

doubt; a young clergyman preaches his first sermon, and though of course he may be very nervous, he can't do much harm, and he may do some good. At all events he will excite sympathy. He did his best, he meant well, and such like. But there will be no sympathy for you if you poke out a man's eye even after the most approved fashion, and with the best possible intentions. Even the best educated and most skilful of young practitioners must feel the tremendous responsibility of (say) his first case of typhoid fever, in an influential household; or (say) his first case of strangulated hernia at the hospital to which, after much rivalry and contention, he has just been elected; or (say) his first unnatural presentation in midwifery, among the croaking gossips who swarm round their sisters in the agonies of abnormal parturition. There is always some one to think and say you have done wrong in a fatal case; and even those who think you have done right may be reluctant to say so. And more than this; our doubts and difficulties extend in some measure over our whole subsequent career.—*D. Edgar Sheppard.*

#### ON THE SCIENTIFIC USES OF THE IMAGINATION IN MEDICAL PRACTICE.

Mr. Brudenell Carter, in the course of an introductory address to the students of St. George's Hospital, observed that the scientific uses of the imagination were due to the fact that the boundaries of exact knowledge, on every subject, whether human knowledge in the aggregate or that of any individual, were separated from the darkness of the unknown by an intermediate region, into which some light had penetrated. This region was the province of the imagination, or, if the phrase were preferred, of disciplined and rational conjecture. Our minds, in relation to it, might be likened to the explorers of a strange country, who were fully acquainted only with those regions that they traversed, but who had also gained such notions, of the belt separating them from the horizon, as enabled them to determine in what directions they would endeavour to make further progress. As soon as we became possessed of certain facts we called upon the imagination to account for their occurrence, and it furnished us with some suggestion upon the subject. This suggestion was a hypothesis, which might or might not be verified by further inquiry. Its proper use was to determine the direction in which we should pursue that inquiry; and we should be prepared either to adopt or to abandon the hypothesis, according to the results that the inquiry might produce. He had heard of two students, who examined the same patient in order to compete for a clinical prize. The first, who possessed great powers of observation, had his imaginative faculty for the moment dormant. He was struck by a very remarkable discoloration upon some portion of the patient's body; and, accepting the presence of this discoloration as an ultimate fact, he carefully described it in his account of the case. He made a drawing of its very irregular outline, and took careful measurements of its principal dimensions. The second student, when he came to the bedside, also saw the discoloration, but he was more imagina-

tive than his predecessor, and his imagination led him to frame the hypothesis that the phenomenon was due to the presence of dirt! He tested the accuracy of this hypothesis by means of a sponge and warm water, and established it by washing the stain away. The incident, although trivial, was not the less instructive, and might well serve to teach the attitude of mind in which we should approach the investigation of disease.

#### PRACTICAL MEDICINE.

##### CASE OF CHRONIC CYSTITIS.

CHRONIC CYSTITIS OF FIFTEEN YEARS' STANDING  
—ACCIDENTAL RECOVERY.

My patient is a farmer 30 years of age. Two years ago on passing his house I was called in to have a talk about his case as he himself said for my own information. His history as gathered from himself is somewhat as follows:—Was run over by a waggon when about 15 years of age; passed bloody urine at the time which was arrested, but some after and ever since has had all the symptoms of chronic cystitis; has been married seven years, and has consulted several surgeons, but without any beneficial result. I examined the urine and found an enormous quantity of tenacious mucus tinged with blood. I suggested stone, and asked him to be sounded, but he refused on the ground that he was afraid of a sound as he had to use the catheter himself occasionally and he dreaded it. Besides, he said if there was a stone he would surely have touched it accidentally at some time when using the catheter. I, of course, yielded to his wish, and promised to give him a mixture. The staple of this mixture was copalba, and so satisfied was he with its effects in reducing the quantity of mucus and the frequency of micturition, that he expressed it as his belief that if I tried my best and stuck to the case I could cure him. This improvement of his symptoms, coupled by a still farther improvement after another bottle of the mixture, led me to change my diagnosis to simple chronic catarrh, the result of some cause not then directly operating. My patient continued to improve for several months; the complaint was alleviated, not eradicated. The medicine was therefore suspended for some time, and was again tried, but without the same effect as at first. Naturally discouraged, the patient desisted from taking any medicine, and I heard nothing definite from him for some time. Suddenly, when the spring of the present year commenced to open, I was called in the middle of the night to see him and told that he was dying. I found him in the extreme of pain, having passed about a quart of blood, and praying for relief or death. I immediately used the catheter, with instant relief to the intense vesical tenesmus, but in 10 or 15 minutes the severe straining again commenced. The catheter was again used, with the same beneficial result. I then gave him 50 drops of Tr. Opii, but not with immediate benefit, for the catheter was used three times after, but at progressively longer intervals. In the morning I left him in comparative ease, and a mixture containing Tr. Opii and Tr. Ferri. perchlorid. This mixture, with a little variety,

