

answer to the argument already referred to, of proving the possibility of recovery from dangerous wounds, by a reference to similar instances." Two persons may receive a wound in the stomach or on the head, which will occasion the same consequences, *cæteris paribus*, and exhibit a precisely similar train of symptoms, still, the one may recover, while the other will die. Hence it appears that the mortality of wounds can only be founded on anatomical and physiological data, and not on analogy.

Dr. Beck divides wounds into *mortal*, *dangerous*, and *slight*. Among the first, must be ranked those which are beyond the controul of surgical means, such as extensive injuries of the brain, the spinal-marrow; a division of the eighth pair of nerves; a blow at the pit of the stomach; and an infinite variety of others which are inevitably fatal even when a prompt assistance is procured. To the second class belong those which, without indicating immediate danger, may notwithstanding prove fatal from the absence of surgical aid in time, and where the part injured is surrounded by nerves and muscles, or if the injury be near a joint, &c.—But it will appear that this division is an arbitrary one, as circumstances independent of the injury inflicted, may cause a slight wound to become dangerous—and a dangerous one, mortal. Thus the state of the constitution, such as intoxication, disease or unnatural state of some parts, &c. are to be strictly attended to.

Dr. Beck suggests whether a severe injury to the head will not of itself sometimes occasion a high degree of redness in the mucous coat of the stomach, without any injury having been affixed to the latter vicus. This idea is elucidated by cases of apoplexy, related in the *New-England Journal*, vol. 1, p. 34, by Dr. J. C. Warren.

The atmosphere, the air of Hospitals, a prevailing epidemic or pestilence, the negligence or ignorance of the Surgeon and