

**THE CANADIAN MEDICAL TIMES.**  
A WEEKLY JOURNAL OF  
MEDICAL SCIENCE, NEWS, AND POLITICS  
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**TO CORRESPONDENTS.**

Communications and reports solicited. Correspondents must accompany letters, if intended to be printed anonymously, with their proper signature, as a guarantee of good faith.

**TERMS OF PUBLICATION.**

THE MEDICAL TIMES is supplied six months for ONE DOLLAR. Address orders and remittances to JAMES NEHER, M.D., Kingston.

POSTAGE ON THE MEDICAL TIMES.—The rate of postage on the Medical Times is Five Cents per quarter.

The new Medical Amendment bill, introduced in the Imperial Parliament by Mr. Headlam, has been withdrawn by its promoter. The bill attempted to effect a one-portal plan for the three kingdoms, fusing the existing licensing bodies into conjoint boards for England, Scotland, and Ireland. It also added six members to the representation in the General Medical Council. The measure proved unpopular and encountered much opposition from the profession, and also from the licensing bodies. It has been withdrawn in the view that as there will soon be some experience of conjoint boards, the instruction thus gained can be turned to account in the next session of Parliament.

The practice is steadily extending in the large English towns of setting apart a particular Sunday in the year for the preaching of charity sermons in the churches and the collection of donations for the benefit of the local hospitals and infirmaries. The "Hospital Sunday" movement has served to enlist clergymen of all denominations, and it has been the means of evoking handsome exhibitions of English charity.

London had its first Hospital Sunday a few weeks back, when the collections made in the metropolitan churches produced an aggregate of £27,000. This is a large sum of money, and its distribution will help the needy hospitals very much. But the metropolitan district is an immense and wealthy area. The city of Carlisle raised £400 in the same manner. Birmingham is one of the towns which does handsomely on its Hospital Sunday. Whether the metropolis has fully come up to the proper or relative standard is difficult to say, but it is stated that a larger contribution may be expected next year, with an improved organization for carrying the scheme into effect.

The fund is to be distributed on a basis of merits and requirements. The Distribution Committee will have before them the reports and balance sheets of all the institutions which claim to participate, and by these data they will be guided in fixing each institution's share. It is thought that in this way the committee will exert a wholesome influence in promoting economy and good management in hospitals; and under this system a species of control will be exerted over many hospitals that have hitherto been entirely independent of any such investigation.

The extension of the plan to the metropolis, and its success in the great centre will do much in

investigating the spread of the movement to towns that have not yet adopted the plan. The example of London, so to speak, nationalizes this mode of aiding medical charity; and it may even be expected to extend to the colonies, in consequence of the impetus which the example of London may impart.

A statement is occasionally heard that the medical profession is answerable to society for very many of the cases of feeble, sickly, ill-conditioned, ill-formed, and badly developed bipeds, which now make up items in the general population. And it may be confessed that the statement is literally true! But, instead of the fact being a reflection upon the profession, it is one of its chief glories. It is a proof of its great usefulness, and of the efficacy of its mission. Formerly, when medical science was less well understood than now, sickly, "ill-begotten" children inevitably died in infancy. Now, the physician, by his greater enlightenment in medical science, is enabled to, and does, preserve those lives, which, some say, should have been forfeited in the interests of mankind, in their incipency. To illustrate the conquests of medical science:—In London, in 1730 to 1750, the percentage of deaths under five was 74.5. From 1770 to 1790 they were 51.5 per cent., and from 1850 to 1870, 29.5 per cent., according to Dr. Farr.

*Brief Report of Cases of Sympathetic Ophthalmia and Sympathetic Irritation.* By A. M. ROSEBROUGH, M.D., Toronto.

This is a small pamphlet report, giving details of some eleven cases of sympathetic ophthalmia and irritation, intended to show the benefit of what is now an accepted maxim of procedure by ophthalmologists—the enucleation of the injured eye with a view to save the sound one. The author gives concise and very clear directions for the performance of this operation. The subject-matter of this pamphlet has been reprinted from the *Canada Lancet* for June.

