

until the blood comes, through which they will fasten eagerly.

When possible apply leeches to the temple rather than on the face, especially in women, as the scars, although slight, remain permanently.

Never put them on the front of the neck, or on the bowels of children, unless particularly directed. Nor upon the palms of the hands, nor soles of the feet; and choose rather the outer than the inner side of the arm, or on the thigh than in the groin, as they are less painful in these situations.

Always place them over a bone when possible, that pressure may be employed if necessary, to stop the bleeding.

Leeches only suck good blood from a black eye, and increase its blackness instead of removing it.

Do not apply leeches to a person whose blood is not easily stanchcd, unless you know that the physician is cognizant of the peculiarity.

When a few only are to be put on, wipe them gently with a clean dry towel, and holding them with it, and not with the warm hand, allow their heads only to touch the skin until they have bitten, when they should be placed in as easy a posture as possible with the napkin under them, and be left undisturbed that they may completely fill themselves. Should any become weary by resisting your efforts, and refuse to bite, dip them for an instant into fresh beer or porter, or weak wine and water. When many are to be applied at once, cover a tumbler or bowl with the centre of a clean towel, and having pushed it into the bowl, put the leeches in and invert the whole over the place to be leechcd, and whilst pressing the rim of the bowl down well, to prevent their escape, draw out the towel gradually on all sides, until the leeches are pulled down into contact with the skin. The napkin and bowl may be removed after they have fixed.

Some leeches fill much more slowly than others, these can be made to suck faster by rubbing their backs with the finger wet with wine.

Leeches generally become gorged in fifteen or twenty minutes, and drop off of themselves; they will however let go at any time, if their heads be touched with vinegar or salt.

When a few remain sucking, after all the rest are off, they should be thus removed, rather than keep the patient's body exposed waiting for them.

Never pull away a leech by force, as the separated teeth often cause great inflammation and even ulceration.

After the leeches are off, the bites stop bleeding generally in a few minutes when left exposed to the air or bathed with cold water, but the flow is usually prolonged for an hour or two (unless the attending physician has directed otherwise) by covering the part with a warm dry towel, and renewing it as it becomes saturated with blood, or by bathing or fomenting it with warm water, or applying a warm linseed poultice, under which latter the blood runs very fast. If from an arm or leg, it might be immersed in hot water when a longer continued bleeding is desired.

When the flow of blood does not stop readily with cold applications, wipe the bites, and cover them quickly with small pieces of cotton wool, then press firmly on each for a minute or two, when the pressure should be removed carefully, leaving the wool on for a few hours afterwards, and confining it with a strip of plaster if necessary. If previously dipped in collodion, the wool would be doubly certain to arrest the bleeding. Dried alum, wheat flour, clean cobweb, or powdered matco leaves, are all good

applications to leech bites; the last I find very effectual without pressure. When on soft parts, another way is to wipe the blood off quickly, and pinch up a small portion of skin around the bite, but not to cause pain, and hold it together for several minutes, letting it go very carefully. This when persevered in for many times, seldom fails. In extreme cases a pair of bull dog forceps or serrefine, may be put on for a short time, or a cambric vesicle be passed under each wound leaving it in the skin, with a thread wound around the bite under the two ends of the needle, just tightly enough to stop the blood; this never fails and is much less severe than caustic or canthary. The needles should be withdrawn carefully in twenty-four hours afterwards.

Leeches should never be applied at night to children or weak persons, without watching attentively that they do not start to bleeding again when the patient falls asleep, or becomes warm and comfortable.

Should a leech be accidentally swallowed, give a cupful of salt water at once, repeating it every fifteen minutes until vomiting is produced, when it will be ejected dead, or if not thrown up, will be killed by it; salt water injections will likewise speedily kill, and dislodge leeches from all other cavities of the body.

To preserve leeches and render them soonest serviceable after using, they should be disgorged; which operation is best performed by sprinkling a little fine salt on them, then pressing them gently and washing them the moment they get emptied, otherwise the salt is liable to kill them. When carefully done, a leech will bite at once if reapplied and often will take hold a third time.

Hungry leeches kill those that have sucked, they should therefore be kept separate.

Leeches escaping from the vessel containing them soon die from want of water, and by having the breathing orifices in their bellies choked with dust.

Dr. Morton the American discoverer of the anæsthetic effects of ether inhalations has recently petitioned Congress at Washington, for compensation for the use of this agent in the army! His patent expiring, he not long since endeavoured to procure its renewal by the same body, which very properly refused his request. It is indeed pitiable to see a medical man of ability so lost to all sense of his duty to his country and his profession, as to thus prostitute himself for the love of money. And if his taking out a patent at all, has not already done so, his present conduct cannot fail to win for him the utter contempt it so richly merits, from his brethren and the world at large.

To the Editor of the *Canada Lancet*.

Montreal, March 2nd, 1867.

SIR,—I am a young practitioner; and being at a loss, a few weeks since, as to the propriety of making an opening near the knee, into a large cold abscess in incipient hip joint disease, I took with me a physician of experience, who not only overruled what I said, but plunged a knife into the hip, a few inches from the joint; told the mother to keep poultices to it, and then left the house. Was this medical etiquette? If it was, I can assure you, I found it very hard to bear. I did what I could to obviate the mischief by applying the lut dipped in collodion, that I had intended for the puncture of a trocar; but could not prevent great constitutional disturbance, which came very near carrying off my patient.

Is there no redress for such conduct? Yours truly,
ERRICKS.

Our Correspondent has given us the name of the party; and should there be no extenuating circumstances, it would indeed be a matter of surprise to us, as we have hitherto found him extremely polite and gentlemanly in consultation; and we feel sure if asked to in a proper spirit, will apologise for his remaining want of etiquette.—EDITOR.