to accord with well established pathological laws, we shall be prepared to discuss how fatal blood-letting may interfere with the cure of pneumonia, in which the plastic exudation is undergoing transformation into pus. But as we believe that the material which causes solidification of the lung, [as evidenced by increased dullness, bronchial respiration, bronchial voice, and absence of vesicular murmur, &c.,] may be, and daily is, removed by treatment, we are convinced that the means ordinarily used for that purpose, act with more certainty and success when the abstraction of blood can be performed, and that whilst it renders absorption of exuded matter more active, it checks the congestion existing in other parts of the lung, which would, in its turn, be quickly followed by hepatization and more serious disorganization of the These are our reasons for differing from Dr. Bennett, and we lung. make no apology for trespassing at such length on our readers' attention, as the matter has occupied much of our clinical study, and is withal, one of great importance to the practitioner. We may ask, in conclusion, is it not more likely that the large mortality from pneumonia in Hospital practice, alluded to by Dr. Bennett, arises from the indiscriminate use of the lancet in cases quite unsuited to any form of depletion, than from its being employed in the second stage of the disease ? And is he right in stating that Hospital patients generally come under treatment when the disease is in the second stage? We have records of numerous cases where the disease had not passed beyond the first stage, occurring in Hospital patients, both in Europe and in this country. We must, therefore, question the truth of his statements, which, from beginning to end, we believe to be incorrect.-R. L. M'D.

ST. PATRICK'S HOSPITAL.

From the Quarterly Report, ending 30th April, it appears that the number of intern patients amounted to 211, and that of the externs to 306, making a total of 517 who received advice and medicine at the Institution during the last three months. We regret that our limits do not permit us to insert the diseases of the externs, many of which were of a very interesting and instructive character.

SURGICAL	CASES
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Erysipelas Simple 3 Phlegmonous 4	Sloughing of Interments of Mark
Simple 3	Sloughing of Integuments of Neck.
Phlegmonous 4 (Paronychia
Edematous 2	Runture of Tendo Achilles
Abscesses	Morbus Corse
Carles of Bones of Feet 1	Nævus
Caries of Bones of Hand 1	Abscess of Parotid Gland
Scrofulous Ulcers 1	Anthray
Caries of Tibia 1	Cystitis, Chronic