**THE CHOLERA IN EUROPE.**

Cholera has undergone but little extension, so far as news of its movements have reached this country, since our last notice of the progress of the disease a fortnight ago. The malady has appeared in the town of Dantzic, and it has shown itself in the north-west of Italy; but elsewhere with the exception of a few cases in Vienna, it does not seem to have travelled much.

In Dantzic two cases were reported on the 26th of June. In Italy the disease first showed itself, in the province of Treviso, on the 31st of May; and from that date to the 21st of June 24 cases were reported, of which about half the number died. Twenty of the cases occurred in the communes of Molta de Lavenga and Casalta; the remaining four were reported one in each of the communes of Molina, Carbonara, Melina, and Casale del Sale. Within the same period two cases occurred in the province of Venice: one at Portogruaro, and one at Teio. A telegram from Venice, dated the 9th inst., states that cases have occurred in that city. The Government of Italy has adopted the most energetic measures for the arrest of the malady.

Cholera, doubtless, extended into the province of Treviso from Hungary; and we shall probably learn at some future time that there has latterly been an extension of the malady into Carinthia

and Carniola. For several weeks returns of the progress of cholera in Hungary have been suppressed, and there has not been any very definite information as to the state of the disease there since the beginning of May. At that time the following districts are known to have been infected, cholera being more or less actively prevalent in them:—Pesth-Ofen, Kaschau, Eperies, Abanja, Berega, Gonor, Honth, Neograd, Saros, Torua, Zemplin, and Zips. These districts are situated in north-eastern and central Hungary. Three weeks ago the number of cases of cholera occurring in Pesth is believed to have averaged five or six daily.

In Vienna eight fatal cases had been reported to the authorities up to the 1st July; and these deaths, with two exceptions, had occurred among strangers living in hotels. Our private information states that five or six cases, all fatal, had occurred in hotels, and about double that number of cases in the city. The latter cases took place during the second week of June. There would seem to be some question as to the nature of some of the cases; and of those admitted it is said that several of the sufferers had only been a few hours in Vienna, coming there from places—as Dantzic—where cholera was known to be present.

On the Lower Danube cholera does not seem to be spreading to any marked extent, according to the latest news. Indeed, to the present moment the disease has not shown signs of wide migration anywhere in Europe, and we are still hopeful that we are watching the fag-end of the diffusion which began in 1869. But as that diffusion, according to Russian physicians, was developed out of the fag-end of the epidemic of 1866-67, there is not the less need of being watchful and prepared.—*Lancet*, July 12.

**SURGERY.****EXTENSIVE INJURY TO THE BRAIN WITH LONG RETENTION OF INTELLECTUAL POWERS.**

**CASE OF GUNSHOT FRACTURE OF FRONTAL, PARIETAL, AND SPHENOID BONES, No. 276, in Army Museum, Washington, D.C.**

Reported by J. D. HALL, M.D., late Surgeon, 24th Reg't, N.Y.V.

EMORY HOSPITAL, Washington, D.C.—On the 30th Aug., 1862, Edward Volck, private in the 55th Ohio, was wounded at the battle of Bull Run, No. 2, by a musket ball, which struck him half an inch above the right eye-brow, and about the same distance from the median line, comminuting and carrying away the os frontis to the extent of 2½ inches by 1½ inches, and making a proportionably larger scalp wound. The course of the ball must have been oblique from the left, else the head of the subject of these remarks was turned to the right when he was struck. About one-third of the ball was found battered up on the edges of the frontal bone; the other two-thirds must have passed outwards, as it could not be found inside the skull on post-mortem examination. His own statement of the case was as follows: He was about to fire his piece when he was struck; he staggered, but did not fall. In a minute or so he recovered, fired, loaded, and fired again, then fell, where he lay on the field for six days, and lost more than a teacup full of brain. On the eighth day after receiving the wound he was received at Emory Hospital, which was on the 7th of September, when he had his wound dressed for the first time. I took out many pieces