"1. That iodine and hydriodate of potash act very much in the same way, but that there is still a difference, not merely in point of power, but of specific properties. 2. That whatever be the proper action of the iodide of sulphur, its facility of decomposition gives it a resemblance to iodine. 3. That the iodides of carbon, so far as examined, have an action peculiar to themselves. 4. That, in those metallic iodides which were submitted to examination, the preponderance of power is on the side of the bases." (P.167.)

Art. XII.

Memorie della Societá Medico-Chirurgica di Bologna. Vol. I. Fasc. 1, 2. — Bologna, 1835, 1836.

Memoirs of the Medico-Chirurgical Society of Bologna. Vol. I. Fasciculus 1 and 2.—Bologna, 1835-6. 8vo. pp. 223; with Plates.

This Society has published, for the last nine years, the Bullettino delle Scienze Mediche, a monthly Journal, consisting of extracts from foreign Medical Journals, and concise Reports of the proceedings of domestic and foreign Societies; but it is only since the reestablishment of its meetings, that had been suspended from 1831 to 1834, in consequence of the political events of that period, that it has published its own Transactions in a separate form. The first fasciculus was printed in 1835, the second in 1836, and each contains five articles; which, although rather deficient in originality and importance, display a pretty accurate acquaintance with the labours of foreigners in the same departments. Indeed, we have frequently had occasion to remark, that the Italian physicians are much better read in English medical literature than our nearer neighbours, the French, whose vanity, or ignorance of what is going forward in other countries, causes their honesty to be occasionally called in question when asserting their claims to new discoveries. Although the number of papers selected for publication in the Transactions is small, yet the quantity of writers among our Bolognese brethren is far from being so; for eight out of the twelve memorials read during the session 1836 to the Academy of Sciences were upon strictly medical subjects; some of which we shall have occasion to notice among our Selections.

The first paper is by Dr. Brevantani, upon the auscultatory Signs of Pregnancy, as observed by him in forty women supposed to be pregnant, who all, except one not pregnant, exhibited not only the placental murmur, synchronous with the maternal pulse, but also the double foetal sound, of the existence of which there could be no doubt, from its similarity to the sounds of the heart in the new-born infant. The placental murmur was never heard before the third month of pregnancy. At first it was perceptible in one spot at the lower part of the hypogastric region; and, as the uterus increased in bulk, it became more marked on one side, usually the right, and over the uterine enlargement; always preserving, however, its relative position with regard to the uterus. At first the sound is continuous, of greater or less intensity, but always louder than at a later period, and diminishing during the progress of pregnancy, till it is marked by the foetal sound. Once, when the belly was slightly pressed by the stethoscope, the murmur was heard at the upper and
anterior part of the uterine tumour; and then, by continuing the compression, it ceased, giving place to the sound of the foetal heart.

In common with Dubois, Evory Kennedy, and others, Breventani ascribes the placental sound to the uterine vessels in contact with the placenta; and he controverts the opinion of Bouillaud, that it is owing to the pressure upon the iliac arteries, by adducing a case in which he heard the placental murmur and the sound of the iliacs at the same time. The beatings of the foetal heart are not long in making themselves heard after the uterine murmur; but they are usually detectible a little after the fourth month, although before the motions of the foetus are perceptible. They generally diminish in frequency from the first moment they are heard to the end of pregnancy; but occasionally they become too rapid to be counted. The greatest number of double foetal sounds heard was 149, the least 120, in the minute. The situation and extent of surface over which they are audible varies with the motions of the foetus.

The next article is an account of two cases, with the dissections, from the pen of the same writer, in which the sounds of the heart were heard at a distance from the patients. In one of them a whizzing sound was audible at the distance of three paces, synchronous with the pulse, and proceeding from below the sternal end of the right clavicle, at which spot a purring tremor, contemporaneous with the pulse, was perceptible to the touch. The diagnosis was hypertrophy, dilatation of the aorta, and contraction of its orifice. The sound varied in intensity at different periods, and, a little before death, was only audible within a few inches of the chest. The diagnosis was confirmed by the dissection; but the valvular contraction was owing to an increased growth and development of the fibrous coat of the aorta, under the form of tubercular elevations projecting far into the interior of the vessels, obstructing its orifice, and extending in scattered clusters of less size along the descending portion. This degenerated structure contained some traces of atheromatous matter. The symptoms and morbid appearances of the second case resembled the first in every respect, but that the aortic valves were ossified, and the vessel was simply dilated.

