

ART. XIX.—*Medical and Surgical Reports of the City Hospital of the City of Boston.* Third Series. 8vo. pp. 390. Boston: Published by the Trustees.

We gladly welcome this handsomely printed and illustrated volume of hospital reports, and hope that the excellent example of a wise liberality on the part of hospital trustees, to which it is a monument, will prove contagious throughout all parts of the United States.

The first paper is a careful and pains-taking essay by Dr. S. G. Webber, on the *Pathological Histology of the Spinal Cord*, to which is appended three highly creditable plates from camera lucida drawings by Dr. Webber, who sums up his conclusions as follows:—

“There may be, then, 1st. Acute interstitial myelitis with swelling of the fibres, nuclei, and cells of the neuroglia, with destruction of nerve-fibres and nerve-cells, leading to softening. 2d. Acute parenchymatous myelitis, where the nerve-fibres in the white substance are primarily or chiefly affected, myelino and axis cylinders both disappearing, but the interstitial tissue remaining, seemingly not much changed; also cases in which the nerve-cells are chiefly affected, especially those of the anterior cornua, the nuclei and cells of the neuroglia being almost exempt from change, as in infantile paralysis and allied affections. 3d. Chronic interstitial myelitis, affecting the neuroglia, fibres, nuclei, and cells, in both white and gray substance, the nerve-fibres and cells being affected only secondarily, as in sclerosis. 4th. Chronic parenchymatous myelitis, in the white columns only, locomotor ataxia, or lesion of the posterior columns (and secondary ascending and descending degeneration possibly), is as yet well known; lateral sclerosis probably belongs to this variety. In the gray substance the cells are affected as in progressive muscular atrophy.”

Dr. Webber claims that there is as much reason to divide myelitis into the interstitial and parenchymatous forms, as there is to divide nephritis in a similar manner. It is to be regretted that our author's useful contribution to his important but obscure subject, should have its value marred by his neglect to inform his readers what amplifying power was used in

making the drawings. We would earnestly commend the veteran Prof. L. S. Beale's remarks upon this subject to Dr. Webber's attention, and hope for the credit of American microscopists that such want of precision as is manifest in the statement on p. 82 that, "figs. 5, 16, 21, are more highly magnified, 25, 26, 27, 28, less highly than the others," will not again be found in a scientific work emanating from the Athens of America.

Dr. C. Ellerly Stedman's article, *Notes on Typhoid Fever*, is well worthy of a more pretentious title, and should be carefully studied. It comprises the records of 1036 cases admitted into the City Hospital during ten years previous to January, 1881. Of these, 186 died, a mortality of about 18 per cent., but as 28 of the fatal cases were moribund when admitted, the actual mortality of cases treated in the institution was a fraction below 16 per cent. Our author makes an attempt on pp. 63-65 to show the results of treatment, but admits that the task is a difficult one, and its issue unsatisfactory. He concludes that 600 of the cases would have done well without any other treatment than milk, with diet and careful nursing. Of nearly 500 others, very many have been saved by the use of remedies under close observation. "In treating typhoid fever the thing to know is whether or not our patient needs the application of remedies, as distinct from food and nursing. My hospital experience has taught me the knowledge is imparted by the rapidity of the pulse, in all but a few cases." The highest pulse recorded in this series of cases in a patient who recovered, was 160 on the fourteenth day, the fever turning eight days after. The highest temperature was in a man aged 44, of 107° F. on the eleventh day, when his pulse was 109, the fever abating on the thirty-eighth day. In regard to the causes of typhoid, Dr. Stedman declares that contagion is not one of them, and that though it is a sickness which almost every one in New England has in childhood or in youth, its causes, except in epidemics which have been traced to contamination of the water supply, have yet to be made plain to him. In regard to treatment our author declares that for the last two years he has given fewer baths, because the success with them has not been so great as was anticipated from the reports of the German physicians, and experience has not persuaded him that cold bathing and antipyretic doses of quinine, shorten or cure the disease, although they do reduce temperature in a wonderful manner. Finally that if restricted to one remedy and one drug in the treatment of typhoid fever, he would choose the sponge bath and brandy for his pharmacopœia.

The next paper is a *Synopsis of fifty Medico-legal Autopsies* furnished by F. W. Draper, M.D., and is rendered appropriate for the City Hospital report by the fact, that many of the cases mentioned were under treatment in the hospital wards before they became the subject of post-mortem judicial inquiry. Several of the groups of cases reported present, as the writer remarks, tempting themes for special and extended comment, but want of space compels us to merely mention that five were in cases of peritonitis following criminal abortion, six of death by drowning, twelve of death by suffocation some of which presented quite curious features, eight by poisoning, and the remainder of death from various accidents, etc.

