The average number of men under restraint was two; of women, four. The average number of men in seclusion was five; of women, eight.

The foregoing are the principal points of interest referred to in the Report.

There are probably some of our readers who are wont to regard the Dutch as a people

> "That always ply the pump, and never think
> They can be safe, but at the rate they sink,
> That feed like cannibals *on other flshes*,
> And serve their cousin-germans up in dishes!"—*Hudibras*

This, however, is but a travesty; and that the Dutch are capable of high emotions and benevolent designs they have proved, by the means they have taken to provide for the care and the cure of their insane population.

D. H. TUKE.

Sulphuric Acid, v. Urine.

My dear Sir,—If you think that the use of sulphuric acid diluted with water, as a chemical agent for disimpregnating floor, or other boards saturated with urine, is not as well known to the superintendents of asylums generally as to myself, may I ask you to give a place to this letter in the next number of our *Journal*.

It is of course very desirable to have wooden in preference to other floors; but often in wet and dirty, and occasionally also in other wards, these become in the course of time partially saturated with urine, much discolored, and very offensive. No scrubbing or scalding will effect more than a temporary improvement in such floors, for the wood has absorbed and holds much, becoming a reservoir for the perpetual exhalation of the volatile ammonia.

Let such a stained floor have poured over it a mixture of one fluid ounce of sulphuric acid with twenty or twenty-four ounces of water; let the liquor be diffused in an even stratum, and lie for twenty-four hours.

The first effect of the application will be effervescence, then the evolution of a strong urinous odour (soon disappearing), and lastly, in the course of the drying up, the deposition of a white film (sulphate of ammonia) all over the area treated, varying in amount in different parts, according to the depth of stain.

Lastly, let the salt be washed off, and if the boards be not restored to something like the color of clean deal, this may be obtained by a second or third repetition of the process. All odour of urine will be gone and the room rendered sweet.

I do not find the use of the acid on similarly stained floor-stones so successful. The action is unequal; some parts resisting it, as if protected by something greasy. A further trial, however, on stone, will be worth making, after well cleansing the surface with a strong solution of washing-soda. The acid may be applied to urine-stained crib-bedsteads, or in any situation to wood.

The principle, that of converting a volatile into a fixed salt, which may be removed, appears sufficiently good, and I beg to assure you that the effect is very gratifying in practice.

There is nothing novel in the idea, which, as far as I know, and as regards this sort of application of it, is due to my friend and teacher, Dr. Hitch. It can be considered as no more than an extension of its use in pillows containing bran, to catch the urine from persons confined to bed with sores, which he communicated to the *Lancet*, I believe, some years since.

I remain, your obedient servant,

JAMES E. HUXLEY.

County Lunatic Asylum, Maidstone, October 10, 1854.

Treatment of Cholera.

Essex Lunatic Asylum, Nov. 6th, 1854.

My dear Sir,—In compliance with your request, I send you a short statement regarding the cholera cases which have taken place in this asylum.

The disease first appeared on the 8th day of September last, and has caused considerable mortality among the unfortunate lunatics.

Two wards, one on the male, and another on the female side of the house, were immediately set apart for those attacked, and attendants were appointed, whose duty it was to attend entirely upon the cholera cases.

The epidemic, however, spread, and from the day of its first appearance up to the 15th October, nineteen cases of Asiatic cholera and ten cases of choleraic diarrhœa took place; of these, twelve recovered and seventeen died. During the same period, about seventy cases of diarrhœa without collapse were under treatment.

My treatment of cholera was to give two grains of calomel every fifteen minutes for the first five hours, then two grains every half hour for three hours, and afterwards two grains every hour for from twelve to fifteen hours, with cold spring water to drink. Mustard sinapisms were applied to the extremities and abdomen, and friction was also used. In four of the cases stimulants were administered, which seemed to aggravate the symptoms.

Having had considerable experience when in India in treating the disease, the mode which I then considered and found most successful was calomel in small doses frequently repeated, and although the deaths have been large here in proportion to the number attacked, this circumstance arises in a great measure from the weak state of many of the patients previous to the attack.

