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## Original Communications.

### OLD TREATMENTS REVIVED.

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(Read before the McGill Medical Society.)\*

Mr. President and Gentlemen,—It is, I believe, the fashion for the student and practitioner of the present day to suppose that all the treatment we have in use to-day is modern, dates with the century, and that our grandfathers and great-grandfathers knew little or nothing, their treatment was ridiculous, and their diagnosis and prognosis uncertain. As for diagnosis, without a uterine speculum (really an ancient instrument), no sound, no thermometer but the naked hand, no rhinoscope, no laryngoscope, no stethoscope, in fact with nothing whatever in the shape of a 'scope or an 'ometer, how could they make head or tail of disease when they came across it? There was one faculty cultivated in those days which to-day is very much neglected, that of the observation of the sick. The temperament, the physiognomy, the decubitus are left now entirely out of the clinical record, while the paper is filled with notes of temperature, of amount of urea, &c. This difference between now and then struck me forcibly when comparing a number of clinical reports in my possession, made by some of the senior members of this faculty at a time when they were students. Take as an example the physiognomy in pneumonia: Do we

take as great care now to note the malar prominences, the herpes, and the other outward and visible signs of this disease which in some cases is so easy, in others so hard of diagnosis?

One cannot help wondering while reading the aphorisms of Hippocrates how such a collection of truths, truths verified by the experience of centuries, could be arrived at, at a time when the observers had none of our modern instruments to guide them; not even a knowledge of anatomy, or an inkling of the key-stone of physiology—the circulation of the blood. We are too fond of thinking that nothing was known of the diseases of the lungs until the invention of auscultation; yet a careful study of these aphorisms will enable a practitioner to make a good prognosis. I wish to deal, however, this evening with various plans of treatment, some of which I was myself mistaken in supposing them to be of recent origin.

Apart from general considerations, is there not much so-called modern practice of very ancient origin, and are there not in many new practices, old ones dressed up in modern garb? Let us begin with the plan of puncturing the testicle in acute orchitis. Many are under the impression, that the procedure which is, by-the-by, one of very doubtful utility and not free from danger, was originally brought before the notice of the profession by Mr. Henry Smith, of St. Bartholomew's Hospital, but the revival of this plan is the work of M. Vidal de Cassis, Surgeon to the Venereal Hospital in Paris. In the American translation of his treatises "On Venereal Diseases," (1854) he strongly urges puncture of the testicle in cases where the pain is very intense. "I puncture the tunica albuginea with a lancet or sharp-pointed bistoury,

\*The McGill Medical Society is composed of students. Meetings are held fortnightly during the winter, and weekly during the summer session, for the reading of papers and the exhibition of pathological specimens.