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TO THE EDITORS OF THE MONTREAL MEDICAL GAZETTE.

GENTLEMEN,—In my last communication, (that “ponderous production,” as Dr. Nelson names it, very justly, for I doubt not it weighed heavily on his pathology quotations and inferences,) I stated, that the question at issue between Dr. N. and myself was of very small dimensions, being confined chiefly to the determination of what constituted the post mortem evidences of peritonitis. It is satisfactory to find I have laid down the law so correctly, that Dr. N. no longer denies that effusions and adhesions are to be met with even before the disease “has passed through some of its phases.” In his former paper, Dr. N. boldly asserted that such events were not to be looked for except towards the close. His words are—“Those are the products of slow or sub-acute inflammatory action, and when present, prove that it had been protracted.” Now, however, it is allowed they might have occurred, and *if they were not found after death*, they had been carried away by the copious perspirations of approaching dissolution!!!; in corroboration of which notable discovery, we are treated with the case of a baker baked to death in his own oven, and that of a quack who sweats all his patients.

The Doctor, it would appear, has now entirely given up peritonitis, as the cause of the death, for he says, “Now it so happens that the inflammation in C.’s case was of so short duration, as not to shew the usual consequences”; again, “that twenty-four hours after treatment commenced, all the acute symptoms ceased”; and again, leeches were not applied, because “the disease yielded to the general treatment.”