Notwithstanding that, in almost all the dissections of such cases, the same morbid states have been found, yet, as there are numerous instances of the same lesions unattended with this peculiar loudness of sound, and that the noise itself varies in intensity, and in some cases has become inaudible except by the stethoscope, at the same time that the heart's impulse was augmented, the author is disposed to attribute it to a state of rarefaction of the blood, either by "the expansile vapours" of Rosa, or "the gases" of Testa, or "the nervous fluid" of Lobstein; as it is well known that thin fluids, when shaken, produce a far louder sound than thick ones.

Doubtless the crasis of the blood is liable to frequent variations in the same individual; and the phenomenon of the "bruit de diable" of Bouillaud and others goes far to prove that a poor and watery state of the circulating fluid is a condition favorable to the production of sound in the containing vessels; but, with respect to the three expansile or dilating matters above mentioned, we must withhold our assent to an explanation resting upon notions so purely hypothetical.

There is a very good digest of all that is known upon the subject of
Lithotrity, by Dr. Baroni; followed by a Latin dissertation by the president of the Society, Dr. Valori, upon the question whether Celsus was a practitioner as well as a writer; which question, from the internal evidence afforded by his works, is decided in the affirmative.

The last paper in the first Fasciculus is upon the Symptoms, Laws, and Peculiarities of the Cholera, by Dr. Versari; which, though a valuable compilation, contains little that is original, either in theory or practice. Dr. V. is inclined to refer the remarkable absence of tears and complaints in the patients to the general arrest of all the secretions, except those from the stomach and bowels, rather than to any peculiar state of the sensorium; though he does not altogether deny that this may have some influence. Our own experience on this point, derived from the observation of some hundreds of cases, leads us to attribute this curious state of apathy to a "lesion of innervation," produced by the retarded flow of highly carbonized blood through the brain, that deadens the perceptive faculties as well as weakens the muscular powers; besides that the mere want of the secretion of the tears is not sufficient to account for the absence of all other signs of grief and terror. In speaking of the empty state of the arteries, Versari quotes a cruel experiment of Dieffenbach's, mentioned in the Annali of Omodei, No. 184, in which an elastic tube was passed from the upper part of the brachial artery to the heart of a patient in his last agonies, without giving exit to a particle of blood. He considers cholera to be a peculiar disease, affecting more particularly the ganglionic system, and secondarily those organs, as the stomach, bowels, &c., with which it has the closest connexions. Like most of the Italian physicians, he adopts the opinion of its contagious nature, but not without a severe scrutiny of the arguments for and against it. Of all remedial means, he places the greatest reliance upon an early bleeding; and speaks very favorably of the use of ice, swallowed slowly and in small quantities. In the cold stage he uses stimulants, astringents, and aromatics; but with little expectation of a favorable result. The consecutive fever he treats, in the usual manner, with salines and diluents.

The first article of the second Fasciculus is an account of a Monster by Defect, by Dr. Spessa, of Crespino. This monster appears from its size, (sixteen inches long,) to have been born at the full period, and presented the following anomalies:—There was no connexion, by means of an umbilical cord, between the foetus and the placenta, the foetal portion of which was wanting; and, where it was attached to the uterus for a hand's breadth, it was thin and broken down. The liver and small intestines projected through a large round opening in the abdominal parietes, four inches in diameter, the edge of which was cicatrized, except for a space of three inches towards the left hypochondrium, where it was sloughy. The cord, had there been one, would have occupied the centre of the opening. An immense spina bifida occupied the whole vertebral column, from the lower part of the neck to the coccyx, containing five pounds of straw-coloured serum, and communicating with the spinal canal by numerous openings, caused by the absence of the spinous processes. The medulla, that floated in the fluid, as well as the brain, was very soft and diffuent. The feet and legs were turned inwards, so that the toes met each other. The pelvis was very narrow, and there was neither anus nor organs of generation. There was no sternum, nor car-
tilages to the ribs. The thymus was large; the lungs were merely rudimen-
tary, and the pericardium and mediastinum were absent. The want
of a diaphragm made but one cavity of the chest and abdomen, in which
were neither spleen, omentum, nor stomach; for the oesophagus passed
directly into the small intestine that terminated at the ileum in a cul-de-
sac. The pancreas was small, and the kidneys had neither pelves nor
ureters; nor was there any bladder or internal sexual organs; indeed,
the pelvis was an irregular mass of bones, without any cavity. The liver
was of an irregular form, and the gall-bladder was deeply sunk into its
substance. The remains of the umbilical vessels were impervious cords.
The distribution of the blood-vessels and nerves was as regular as it could
be with the absence of so many important viscera.

