



LIBRARY

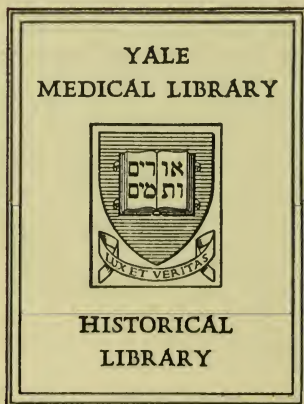
OF THE

New Haven Hospital.



Gift of *Dr. V. M. Down*

Vol II





Digitized by the Internet Archive
in 2014

THE
BOSTON MEDICAL AND SURGICAL
JOURNAL.

MDCCCXXIX—XXX.

==
VOLUME II.
==

BOSTON :
JOHN COTTON, PROPRIETOR AND PUBLISHER,
184 Washington Street.

1830.

Press of the Proprietor.

INDEX TO VOLUME SECOND.

- ABERNETHY**, anecdote of, 191.—Illness of, 207
 Aboriginal skeletons in Salem, 511
 Abortion, blisters in, 357, 331
 Abortion, cases of, 39
 Abscess, lumbar, 602
 Absorbents of sailors, 540
 Acetate of lead in large doses, 299
 Acid sulphuric, in psoriasis, 123
 Acid sulphuric for disfiguring the face, 339
 Acid sulphuric, two ounces swallowed, 271
 Acupuncture, 502
Adams, Dr. Z. B. Case of fatal corn, 241
 Age of parents, its influence on the sex of offspring, 654
 Ague, leaping, case of, 230
Allen, President. Biography of Dr. Smith, 312
 Aloes, 458
 Alum, insufflation of in angina, 394
 Amaurosis, 653
 Amaurosis cured by leeches, 494
 Ammonia, carbonate of, how prepared, 566
 Ammonia in cutaneous diseases, 476
 Amputation at hip joint, 270
 Amputation by one incision, 270
 Amputation of jaw, 218
 Amputation of the foot, 142
 Amputation of the hand, 185
 Amputation of the thigh, 67
 Anatomical preparations, 223, 319
 Anatomico-surgical drawings, 413
 Aneurism, carotid, 87
 Aneurism, carotid, cured, 239
 Aneurism, carotid, operation for, 371
 Aneurism, cure of, 300, 335
 Aneurism, diagnosis of, 619
 Aneurism, fatal abdominal, 303
 Aneurism mistaken for tumor, 335
 Aneurism, new operation for, 583, 779
 Aneurism spontaneously relieved, 761
 Angina pectoris, 749
 Animal economy, conversations on, 397
 Animal matter, Dr. Warren on, 1, 17, 33
 Animation, suspended, 703
 Anomalous vertebral artery, 479
 Antimony, tartarised, in disease, 244
 Anus, imperforate, 45
 Aorta, ligature of, 552
 Aphthæ cured by lunar caustic, 354
 Apoplexy of the eye, 712
Armstrong Dr., death of, 831
 Arsenic, its remedial value, 377
 Artery, brachial, wound of, 575
 Articulation without a larynx, 310
 Artificial limbs, 334
 Ascites, pressure in, 173
 Asphyxia from falling into a privy, 401
 Asphyxia in infants, 186, 601
 Asthma produced by emphysema, 410
Bard, Dr. D. H. Case of polypus, 433
 Bell on nervous system, 70, 85
 Belladonna in scarlatina, 545
 Birds, respiration of, 541
 Blistering infants, 493
 Blisters in measles, 173
 Blood, is it a living fluid, 219
 Blood, coagulation of, 772
 Blundell on diseases of children, 24, 55
Boivin, Madame, on abortion, 193
 Bone in trachea 48 days, 821
 Bones, analogies in the formation of, 310
 Borax in cutaneous diseases, 319
 Boston, mortality of, 794, and weekly Boston Society for Medical Improvement, paper read before, 821
 Boston, state of health of, 95, 127
 Brain, defect of, by Dr. Storer, 821
 Brain, disease of, 417
 Bread, composition of, 623
 Bread, sulphate of copper in, 495
Brewster, Dr. W. A. Cases of abortion, 39
Brown, Dr. J. B. Case of diseased kidney, 155.—Cases of gangrenous erosion of the face, 679
 Bulimia, with dissection, 541
Burke, trial of for murder, 102, 118, 135.—Confessions of, 164.—Phrenological development of, 542
 Burns, 812
 Burns, chlorurets in, 12
 Burns, Dr. Ward's book on, 749
 Burns, flour in, 232
 Cæsarean section, 43, 246
 Calculus, lachrymal, 237, 718
 Calomel contra-indicated, 249
 Camphor in puerperal mania, 414
 Camphor, solution of, 638
 Cancer cured, 744
 Cancer of male breast, 302
 Cancer of the stomach, 639
 Cancer of tongue—operation, 157
 Cancer, ulcerated, cured, 695
 Cancer uteri, 692
 Cancer uteri cured, 687
 Cancer uteri, extraction of, 289
 Caoutchouc, 782
 Carotid, ligature of, 467
 Cataract, extraction of, 718
 Cataract, remarkable case of, 687
 Cataract, singular case of, 479
 Cataract, spontaneous cure of, 291
 Cataracts alternating with diabetes, 753
 Catarrhal cough, 750
 Catarrhus vesicæ, 505
 Catholicon, Potter's, 357
Chabert, resisting poison, 468.—The fire king, 625
Channing, Dr. W. Collections in morbid anatomy, 49
 Cheese, poisoning by, 173
 Chilblains cured by iodine, 190