such as the addition of ergot, &c., I continued for two weeks. The hæmaturia ceased in a week, with the exception of hæmorrhage to the extent of two or three ounces, three days after my first visit. That day I was sent for to use the catheter, but the clots at the neck of the bladder had been forced away, the pain had subsided, and catheterism was unnecessary. For five months there has not been the first symptom of chronic cystitis. He says he "is as sound a man as there is on the line," that he is a wonder to his former medical attendants, his neighbours, and, I add, to myself. The cause of the attack of hæmorrhage, according to the man himself, was fishing for suckers in the cold freshet water. Now, was this man's case one of vesical congestion, the result of a mechanical bruise, and this congestion pushed to hæmorrhage by another intense exciting cause, and was this congestion permanently relieved by the enormous local hæmorrhage, as I have seen a case of asthma (bronchial) so relieved? If not, what was the cause of the cystitis, and what was the *modus operandi* of the cure?

D. HEGGIE, M.D.

Brampton, 11th Oct., 1873.

#### THE YELLOW FEVER AT SHREVEPORT.

All of our readers have of course heard of the frightful epidemic of yellow fever which depopulated the little city of Shreveport, driving away one-half of its population and killing ten per cent of the remainder. Like most other similar visitations, this one is the result of a total neglect of all sanitary rules. Shreveport is the second city of Louisiana,—the great trade centre of the Red River country, so famous for its cotton and sugar,—and is estimated to have a population of from 10,000 to 13,000. It is on the Red River, at the head of steamboat-navigation, and fifteen miles below the great Red River raft, which is one of the most remarkable formations in the world, being a mass of logs and drift-wood over forty miles long, and entirely choking up the great stream, which is over twelve hundred miles long, or, including the South Fork, twenty-one hundred. This raft turns the water of the river over the adjacent country, forming great bayous, through which, at high water, steamboats pass around the raft; and it is now being blasted away by the general government.

The city is on a bluff at the river-bank, and is well situated for drainage. The whole country around is flat, and for miles and miles there is one continuous succession of marshes, swamps, and bayous. Though at low water a great surface is exposed to the action of the sun, making the surrounding country subject to malarial influences in the hot season, still the health of the city has generally been good; but this is the third time it has been visited somewhat severely by the yellow fever, the first time having been in 1853, and the second in 1867. It seems that, owing to the contending factions which have reduced the government of Louisiana to chaos, and which would have brought about a Mexican-like civil war had it not been for the strong arm of the Federal Government, Shreveport has been for some months without a regular municipal government. Those having control of the city have been utterly negligent of their duty, and have left the streets in an indescribably filthy condition. Under the hot semi-tropical sun, the reeking heaps of garbage, the swollen, bursting carcasses of all sorts of animals, the stagnant pools full of uncleanness, have become the resting place of the poison. Filth and exposure begot recklessness, and recently a most extraordinary attraction was added to the already too pressing invitation to epidemic disease. It is said (Vicksburg Herald) that a boat, having on board a hundred or more Texas cattle, recently sank in the Red River, very near to Shreveport, and the dead animals were fished from the wreck and taken ashore. After having been skinned for their hides, the bloated bodies were permitted to remain exposed to the rays of a burning sun, until they poisoned the air with their sickening effluvia. Under these circumstances, it is a wonder that another tale of sorrow and desolation, another frightful warning, has been added to the long list, which should teach the world, if it would only learn, the importance of sanitary science.—[Philadelphia Medical Times.