over the face—while the assistants hold the fortunate or unfortunate victim. The result is that in almost every case there is at the commencement a somewhat violent struggle. The patient cries for air, says he is choking, suffocating, etc., but the only effect is that the apparatus is held if anything a little more closely until the patient gradually becomes unconscious and ceases his struggles. In my inexperience in this method of producing anæsthesia, I was constantly afraid that some poor fellow would succumb, ere the surgeon's knife performed its important duty; but I am happy to say no such unfortunate casualty occurred. Still my impression with regard to an inhaler was not at all favorable—and I fancy it will be a long

time ere I add one to my ordinary armamentarium.

As a rule the hospitals in London and Edinboro'—particularly the Royal Infirmary at the latter place—are admirably kept. The wards are scrupulously clean. The ventilation systematically attended to—while each hospital has its full complement of trained and efficient nurses. The ladies there take a lively interest in these noble works of charity, and regularly supply them with hampers of choice flowers, very many of these being presents from the conservatories of the wealthy. These are divided up into bouquets and clusters and placed at regular intervals once or twice a week throughout the wards, cheering the thousands of sufferers by their beauty and fragrance. The physicians and surgeons are among the best of men—large-hearted noble fellows—who take a genuine pride and pleasure in doing all they can to alleviate the sufferings of the unfortunate class of people committed to their care. And filled as the hospitals are by sufferers from the lower walks of life, many of them constantly living from hand to mouth, and barely scraping together the necessaries for existence, it is little wonder that they often look back to the days or weeks spent in the hospital or infirmary as among the happiest of their lives.

REPORT ON ASIATIC CHOLERA IN CALCUTTA, BY PROFESSOR KOCH.

Translated from *Uniao Medica*, Rio de Janeiro, by JOSEPH WORKMAN, M.D., Toronto, Ont.

As a complement to my report of the 16th of December last, on the labours of the Commission on Cholera in Calcutta, I have now the honour of transmitting to your Excellency the following information:—

The Commission has every reason to be gratified with the efficient concurrence and the sympathetic support awarded by the local authorities and the chiefs of hospitals.

We were permitted to examine almost all the bodies of those dying of cholera in the city hospitals allowed to be opened. Up to the present time we have made note of the materials furnished by nine autopsies, and eight patients under cholera.

As these cases occurred at equal intervals, we had sufficient time for the continuation of our investigations with all care. Various cases which