- Child with two heads, 431
 Children, affection in, resembling hydrocephalus, 44
 Children, diseases of, by Dr. Blundell, 24, 55
 Children, united, 667
 Chimney-sweepers exempt from ophthalmion, 270
 Chinese foot, dissection of, 330
 Chirayita bark fashionable, 174, 462, 590
 Chirayita in asthma, 494
 Chlorides, 603, 777
 Chlorurets in burns, 12
 Chorea, with dissection, 505
 Cinchona, new alkali in, 771
 Circulation, action of arteries in, 472
 Circulation, motive powers of, 437
 Cities, health of, 503
 Climate, amelioration of, 682
 Close reasoning, 415
 Coal, bituminous, 783
 Coffin, Dr. J. G., mortal disease of, 470
 Colchicum, action of on urine, 303
 Cold on new-born infants, 478
 Colica pictonum, 297, 345, 619
 Colica pictonum cured by alum, 223
 Color of the sea, 575
 Colors, injurious, forbidden, 190
 Combustion, human, 588
 Comparative anatomy, prize question, 142
 Conceptions, 447
 Constipation, 726
 Constipation, mechanical remedies, 454
 Constipation, quicksilver in, 527
 Consumption, 617, 750
 Consumption,—climate of St. Augustine, 792
 Consumption, iodine and morphine in, 404
 Consumption, quinine and digitalis in, 414
 Consumption in animals, 796
 Consumption in Boston, 794
 Conversations on animal economy, 397
 Cooper, Bransby, tribute of respect to, 300
 Cooper, Sir Astley, biography of, 257
 Corn, fatal, 241
 Cornea, ulcers on, 472
 Cramp of the stomach, 438
 Croup, Dr. Thompson's case of, 121
 Croup followed by convulsions, &c. 818
 Crusta lactea, 636
 Crystalline lens, absorption of, 223
 Cutaneous diseases, 701
 Cutaneous diseases, borax in, 319
 Cuticle, exfoliation of, 233
 Davy, Sir H., death of, 415
 Deaf and dumb, 511
 Deaths in Boston, weekly
 De Camp, Dr. S. G. Account of connected sisters, 518
 Deformities of the person, 330
 Delirium tremens, 264, 567, 636
 Dengue, 233
 Dentistry, statistics of in France, 510
 Dentition at the age of 75, fatal, 383
 Dentition at 75, without inconvenience, 527
 Depletion, effects of, 727
 Diabetes, 283, 694
 Diamonds, artificial, 495
 Diet in France and England, 550
 Digestion, Dr. Philip on, 275
 Digestive process, 409
 Discutient, 395
 Disease, three causes of, 415
 Dislocation of femur, 58
 Dislocation of os hyoides, 375
 Dispensaries, a new plan for, 266
 Dissection, address respecting, 719
 Dissection, Boston Traveller on, 573
 Dissection, laws respecting, 92, 333, 474, 500, 506
 Dissection. Major Cartwright's will, 328
 Domestic, sickness of, 353
 Dragon flies innocuous, 142
 Drowning. Resuscitation by oxygen gas, 385
 Dropsy, 637, 755
 Dropsy, iodine in, 431
 Dropsy of pericardium, 446
 Dysentery terminating in gangrene, 10
 Dyspepsia, 527
 Dyspepsia, inflammatory, 402
 Dyspepsia, its pathology, 30
 Dysphagia, 375
 Ear, extraction of foreign bodies from, 303
 Ear, new mode of studying its anatomy, 223
 Eczema, epidemic, 346
 Edema of the glottis, 393
 Editor's notice, 334
 Egyptian surgery, 319
 Elephantiasis, Lisfranc's treatment of, 493
 Emetine, 206
 Empyema producing asthma, 410
 Empyema, 541
 Empyema after measles, 408
 Endermic medication, 249, 359
 Endosmose and exosmose, 231
 Epidemic in Ohio, 584
 Epilepsy, 484, 590
 Epilepsy of fourteen years' duration, 11
 Epilepsy suspended, 649
 Ergot in parturition, 14, 216
 Ergot in uterine discharges, 298
 Ergot, Mantell on, 29
 Ergot of maize, 814
 Ergot of rye, uses of, 828
 Erysipelas, 250, 255, 601
 Eruption, anomalous, history of, 337
 Eruptive epidemic, 493
 Examinations, medical, 162
 Experiments on living animals, 294
 Eye, corpuscles in, 278—apoplexy of, 712
 Eye infirmary, fifth report of, 730
 Eyelid, artificial, 527
 Eyes, artificial, 623
 Fall, singular effects of, 345
 Fees for attendance on servants, 353
 Feigned diseases, 335
 Fevers not produced by animal matter, 1, 17, 33
 Fever, intermittent, 359, 635
 Fisher, Dr. J. D. Plates of smallpox, 78

