

I have no doubt that Dr. Hall possesses a very valuable, rare and interesting patient. I am sorry he did not examine the blood and give us the patient's former history and residence. I hope he will do so yet, at the same time test their periodical appearance in the blood, and give the result in your esteemed journal. I have examined most of the Canadian medical literature of the last fifteen years, and fail to find one case recorded, still I do not see why cases should not occur in Canada, as well as in Norfolk or Lancashire. At the recent meeting held in Chatham, of the Dominion Medical Association, Dr. Bethune, of Wingham, exhibited a parasite three or four inches long, which he obtained from an abscess in the thigh, but whether it belonged to the filarida family or not, was not decided. Dr. Osler, the worthy president, and able pathologist, took possession of it and promised his verdict at a future day.

As to treatment. I will give Dr. Lewis' own words, "This has proved extremely unsatisfactory in almost all cases recorded. Iodide of potash has been tried in large doses, and in some cases appears to have been beneficial. In others the tincture of iron has seemed to be more successful. Perhaps the most satisfactory results, are those which have followed the administration of large doses of gallic acid.

Yours, etc., WILLIAM GRAHAM,  
Brussels, Oct. 6th, 1885.

To the Editor of the CANADA LANCET.

SIR,—I have read carefully, and with a good deal of interest, an article in the Sept. No. of the LANCET, headed "Meddlesome Midwifery." With the general tenor of the article I heartily agree; though some of the statements do not entirely accord with conclusions drawn from my practice.

The first is the following clause: "But we would all prefer that somebody else's wife or sister should be the subject of all doubtful practices." This, I think, would hardly be in keeping with the rule given in Matthew vii. 12, which, I presume, most medical men will admit to be binding. We certainly should not encourage doubtful practices even on somebody else's wife or sister. But what particularly interested me was your pen pictures of scientific and unscientific practitioners of meddlesome midwifery. I take it that this applies to registered practitioners, who, if they lack the

necessary qualifications to practice, are as much sinned against as sinners, by the Medical Council, which has taken upon itself the task of protecting the community from improperly educated pretenders. If such still exist it is a proof that our Council has, at least in some measure, failed in its mission, in giving a license to them.

While I look upon your scientific bungler as a dangerous character so full of himself and his own importance, that he is unlikely to improve, I feel that I can safely predict, at least, a respectable future for the other, "Conscious of his lack of skill but desirous of earning his fee." This consciousness, and this desire which all should possess, will, if properly used, be the making of him. The former will make him careful and at the same time prompt him to read and so post himself where most deficient; he will also watch his cases closely and as his years increase so will his knowledge. His desire to earn his fee is an indication of honesty, which of itself would make him more to be relied upon, and is very different from a desire which we too often see, of finding an excuse for making visits that are of no real use to the patient simply from a desire to charge fees. As to his too frequent examinations I think he will soon get over that, as but few women will be found to submit to it when it gives them pain. It may, as you suggest, produce a tendency to laceration, though I have never seen one clearly traceable to that cause, but I have often found the soft parts dry and tender, where no examinations had been made and yet the labor terminated without any appreciable laceration.

As to your scientific bungler, did he confine himself, in his use of chloroform, to a small quantity, sufficient to mitigate the pains as the head is distending the perineum, I presume no damage would be done, in most cases, and if it did delay the labor a little without materially adding to the patient's sufferings so much the better, as it would give the parts more time to stretch and so render laceration less likely. But what I have known such bunglers do is, under the pretext of giving chloroform to relieve pain, to put the patient profoundly under its influence, and then without the knowledge of either the patient or friends, put on the forceps and drag the child forth, producing laceration of the perineum, followed in many instances by puerperal fever or septicæmia.