The following is the explanation given of this extraordinary monstros-
sity:—1st. That there was an original defect of all the absent parts,
together with the existence of an umbilical hernia, containing the liver
and intestines. 2d. That this, compressed by the uterus against the
rim of the pelvis, became inflamed and sloughed, forming the large
opening into the abdomen, (not entirely healed at the time of birth,) besides
separating the union of the foetus and the mother; and that, 3d,
The foetus, thus separated, was enabled to maintain its independent
existence nearly to the period of birth; and that this separate existence
continued some time is evident from the healing of the edges of the abdo-
minal opening, and the contracted state of the remains of the umbilical
vessels. The author does not attempt to explain the way in which the nu-
trition of the foetus was carried on at this period; but mentions a case from
Poujol, where the umbilical arteries were both impervious. It is to be re-
gretted that no account is given of the contents of the intestines, nor of the
lymphatics and lacteals; as, by means of an examination of these organs,
some light might perhaps have been thrown upon the vexata quæstio of
the nutrition of the foetus; particularly as it has been strongly denied by
Adelon, that a foetus has ever arrived at maturity whose umbilical cord
has been divided while in utero.

In the same Fasciculus is another account, by Dr. Luigi Calori, of
a Monster by Defect, in which, externally, the nose and nostrils were
wanting, while a hare-lip and cleft palate converted the mouth and nasal
fossæ into one cavity. To this deformity was added a vast serous cyst
within the skull, compressing both hemispheres, particularly the right,
of which only a rudiment remained. The corpora striata, the olfactory
nerves and lobes, the commissures, the septum, fornix, and the mamili-
lary processes, were all absent, and the carotids were much smaller than
usual. There was no æthmoid bone, and the sphenoid was deficient in
those parts that are connected with the nose; besides that there were
many minor deformities within the skull dependent upon these more
important anomalies. This “monster” lived eleven days, and then died
jaundiced; but its death appeared to result from inanition, from the dif-
culty of taking food, rather than from any disease.

Professor Calori considers this case to be confirmatory of the law laid
down by Meckel, “that, when the facial portion of the skull is deficient,
the anterior part of the brain is imperfectly formed;” likewise, that the
proximate cause of the deformity was (in accordance with the views of
Serres,) the want of development of the carotid arteries, upon which
these parts were dependent for their nutrition; the remote cause being the pressure exercised upon the parts within the cranium by the contents of the serous cyst; the formation of which he attributes to inflammation set up at an early period of the foetal existence. With but little respect for the tender and musical ears of his countrymen, Dr. Calori has deno-
minated this monstrosity as Coloborrhinocephalus Fissilabrus!

The two remaining articles are upon Scurvy, as it appeared in the prison at Narni; and on a case of Ossification of the Costal Pleura and Cartilages, attended with dyspnea, constant, and unrelieved by any posture or mode of treatment: neither paper, however, has any claims to originality, either in its pathology or treatment; indeed, there is a great deficiency of this quality in most of the Italian periodical publications, which is hard to be accounted for, consistently with the knowledge of the works of contemporaneous authors therein displayed, unless it arise from the Italian physicians being fonder of reading than of observation.

---

ART. XIII.

A Medico-legal Treatise on Homicide by external Violence; with an Account of the Circumstances which modify the Medico-legal Characters of Injuries and exculpatory Pleas. By Alexander Watson, Fellow of the Royal College of Surgeons, Edinburgh, and one of the Surgeons to the Royal Infirmary, &c. &c. &c.—Edinburgh, 1837. 8vo. pp. 355.

Mr. Watson, the author of the work before us, has long been known to the profession as a contributor of articles on Medical Jurisprudence to a respected contemporary Journal. That he has been a most industrious labourer in this department of science, the treatise which he has now published sufficiently shews. But other circumstances have concurred to place him in a most favorable situation for collecting and recording facts. There are probably few in Edinburgh, and we may confidently say there is not one medical practitioner in London, who can boast of having been consulted judicially in one-half of the number of cases in which we find, by this volume, Mr. Watson has been personally engaged. We rejoice to perceive that this golden opportunity of collecting interesting medico-legal facts has fallen to so shrewd an observer, and, generally speaking, so cautious a reasoner. The work, we are assured, will be welcomed not only by all professed medical jurists, but by those who have not yet been led to consider medico-legal knowledge as of great importance to a practising surgeon. We invite the attention of the latter class in particular to this volume. The great bulk of it refers to the duties of a surgeon; and its perusal will suffice to shew, not only that the kind of information which it contains is not to be obtained either from an attendance on surgical lectures or from a perusal of the works of surgical writers, but that, without this knowledge, the personal reputation of the practitioner is endangered, and the course of public justice must be embarrassed.

Although Mr. Watson’s work is especially devoted to a consideration of the subject of Homicide by “external violence,” yet we find treated