

CASE III.—A young man received a pistol-shot wound in the right arm, the ball entering about the point of insertion of the deltoid muscle. This patient was under the care of Professor William T. Bull, by whom I was invited to examine him a few days after the accident happened. Exploration of the arm and axilla with the induction balance gave negative results, but when the coils were brought over a point on the top of the shoulder in front of the origin of the deltoid and about the junction of the acromion process with the spine of the scapula, a response was had in the telephone which was distinct and heard by several medical gentlemen present besides Dr. Bull; pressure also over this spot caused pain. The patient told me that as he saw his assailant approach from the front prepared to shoot, he turned his right side to him and threw up his right forearm on a level with his eyes, and thus the bullet, which would otherwise have struck the face or head, was received in the attachment of the deltoid, and the bullet, following its horizontal course, would naturally traverse the entire length of the deltoid while the arm was held in this horizontal position. The shoulder-joint not being involved and the patient's general condition being so good, it was decided not to do an operation for the removal of the bullet, and the patient recovered shortly, still carrying the bullet in his shoulder.

CASE IV.—A man, aged forty-four years, received a bullet in the right ankle at the battle of Chancellorsville. I quote from a copy of the history of the case furnished me through the kindness of Professor T. M. Markoe, whose patient he was, and by whom I was invited to examine him.

"Right ankle is much enlarged and tissues about it thickened and indurated. The lower ends of both tibia and fibula show increased size and involucral action; movements of ankle-joint limited owing to surrounding enlargement; one inch and a half above tip of external malleolus is a sinus which discharges a small amount of pus daily and admits a probe the distance of one inch and a half in the direction of the centre of the limb."

When an ordinary silver probe was passed into this sinus, its walls for a greater part were found to be composed of dead bone, and the bottom of the sinus everywhere communicated to the hand the presence of dead bone or some hard substance, and no man could tell certainly if it were lead or dead bone which he was probing, or if indeed there was any lead at all in the wound, a condition of things such as, I am informed, inspired Nélaton to devise the porcelain probe. The Nélaton probe was next introduced, but no staining of the porcelain could be found, nor was this surprising, since the bullet had lain in its present position in the tissues for twenty-four years, and, as was shown on its removal was thickly covered all over with a coating of lead salts, so that the porcelain could not be stained by the metal.

The telephonic probe was now introduced, and after probing a hard substance for a while, which was bone, without response, the bullet was struck, and a loud distinct "click" was heard in the telephone, announcing, beyond the shadow of a doubt, the precise location of the missile.

As an audience was present which had been invited to see the induction balance used, I now began an exploration of the ankle with the coils, and soon found a sonorous spot in front of the ankle which gave a very clear sound, and was heard by Dr. Markoe, Dr.

Peabody and others. As Dr. Markoe held the telephone to his ear, listening to the unmistakable announcement by the bullet of its presence in this man's leg, he enthusiastically said to the audience: "Gentlemen, I wish every man in this room could hear what I am listening to at this moment." This sonorous spot was, of course, the point on the skin nearest to the bullet. Dr. Markoe now enlarged the sinus with the chisel and hammer, and removed from between the tibia and fibula a thickly incrustated leaden bullet weighing 200 grains, and the patient made a good recovery.

CANUCK.

Selected Articles.

REST IN THE TREATMENT OF DISEASE.

BY H. C. WOOD, M.D., LL.D.

The object of the present lecture is to give you such ideas of the endeavors of the physician in the application of rest to the treatment of disease that you may intelligently co-operate with the doctor in charge of the case. You will remember, I trust, from your early childhood's teaching, that when Adam fell it was announced that by the sweat of man's brow he should earn his daily bread. In these later days we have changed all that, and a great many of the higher portion of man earn their daily bread not by the sweat of the brow but by the toil of the brain. In early childhood, when the little atom of humanity should be out in God's sunlight, he or she is put in school in cramped quarters, leaning over desks and learning lessons, struggling with toil, and weariness to develop the brain and nervous system at the expense of the physical powers, if thereby in the future he may climb over some other little atom, who, like himself, has been sacrificed to the Moloch of culture. As we grow in age this toil ever increases, until at last, when early manhood, or, perhaps, early womanhood, is reached, life is one of perpetual nerve-strain. Many years ago, when old Professor Jackson, himself an example of this ruin which is wrought by overstrain, used to lecture to us at the University of Pennsylvania, he taught us this invaluable lesson, that every human being has a certain amount of nerve-force, which is produced by his system daily, and that if more nerve-force than the daily product be used, there will be a continual drawing on the reserve power, until there comes a time when nervous bankruptcy results. It is precisely the same as when a man with a fixed income lives on through the years, spending each year only a little, it may be, more than his income, but, as this continues, at last the capital begins to feel the drain, and, with an accelerated pace, ruin comes on.

Few of us, I think, clearly understand how much of nerve-force it requires simply to live. Remember that the heart beats seventy to eighty