

which. It is at such athletic-social gatherings, by the way, that the Anglo-Saxon race itself looks its best, according to Bourget's politely expressed yet double-edged criticism of us. "Meteor" was being led away in company with a rather coarsely bred waler, and the contrast between them was very strong. The Arab stalked along, moving from hip and shoulder, with head aloft and his beautifully set-on tail carried like a banner, while a little behind him the Australian horse ducked and shuffled. Very likely the colonial was a much better hack, though, for "Meteor" never could be persuaded to "trot on," or to walk in a hurry. But take the little Arab all in all he was well worth the keeping; indeed, I was selfishly sorry when somebody bought him, and one morning, in the hot weather ("one fine morning" one had nearly written), "sais" and pony again set out together to serve a new master.

Echoes from the Past.

THE LAST MOMENTS OF LORD NELSON.

[THIS interesting account of the last moments of Lord Nelson is abstracted from a volume of *The Medical and Physical Journal* of 1805, now in the library of the Military Hospital, Shorncliffe. The book, which at one time belonged to Sir J. M. MacGrigor, Bart., was presumably presented by him to the hospital. In the copy of the engraving the ball is a little larger than in the original.—E. M. HASSARD, Major, R.A.M.C.]

"To the Editors of *The Medical and Physical Journal*.

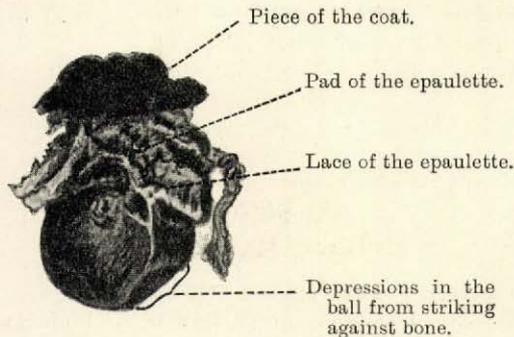
"GENTLEMEN,—I beg leave to transmit you a statement of the scite and nature of the wound which produced the death of the exceedingly lamented and late illustrious hero, Lord Nelson; and request that you will please to insert it in the next number of *The Medical and Physical Journal*; enclosed is likewise a drawing of the fatal ball, with its appendages, which were carried before it through the whole course it described. (*Vide* Engraving.)

"I am, &c.,

"W. BEATTY, Surgeon.

"*H.M.S. Victory, December 15th, 1805.*"

“About the middle of the action with the combined fleets on the 21st of October last, the late illustrious commander-in-chief, Lord Nelson, was mortally wounded in the left breast by a musquet ball, supposed to have been fired from the mizen top of ‘La Redoubtable,’ French ship of the line, which the ‘Victory’ fell on board of early in the battle; his Lordship was in the act of turning on the quarter deck, with his face towards the enemy, when he received his wound; he instantly fell, and was carried to the cockpit, where he lived about two hours. On his being brought below, he complained of acute pain about the sixth or seventh dorsal vertebra, of privation of sense and motion of the



THE BALL WHICH KILLED LORD NELSON.

body and inferior extremities; his respiration short and difficult, pulse weak, small and irregular; he frequently declared his back was shot through; that he felt every instant a gush of blood within his breast, and that he had sensations which indicated to him the approach of death.

“In the course of an hour his pulse became indistinct, and was gradually lost in the arm; his extremities and forehead became soon afterwards cold. He retained his wonted energy of mind and exercise of his faculties until the latest moment of his existence; and when victory, as signal as decisive, was announced to him, he expressed his pious acknowledgements thereof and heartfelt satisfaction at the glorious event in the most emphatic language; he then delivered his last orders with his usual precision, and in a few minutes afterwards expired without a struggle.

“Course and scite of the ball, ascertained since death:—

“The ball struck the fore part of his Lordship’s epaulette, and

entered the left shoulder immediately before the processus acromion scapulæ, which it slightly fractured; it then descended obliquely into the thorax, fracturing the second and third ribs; and after penetrating the left lobe of the lungs, and dividing in its passage a large branch of the pulmonary artery, it entered the left side of the spine between the sixth and seventh dorsal vertebræ, fractured the left transverse process of the sixth vertebra, wounded the medulla spinalis, and fracturing the right transverse process of the seventh vertebra, it made its way from the right side of the spine, directing its course through the muscles of the back, and lodged therein, about two inches below the inferior angle of the right scapula. On removing the ball, a portion of the gold lace and pad of the epaulette, together with a small piece of his Lordship's coat, were found firmly attached to it."

Reviews.

THE URETHROTOMIES AND KIDNEY CAPSULOTOMY. By Reginald Harrison, F.R.C.S. London: John Bale, Sons and Danielsson. Pp. 96, 20 illustrations. Price 2s. 6d. net.

To all officers of the Corps in active performance of professional duty we recommend this little book. Though the book itself is small the directions for sound practice are much fuller than will be found in most text-books. The directions given for the treatment of those imperative emergency cases of complete retention with apparently impassable stricture, and again for those cases of extravasation with still effectual stricture, are most excellent, though we miss any reference to the continuous warm bath treatment for the latter class of cases, continued if need be, for several weeks, such as we have found to be of inestimable advantage more than once.

The description of the operation of internal urethrotomy is very full and good; it gives a tyro all the information he wants when left to his own unaided resources; as a preliminary, Mr. Harrison prefers internal administration of magnesian boracite for three or four days.

The teaching as to what should be done for ruptured urethra is one of the most important parts of the book, the great and very obvious advantages of immediate perineal section and drainage are so clearly stated; by this means are avoided: (1) subsequent stricture; (2) extensive and progressive extravasation with possibly (or most likely) fatal sepsis; and all will agree with the author as to the rarity of stricture after perineal lithotomy on the one hand; and its frequency and severity after undrained rupture of the urethra. Then we would quote: "It