

commendation of the superior and peculiar construction adopted by Mr. Tully. The magnifying power may be varied at pleasure, either by drawing out the tubes containing the eye-pieces, or by substituting an eye-glass of different power or differently combined, and by these changes an uninterrupted range of amplification is obtained from 35 to 800 diameters. The construction of the instrument admits of the utmost variation of magnifying power, without the risk of losing sight of the object viewed. In stating the results of his experience, the author takes occasion to advert to some of the sources or fallacy, by which observers with microscopes have often been greatly misled. When a pencil of rays proceeding from an indefinitely small bright portion of an object are brought to a focus by *the most perfect object glass*, the image thus formed is in reality not a point, but a small circle, and will always appear as such, if the eye-glass of the microscope be sufficiently powerful. These circles have a considerable analogy to the spacious discs of stars viewed through telescopes: like the latter, they become much enlarged by diminishing the aperture of the object-glass, and they are also enlarged by increasing the intensity of the illuminated. The overlapping of contiguous circles of diffusion has given rise to many fallacious appearances; such as the spottiness which some surfaces assume, and which have been mistaken for globules. This optical illusion has been the basis of some ingenious but visionary speculations on the intimate structure of organic matter. The appearance, in certain directions of the light, of lines on the surface of an object when they do not really exist, may be traced to a similar cause.

As I have already stated, no practical results from the use of the microscope are intended to be offered by me, (not having been as Dr. Macdonnell for some years back, in the daily habit of using this instrument in the investigation of diseases of the kidneys, urethra, bladder, &c.) but merely to impart to those who may feel predisposed to place implicit reliance on its use in practical medicine, the full benefit of the valuable investigation of Mr. Lister, F.R.S., and in the assurance, that the errors and fallacies, as well as discrepancies which exist in the results of the use of the microscope in the elucidation of physiology, have not been published to the world by so learned a body as the "Royal Society of London" with a view "to undervalue its revelations, and ridicule its pretensions," but in the full integrity of purpose, that of guarding the experimentalist from those optical illusions, which too often originate ingenious but visionary speculations.

A COUNTRY PRACTITIONER.

December 3, 1846.

[It is not the intention of Dr. MacDonnell to enter into a discussion with the writer of the above *very intelligible* production; for it is by no means an enviable occupation to engage in controversy with an antagonist ignorant, by his own admission, of the subject in dispute; and who, moreover, professes that he "*holds it no inconsiderable step in favour of science to bring ourselves to doubt of the reality of some facts advanced for truth!*" With such an adversary, how could any one, who entertains the usual estimate of the value of facts in establishing truth, hope to meet with success. —R. L. M'D.]

## PRACTICE OF MEDICINE AND PATHOLOGY.

### HISTORY OF A CASE OF REMARKABLE COLOURED SECRETION FROM THE SKIN.

By C. D. PURDON, M. D., Belfast.

Barbara Murphy, et. 40, an inmate of the Infirmary attached to the Belfast Charitable Society, the mother of two children: catamenia regular up to the last six months: attributes the first commencement of her state to a fever with which she was attacked about twenty years ago, immediately after which she experienced a pain in the ball of the great toe of the right foot, terminating in a swelling of the same part. Both ankles became painful and swollen; a short time after this ascites supervened; all these symptoms subsided on her becoming pregnant, during which time she enjoyed perfect health. About three weeks after her confinement she was seized with pain, accompanied with swelling, in the joint of the first finger of the right hand, which gradually attacked each joint of the upper extremities in succession, and spread thence to the lower, commencing above. After some time the wrists, ankles, and smaller joints of the hands, became distorted and nodose, in which state they have since continued. From this time nothing remarkable was to be observed in her state, but she continued to suffer from occasional attacks of rheumatism, and was almost always confined to bed, until three years ago, when, during an attack of rheumatic fever, the heart for the first time became affected, after which anasarca and hydrothorax supervened. These were partly relieved by a severe diarrhoea, but on its subsidence both became greatly aggravated; however, they were not only kept in check but much ameliorated by the different remedies employed. Some months ago they returned with such severity as to threaten a sudden termination of her life; when at the worst a miliary eruption appeared on the trunk, greatest in the epigastric region, from which a clear serous discharge flowed in such quantities as literally to wet the bed; there was also a great moisture on the legs, which had blisters on them, in place of the eruption; this of course was attended with the greatest relief, and the breathing became almost free. The discharge continued for some days, after which it ceased, and symptoms of dyspnoea returned with great severity for fourteen days, when, after having a sense of prickling over the whole body for about twelve hours, the eruption again appeared, attended with the discharge, and causing the same relief. In this state of alternate relapse and recovery she has been for the last two months; the duration of the paroxysms being either eight or fourteen days; but the most curious point in the case is, that the serous discharge has changed very much in its character for the last four or five attacks, being nearly alternately blue and straw-coloured, or yellow, almost like pure bile. When the blue discharge appears, she is aware of its advent by a mouldy smell and a prickly sensation, which precedes it invariably for twelve hours; the yellow is not attended by either of these. The blue always appears along the posterior part of the chest; the yellow generally proceeds from the abdomen and back of the neck, and rarely from the back: the blue never has appeared on the abdomen; the two colours have been procured from the different parts at the same