An interesting series of *Surgical Cases* by David W. Cheever, M.D., commences with the report of four successful instances of removal of bronchocele, in spite of which our author, we are glad to see, retains enough conservatism to remark, "if similar cases to these last present themselves again, I should urge the trial of at least six months medication with iodide

of iron and iodide of potash, the latter in cumulative doses, to absorb the glandular enlargement." Among other interesting histories in this series, we notice a well-reported case of cancer of the tonsil recurring after four successive operations and then abandoned as far as surgical interference was concerned; it is illustrated by two heliotype reproductions of camera lucida drawings, which would, however, be much more valuable had the magnifying power under which they were drawn been noted, as could have been done with so little difficulty; also if the same amplification had been employed instead of exhibiting the section of tumour nearly twice as much magnified as that of the normal tissue, if we may judge by the diameter of the voluntary muscular fibres (not fibrillæ as Dr. Cheever calls them on p. 147) which are cut transversely in the preparation.

Dr. G. H. Lyman's *Synopsis of Gynecological Cases* is made up from the histories and results of treatment of patients in this department of the Boston City Hospital for five years preceding January 1, 1881. It fully accomplishes its expressed object of informing the trustees and the profession as to the amount of work done in this important direction of medical effort, and indicates that the diligence and industry expended have been rewarded with a fair measure of success in relieving female suffering.

Dr. Robert T. Edes furnishes a timely essay entitled *High Pressure Education; its Effect*, in which he considers the subject of spinal irritation or neurasthenia, which he finds to some extent in the wards of the hospital and among the poorer classes, and considers is produced by the two opposite causes of underwork and overwork. The fact that, out of nineteen patients with this affection in the Adams Nervine Asylum, nine had been teachers, shows in his opinion that probably teaching is the one vocation to which more educated women who are obliged to earn their own living resort than to any other, and the further circumstance that out of ten of these patients whose cases might fairly be termed nervous exhaustion, seven had been teachers, certainly proves that teaching is one way of breaking down nervous strength. Dr. Edes very sensibly concludes that if as he believes:—

"Our system of education is responsible, both by omission and commission, for an important proportion of the chronic female invalids, the remedies are easily to be seen, even if not so easily obtained. They are: moderate and carefully regulated bodily exercise; less studying for prizes and more for knowledge; lesser demands upon teachers; fewer scholars; and, perhaps most important of all, lucrative employments beside teaching which shall be considered respectable for women."

Skeleton notes of thirty-nine *Cases of Diphtheria* occurring in the service of Hall Curtis, M.D., form the next article. Most of these patients came from houses upon damp soil, and the majority from houses where other cases of diphtheria, some of them fatal, had occurred. The mortality was only about ten per cent., and the chief variation from the usual treatment appears to have been that of thoroughly painting the pharynx every two hours with compound tincture of benzoin.

The disputed question of resort to *Optico-ciliary Neurotomy* as a substitute for enucleation of the eyeball is the subject of the next paper by O. F. Wadsworth, M.D. He reports at some length fifteen cases in which he performed the operation, and considers it offers sufficient advantages to make it not only justifiable but advisable in many instances, although at present he is disposed to limit its employment within somewhat narrower limits than those proposed by Schweigger.

Dr. O. W. Doe publishes *Notes on Two Cases of Uterine Fibroid*, one illustrating the ease, and the other showing the difficulty of forming a correct diagnosis. The former case was cured by operation which proved fatal in the latter.

A *Surgical Abstract* of the cases operated on in the hospital is contributed by George W. Gay, M.D., from which it appears that 172 operations for tumours or other morbid growths were performed during the five years ending June 1, 1879. One of the most remarkable of these was for an enchondroma of the femur (weighing with the limb fifty-four pounds) which is represented in a heliotype plate. Other remarkable cases reported in this interesting article are the removal of a large pebble stone from the peritoneal cavity, an operation of œsophagotomy, one for congenital fissure of the lower jaw, and a successful rhinoplastic operation.

Dr. A. L. Mason's *Analysis of Two Hundred Cases of Primary Pleurisy* presents a mass of evidence in favour of the operation of paracentesis thoracis in this disease, it having been performed 122 times upon 70 patients "with no unfavourable result which could be attributed to it in any instance, but usually with great and permanent relief."

Dr. William P. Bolles of the out-patient staff contributes a paper on *New Surgical Apparatus* which places before the profession several very ingenious appliances of his own devising which he says have received the commendation of the surgeons who have used them. They comprise an adjustable fracture box, curved forearm splints, a new ham splint (not, as might be imagined, a splint for curing hams), and tin finger splints, all of which evince a high degree of that wonderful inventive genius indigenous to New England.

Drs. Wigglesworth and Cushing, in their admirable article on the *Diagnosis and Treatment of Deep Syphilitic Ulcerations of the Throat*, call attention to the fact that these affections are often grouped by charlatans and by the general public under the name of "cutarrh" and help to give that complaint its terrible reputation, although by proper treatment brilliant results may be obtained, as in most of the eleven cases they report. Our authors found stimulant far better than caustic applications, and relied chiefly on a spray of dilute tincture of iodine, and insufflations of iodoform, with ferric iodide, cod-liver oil, and good food as constitutional remedies.

Some interesting *Cases with Autopsies* by E. B. Cutler, M.D., Pathologist; and useful tables giving the *Statistics of Amputations* by H. L. Burrell, M.D., conclude the volume which altogether constitutes a strong argument in favour of further issues of this valuable series in future years.

J. G. R.