- Fistula, treatment of, 603
 Fistula of parotid duct cured, 689
 Five children at a birth, 492
 Flora Belgica, 31
 Fœtal circulation, 395
 Fœtal life, peculiarities of, 213
 Fœtus, rudiments of in child's testicle, 214
 Fœtus retained in utero, 638
 Fœtus with fungus hematodes, 725
 Fœtus, monstrous, 650
 Foundling Hospital at Paris, 819
 Fracture, compound and complicated, 390
 Fracture, new apparatus for, 422
 Fracture in cancerous persons, 691
 Fractures of limbs, 81, 255, 670
 Fulminating powder, new, 142
 Fungous tumor of the penis, 156
 Fungus hematodes, 719, 725—operation, 67
- Galen, surgery of, 504
 Gangrenous erosion of face, 679, 758
 Gangrenous sore throat, pepper in, 561
 Gas, nitrous oxide, in chronic diseases of the chest, 425
 Gastric juice, effects of, 700
 Gastro-enteritis in infants, 222
 Gestation, irregularity of, 372, 600, 638, 827
 Gibraltar, fever at, 175
 Gilbert, Dr. D. Case of amputation, 185
 Glandular swellings reduced, 239
 Godman, Dr. Addresses, 382, 519.—On tight lacing, 481, 497
 Gonorrhœa, 671
 Gonorrhœa alternating with fever, 817
 Gonorrhœa and gleet, new remedy for, 239
 Good, Dr. J. Mason, biography of, 233, 269.—Study of Medicine, new edition, 239.—Prayer of, 329
 Gorham, Dr. J., death of, 107, 124.—Funeral of, 126.—Portrait of, 191
 Grapes in dyspepsia, 317
 Growth, extraordinary, 639
 Gunshot wound, 715
 Gutta serena from a tumor, 418
- Halford, Sir H., on insanity, 421
 Hand, wound of, 169
 Hart-horn jelly, preparation of, 767
 Hatin's Compend of Midwifery, 45
 Hay asthma, 513, 533
 Headach cured by quinine, 159
 Heart, wound of, 209
 Heart, bone found in, 719
 Heat and phosphorus, effects on the human body, 529
 Hematemesis, 377
 Hemiplegia, strychnine in, 153, 583, 815
 Hemorrhage checked by twisting the cut artery, 811
 Hemorrhage, uterine, tannin in, 317
 Hermaphroditism, 717
 Hernia, new species of, 721
 Hernia, opium in, 623
 Hernia, reduction of, 273
 Hernia, remarkable, 358
 Hernia, simulated, 671
 Hernia, sp. tereb. in, 426, 644
- Hernia, strangulated, 287, 703
 Higginson, Dr. J. F., on poison, 305
 Hinde, Dr., biography of, 620
 Hippocrates, oath of, 323
 Homans, Dr. J. Irregular gestation, 372.—Account of the post mortem dissection of Dr. J. G. Coffin, 470
 Hooping cough, quinine in, 548
 Hops, substitute for, 189
 Hospital dressers, 447
 Hospital, Massachusetts General, 607
 Hospital reports, 65, 81, 142, 156, 169, 239, 321, 330
 Howard, Dr. J. C., case by, 198, 401
 Humerus, dislocation and fracture of, 702
 Hunter, John, biography of, 641
 Hybrid, curious, 319
 Hydrocephalus, treatment of, 666
 Hydrophobia, 232, 251, 376, 809
 Hydrothorax, new treatment of, 622
 Hyoides os, dislocation of, 758
 Hypochondriasis, 263, 301, 332
- Ice, artificial preparation of, 783
 Idiocy, case of, 41
 Ilium, rupture of, by Dr. Otis, 7
 Impregnation, double, 60
 Infidelity of physicians, 441
 Infidelity of medical profession, 441
 Infirmary reports of eye, 366, 780
 Infirmary for diseases of bowels, 334
 Inflammation, diseases resembling, 535
 Inflation of lungs, danger of, 189
 Ink, permanent black, 591
 Instrument for extracting bodies from meatus auditorius, 303
 Instrument for examining the fauces, 238
 Insanity from gastric irritation, 801
 Insanity, new work on, 799
 Insanity, Shakspeare's test of, 421
 Insect hatched under the skin, 367
 Intemperance, 728
 Intemperance, a new remedy for, 783
 Intemperance, suppression of, 190
 Intermittent character of diseases, 196
 Intermittent fever, bleeding in the cold stage of, 202
 Iodine, crystallization of, 575
 Iodine in dropsy, 431, 831
 Iodine in gout, 447
 Iodine in Hospital St. Louis, 607
 Iodine, its properties, &c. 220, 254
 Iodine ointment in enlarged scrotum, 188
 Iodine, preparation of, 190
 Iodine tincture for chilblains, 190
 Iodine tincture in diseases of joints, 51, 69
 Iodine, vapor of, in consumption, 174
 Iodine with morphine, 359
 Iritis, 201
 Ischuria, 396
 Italy, medicine in, 413
- Jackson, Dr. C. T. Analysis of milk, 307
 Jerusalem, physicians in, 783
 Johnson, Dr. Samuel, post mortem examination of, 231
 Journal of Humanity, 351

