

was tied at the extremity, coiled up and retained *in situ* also by adhesive plaster after use. Through this tube the pus was withdrawn and the cavity washed out once every day with a lotion containing carboic acid and tincture of iodine* in the proportion of half an ounce of each to the pint of warm water, a combination which had been so successfully employed in the former case. This process was accomplished by means of a Davidson's syringe attached to the extremity of the tube. Under this treatment the formation of pus rapidly diminished, the lung began to expand, and great hopes were entertained of his speedy recovery. The internal treatment consisted of tonics of quinine, iron, and strychnine, together with syrup of the iodide of iron, cod-liver oil, and suitable diet. A few days after the tube was inserted, diarrhoea set in, and continued with more or less severity until his death, which took place on the 13th of August. The diarrhoea was preceded by tenderness in the iliac regions, and was attended more especially towards the close with discharges of pus, no doubt from extensive ulceration of Peyer's glands. There was no hemorrhage. The discharges from the bowels were also very offensive. The condition of the chest after the introduction of the tube was, on the whole, very satisfactory, and but for this untoward complication the patient would in all probability have made a good recovery. One strange feature in the case was the uniform character of the pulse, which varied very slightly during the whole progress of the case—never reaching higher than 120—generally about 112-115. He was also able to take a large amount of nourishment for a person in his condition. Every known means was resorted to, in order to arrest the diarrhoea, but without avail. It seemed from the very outset to be beyond control, and its continuance produced great emaciation. He was reduced to a mere skeleton before his death. He also suffered very much from dysuria, especially at the outset of the diarrhoea, and near the close of his trouble the throat became extensively ulcerated, with loss of voice. The posterior surface of the pharynx, the fauces, and the soft palate were covered with superficial greyish ulcers. Tincture of iodine was applied to the throat every second day, supplemented by a wash of liq. sodæ,

* This lotion is perfectly transparent; the carbolic acid bleaches the tincture of iodine.

chlorinatæ in the interim, with marked benefit. There was no *post mortem* examination.

REMARKS.—The plan of treatment adopted in this case and in the one previously reported, has many advantages over the ordinary drainage tube. The tube is very easily introduced, and fits the opening so tightly, during the first few days, that it can be made entirely to exclude the air from the chest, during a most critical period. This is accomplished by allowing the pus to flow under water, and after a sufficient quantity has been removed, the extremity of the tube is tied firmly, coiled up, and retained *in situ* by strips of adhesive plaster. The whole of the pus need not, and should not be removed at once. If any signs of faintness occur during the withdrawal of the fluid, the tube can be tied and further removal discontinued until the next day, or next again. The tube becomes loose in the chest, and air passes in by the side of it, but not until the lapse of several days, when the greatest danger is passed. To the extremity of the tube a Davidson syringe* can be easily attached, and will be found indispensable in emptying the chest of contained pus, or of pumping in fluid for the purpose of washing out or disinfecting the cavity. In both these cases this apparatus was used for removing the accumulated pus from day to day, and for the subsequent washing out of the chest, with the carbolated iodine lotion.

Correspondence.

THE MEDICAL PROFESSION IN MICHIGAN.

To the Editor of the CANADA LANCET.

SIR,—A few years ago quite a number of medical men of Ontario were opposed to the best medical law the world has ever seen, notwithstanding, perhaps, some little imperfections, which will be remedied in due time. I believe, however, the number of croakers at present is insignificant, yet there are a few still left to harp on the injustice of fees, taxes and the general tyranny of the Council. I wish one or two of this class could be prevailed

* A Davidson's syringe can be made to take the place of an aspirator by connecting an aspirator needle to its extremity by a piece of rubber tubing. If the syringe is filled with water before the needle is introduced and the delivery tube kept under water while the fluid is being drawn off, no air can possibly enter.