

incubation lasts two days or more. It may last a fortnight. Fresh wounds do not require so long to be affected. In these cases the supposition is, that the patient was already influenced by the epidemic. Visible symptoms of diphtheria are often noticed after the constitutional ones.—*Sanitarian.*

BOXING THE EARS.

The *Liverpool Post* records an investigation, made by the borough coroner, as to the death of a scholar, aged 13, at Christ Church School, on Christian street. The boy, having been disobedient, and refusing to hold out his hand to be caned, was boxed on the ears by the school-master. This occurred three or four months ago. A few weeks since, the lad, who had previously suffered from deafness, complained of a pain in his ears; and the medical evidence showed that death resulted from long-standing auricular disease. The doctor added that, whilst a blow might have irritated an already sensitive part, it would not have accelerated the boy's decease. The history is by no means clear, nor is the doctor's statement, as here recorded. The jury in giving their verdict of "Death from natural causes" added that, in their opinion, the punishment was administered injudiciously. With this opinion we quite agree. Injuries to the head are always alarming, but when the injury is located so as to affect one of the special senses situated there, it is still more so. Injuries to the eye and ear are particularly to be avoided. These being organs of the utmost importance, consisting of the most fragile tissues, and partly exposed, we would impress upon all the danger of inflicting the slightest corporal chastisement in those regions. A comparatively slight blow on the auricular region, if it happens to compress exactly the column of air in the meatus, may cause a rupture of the drum-head. That this is of not unfrequent occurrence is

well known to aurists. We are, however, of opinion that, considering the pressure which the healthy drumhead has been found to resist without rupturing, the membrane which gives way without a blow, has probably not been in a healthy condition at the time of the injury. The suddenness of the blow is also, we believe, an important element. The history given of most of the cases is that the blow was unexpected, and this agrees with the history of ruptures arising from explosions. Artillerymen, for example, who are subjected to explosions of the loudest kind avert any injury to the drum, if they expect the explosion, and prepare for it. Prize fighters suffer from ear affections occasioned during fighting, but rupture of the drum is not so common as inflammation of the auricle and meatus, and tumors of the auricle. In such the blows are, without doubt, much harder, but either from their watching for, and undoubtedly preparing for the receipt of the blow, or from the form of the hand, which at the time that it inflicts such blows, allowing the compressed air to escape better, injuries to the auricle occur more frequently than to the drumhead. Besides injuries to the auricle, meatus, and membrane, injuries to the vestibule and *fenestra ovalis* (parts of the inner ear beyond the drumhead) may occur from blows on the ear setting up pathological conditions which may be quite irremediable. Cases are recorded in which death occurred, but they are rare. We would impress upon all those whose duties may compel them to inflict corporal punishment the necessity of limiting their application to the regions which have ever in England been considered the seats of punishment, and avoiding those in which the pain suffered at the time is not more severe, while the injury inflicted may be far beyond what was contemplated by the giver of the punishment.—*British Medical Journal.*