- Journal, Boston Medical and Surgical, form of, 384
 Journal, Professor Silliman's, 572
 Journal of Philadelphia College of Pharmacy, 573
 Jurisprudence, medical, 507, 718
- Kidney, malposition of, 399
 Kidney, remarkable disease of, 155
 Knee, inflammation of, 203—partial dislocation of, 302
 Knee joint, cartilaginous bodies in, 646
 Knee, cartilaginous bodies in, 318
 Knee pan, dislocation of, 367
 Knee, swelling of, 66
 Knox, Dr., and the resurrectionists, 236
- Labyrinth, new method of studying, 223
 Lachrymal calculus, 287, 718
 Lacing, hernia from, 331
 Laryngotomy, 673
 Larynx, needle in, 211
 Larynx, foreign bodies in, 301
 Latin prescriptions, 430
 Laurel, 495
 Laurel water in epilepsy, 599
 Law and medicine, 495
 Leaping ague, case of, 260
 Lectures on nervous system by Bell, 70, 85
 Lectures in Boston, 638
 Leech bites, arresting hemorrhage from, 79, 447
 Leeches, mortality of during storms, 575
 Leeches, new mode of applying, 765
 Leeches, preservation of, 141
 Legislature. Bill respecting dissection, 92
 Leontodon taraxicum, 221
 Lewis, Dr. W. Ligature of carotid, 371
 Life, infant, tests of, 712
 Ligatures, metallic, 265
 Lithonripteur, 319
 Lithotomy, 551, 655
 Lithotripsy successfully performed, 232
 Lithotripsy, history of, 563, 719
 Liver, abscess in, 169
 Locke, John, a physician, 419
 Lobelia, anti-asthmatic effects of, 494
 London University, 799
 Lungs, capacity of, 471
 Lungs, crepitation of, 504
 Lusus nature, 431
 Luxation, chronic, reduction of, 335
- Malaria, 359, 664
 Malaria, Jones on nonexistence of, 378
 Malignant sore throat, 399
 Malpraxis in midwifery, 270
 Maryland, University of, 543
 Mass. Med. Communications, 553
 Maxilla, superior, excised, 526
 Measles, 618
 Measles, blisters in, 173
 Measles, eruption of, on one side only, 333
 Measles, prevention of, 365
 Measure of liquids, 597
 Medical ethics, 737
 Medical examinations, 161
 Medical Inquirer, 766
 Medical manufactories, 508
 Medical prosecutions, 442
 Medical responsibility, 824
 Medical Society of Connecticut, 271
 Medical Society of Massachusetts, 271, 285
 Medical Society of New Hampshire, 287
 Medical Society of New-York, transactions of, 61
 Medical statistics, 699
 Medicine no mystery, 606
 Medicines, their operation on animals, 701
 Melæna, 455, 485
 Membrana tympani, 767
 Memoria Medica, 664
 Menorrhagia, holyhock in, 351
 Menstruation, vicarious, 335
 Mesmerism, 411, 446, 584, 698
 Merriman, Dr. R. A., on gangrenopsis, 758
 Metastasis of disease, cases illustrative of, 817
 Midwifery, Compendium of, noticed, 45
 Milk, adulteration of, 825
 Milk, how to suspend its secretion, 655
 Monsters, living, 516, 650
 Morbid anatomy, collections in, 49
 Morphine, 185
 Morphine, effects on healthy body, 547
 Morphine in tetanus and pertussis, 311
 Mortality of Boston, 704
 Murders in Edinburgh, 102, 118, 135
 Muriate of mercury decomposed by vegetables, 767
 Muscles, power of will over, 351
- Narcotine, 185
 Natural cure of diseases, 200
 Necrosis of lower jaw, 648
 Neuralgia, 494
 Neuralgia, cases of, by Dr. Warren, 97, 113, 129, 145, 177, 209
 Neuralgia, extract of belladonna in, 295
 Neuralgia, case of imitative, 197
 Neuralgia, Macculloch's treatment of, 386, 405
 Neuralgia, nosological place of, 209
 Neuralgia, oil of turpentine in, 294, 275
 Neuralgia, nitrate of silver in, 783
 Neuralgia, quinine in, 798
 Neuralgia, Townsend's case of, 197
 New medical works, American, 111
 New medical works, British, 110
 New medicines, 185, 206, 220, 236, 269
 Nipples, sore, remedy for, 383
 Nipples, wash for, 815
 Nitrate of silver, 410
 Nitrate of silver and Mr. Higginbottom, 685
 Nitrate of silver in aphthæ, 354
 Nitrate of silver in cyananche maligna, 399
 Nitrate of silver in ophthalmia, 719
 Nitrate of silver in uterine diseases, 684, 705
 Nomenclature, medical, 538
 Notices, 111, 175, 191, 239, 351, 799
 Nux vomica in diarrhœa, 44
 Nymphæ, excision of, 655
 Nymphomania increased by marriage, 189

