

"True it is that sometimes nature indulges in strange freaks, and supposing even that 'once upon a time' a wolf took pity on a child and nourished it, can it be supposed that such a circumstance would be of so frequent an occurrence as the villagers in Oudh would have one to believe?"

"It will most probably be found on inquiry that since the annexation of Oudh no fresh instances of the existence of 'wolf-boys' have been brought to notice, and if this is found to be a fact, it will go far to cast disbelief on the weird stories, formerly so current in Oudh, and which apparently had no other foundation than the mere assertions of ignorant villagers, assertions which under the present rule would be subjected to the strictest scrutiny before being accepted as trustworthy.

"O. P. A.

"Musoorie, the 30th May, 1874."

Obituary.

FRANCIS EDMUND ANSTIE, M.D.

Seldom have we had a sadder duty than to record the sudden and premature death of Dr. Anstie, which took place on 12th September last. He was well known as the Editor of the *Practitioner*, a journal which he established, as one of the Physicians of Westminster Hospital, and as the author of scientific treatises on *Stimulants and Narcotics*, and on *Neuralgia*, as well as for his labours in the cause of Sanitary Reform. Although he was only in the 41st year of his age, he had made himself a name in medical science and literature so great and respected as might well have sufficed to crown the labours of a long life. But high as was his professional reputation in public estimation, it could not equal the esteem which his sincere, genial, and chivalrous nature gained for him from all his friends. If he had any enemies among those who knew him, they were those whose enmity was the highest tribute to his worth, for they were the enemies of an earnest and single-minded devotion to truth and right. He was so pure from reproach, that the poisoned tooth of the slanderer could not harm him; so careless of self in his devotion to the cause which he had at heart, that the jealous eye of envy did not affect him; so fearless in encountering what he believed to be wrong, and in championing what he believed to be right, that no thought of consequences to himself or to his cause ever made his resolution halt; so enthusiastically bent upon the achievement of high moral aims, by the highest moral means, that he could never stoop to unworthy enterprises, or to ignoble warfare. He acted with such nobleness of spirit that, whatever the issue, he could not be shamed. If it was a fault to have allowed one subject to take a too passionate hold of him for the time, and not always to have given sufficient thought to the good which there was in what seemed entire evil, or if, letting feeling sway his judgment, he sometimes made a direct onslaught where more prudent counsels would have dictated a discreeter mode of attack, we may justly say that the fault was truly an exaggeration of the virtues of his character. Few reforms would be accomplished in the world if it were not for men of Dr. Anstie's type of character; and many a good cause has lost in him a champion whose generous zeal and eager energy would have been willingly given to its service. To his many friends it will be a long regret that he undertook so many labours and worked so hard as he did, for they cannot but think that if he had been more careful of his strength a valuable life would have

been spared to bring to maturity much good work. We extract from the *Lancet* the following description of his last illness and his death:—

“The schools of the Patriotic Fund at Wandsworth had been visited by a somewhat strange succession of illness, and at last some of the children were attacked by a rapidly fatal form of peritonitis. Dr. Anstie was called in to the assistance of the medical officer, and he made a careful examination both of the premises and of the patients. He was at the time suffering from overwork and want of rest, and was perhaps hardly in a state to undertake the oftentimes dangerous duty of a medico-sanitary inspection; but, after accomplishing it, he made, on Sunday, the 6th, a *post-mortem* examination of one of the children who had died from peritonitis. Whilst thus engaged the middle finger of his right hand was accidentally punctured by a needle. He sucked and washed the wound immediately, and on Tuesday mentioned the occurrence to some of his friends, but expressed a hope that no harm would result from it. On Wednesday he felt ill, and complained of pain in the right armpit. During the afternoon he was so chilly that he sat before a fire wearing an overcoat. Dining with a friend in the evening, he spoke of having poisoned his hand, and said that he had so much pain in the armpit that he feared he should have an abscess there. The pain in the arm made it impossible for him to put on or take off his great coat without assistance. He still complained of feeling cold, and appeared to be depressed in spirits. On Thursday he was confined to his bed, and Mr. Brudenell Carter found him with a dry tongue, a dry, hot skin, and complaining of distressing headache, and of much pain over the right pectoral region. During the day the symptoms increased in intensity. After a restless night the patient was still worse on Friday, and the assistance of Dr. George Johnson was obtained, who has favoured us with a narrative, which we give in his own words:—

“I first saw Dr. Anstie with Mr. Brudenell Carter at 3 p.m. on Friday, the 11th inst. He was then delirious and quite unable to give a history of his illness. The tongue was dry; the temperature 105 deg.; there was an erysipelatous blush about the size of the palm of the hand over the right pectoral muscle; there was excessive tenderness on pressure in the right axilla and over the front of the chest on the right side; the slightest movement of the arm elicited a cry of pain; there was no appearance of inflammation about the wound on the hand or up the arm. At half-past nine in the evening I again saw the patient, in consultation with Dr. Burdon Sanderson and Mr. Carter. His condition remained unchanged. At half-past nine on Saturday morning I again met Mr. Carter. We found the breathing was very rapid; there was a distinct friction-sound over the middle and lower lobe of the right lung, and dulness on percussion over the same space; the erysipelatous redness and the tenderness on pressure remained the same. The urine was highly albuminous, and contained numerous epithelial casts. About the middle of the day symptoms of a blood-clot at the right side of the heart came on; the features were livid; the breathing rapid and shallow; consciousness was rapidly lost, and death occurred at half-past 2 p.m.

“It was not thought necessary or desirable to make a *post-mortem* examination. The nature of the disease was obvious. A poison absorbed from the wound of the hand had caused diffuse cellulitis over the right side of the chest, acute pleuropneumonia, and general blood-poisoning. I may add that Dr. Sanderson entirely concurs with me in the opinion which I have here expressed as to the origin and nature of Dr. Anstie's illness.”

Dr. Anstie was not a member of the Medico-Psychological Association, but this Journal has had the advantage of occasional contributions from his pen. Our readers will call to mind an important article by him on the *Hereditary Connection between Nervous Diseases* in the No. for January, 1872. His work on *Stimulants and Narcotics*, and his later work on *Neuralgia*, were reviewed by us at the time of their appearance.