I have no hesitation in saying, that I would again adopt the same mode of treating the disease, should this institution be again unfortunately visited by cholera.

Yours faithfully,

D. C. CAMPBELL.

[We are informed that there has been a severe outbreak of cholera in the Hoxton Asylum. All the cases, with one exception, happened during the first week in October. Nineteen male and seven female patients died. We do not know that the pestilence has hitherto invaded any other asylum.—ED.]

Inquest at the Norfolk County Asylum.

On the 23rd ult. an inquest was held at Thorpe, before Mr. Pilgrim, one of the county coroners, on the body of William Sizer, a man aged 36, who died suddenly that morning, in the County Lunatic Asylum. Evidence was adduced to the effect that the deceased was admitted on the 15th of July last; that

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he was noisy and dirty at night, but harmless; that he was reported ill to the governor on the 18th ult.; that he knocked his bedstead about at night; and that, on one occasion, it was taken out of his room on this account by an attendant.

Mr. Firth said,—I am the visiting medical officer to this asylum. I have occasionally seen Sizer, but my attention was not called to him till last Friday, when I found him to be labouring under a fracture of the ribs; on further examination I discovered a fracture of the breast-bone, between the second and third ribs; I considered him then in a very precarious condition. The patient was in such a state of mind that I could not make out how the injuries came. I saw him again on Sunday, at which time I considered his condition as hopeless. I saw no more of him when living. I have this day made a *post-mortem* examination, the result of which leads me to think he died from the injury on the chest, which must have been done with great violence; on the right side four ribs were broken, and four on the left. There were marks of inflammation on both sides of the chest; on the right a large quantity of matter was found. These were quite sufficient to account for his death. I think these injuries could not have occurred more than ten or twelve days ago. I think he might have been able to get into bed as usual after he received this injury; but I consider he could not make quick movements. There are no external bruises. I think, if Sizer received the injury on Tuesday, the appearances I discovered to-day might appear; but I think he received the injury before that time.

Mr. Edward Casson said,—I am the resident surgeon in this asylum, and have attended the deceased from the time I have been surgeon, which is only about six weeks. He was very noisy. I discovered no injury he had received till last Wednesday, when a report was made to me, that Sizer was not able to get out of bed. I went to him, and discovered a tumour on his chest. I discovered nothing more at that time. I visited him afterwards: he remained much the same. I attended him again the next morning: I then found his ribs were badly broken. I attended him afterwards, as often as was necessary. I was never able to discover in what way he received the injury. He died this morning, and I have assisted Mr. Firth in making the *post-mortem* examination. We found four ribs fractured on each side, and considerable inflammation, which was quite sufficient to account for death. I could get no information from Sizer how these injuries occurred. I think if Sizer had the bedstead up end ways, and it fell on his chest, it might have caused the injuries we discovered. I think Sizer could not have received the injury more than eight or ten days. I considered him in great danger when I saw him on Thursday morning. I also discovered the breast-bone was broken.

The coroner having briefly summed up, the jury, after a short deliberation, returned the following verdict: "That the said William Sizer died from the effect of a serious injury he received, but how or by what means the same was inflicted, there is no evidence to prove; and the jury consider there is some mystery in the case."

Appointments.

W. H. O. SANKEY, M.D. *Lond.*, to be Medical Superintendent of the Middlesex County Asylum at Hanwell. Female Department.

J. G. SYMES, ESQ., M.R.C.S., to be Medical Superintendent to the Dorsetshire County Asylum.

EDWARD CASSON, ESQ., to be Resident Medical Officer to the Norfolk County Asylum.

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Errata.—In Dr. Boyd's paper, p. 122, 1st column, line 16, for *Cruvelhier* read *Cruveilhier;* lines 50 and 51, for *cerate* read *urate.*

All Communications for the forthcoming Number should be addressed to the Editor, DR. BUCKNILL, *Devon County Lunatic Asylum, near Exeter, before the 15th day of December next.*

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