- Obstruction, intestinal, 665
 Officers, medical, 287, 311
 Oil from seeds of sunflowers, 447
 Onanism producing disease of the heart, 317
 Opacity of cornea, cure for, 238
 Operations at Mass. Gen. Hospital, 94
 Ophthalmia neonatorum, 651, 763
 Opium, extract of, deprived of morphine, 186
 Opium, its use in inflammatory diseases, 226
 Opium eaters, 503
 Ossification of the vitreous humor, 255
 Otis, Dr. G. W. Case of ruptured ilium, 7
 Ovary, extirpation of, 477

 Palmer, Dr. D., on disease of the brain, 417
 Palsy cured by strychnine, 574
 Panacea, Swaim's, 357
 Panacea, Swaim's, contains mercury, 426
 Panaceas, 589
 Panaceas, history of, 577, 593
 Paralysis, curious case of, 722
 Paralysis, with peculiar symptoms, 409
 Paraplegia, epidemic, 171
 Paris hospitals, number of patients in, 207
 Patella, dislocation of, 367
 Pathology, notices in, 394
 Perforation of stomach, 427, 615
 Perineum, lacerations of, 748
 Periodical literature, sketches of, 200, 207, and weekly
 Perkins, Dr. J. W. Case of psoriasis, 123.
 —Curious case, 225
 Perspiration, suppression of, 298
 Pharmacopœia, improved, 783
 Phenomenon, curious, 479
 Phlebitis, 251
 Phlegmasia dolens, 574
 Phosphorus and heat, effects on the human body, 529
 Phosphorus, death from, 479
 Phrenology, 493
 Physic and surgery, 657
 Pills of bals. copalb., 431
 Placenta, inflammation of, 42
 Placenta, adhesion of to head of fetus, 574
 Poison, Chabert's resistance to, 468
 Poison, its effects on plants, 215
 Poison, different effects of on carnivorous and herbivorous animals, 303
 Poison, treatment of, 216
 Poisoned arrows of the Nagas, 151
 Poisoning, 747
 Poisoning by endermic medication, 299
 Poisoning by milk and cheese, 173, 255, 305
 Poisons, action of on human body, 556
 Polydipsia, 687
 Polypus in the vagina, 433
 Pregnancy after amputation of the neck of uterus, 574
 Pregnancy, gastric irritation in, 749
 Pregnancy, with malignant tumors, 477
 Prescription, fatal mistake in, 478
 Prescriptions, 349
 Presentation of hip, 495
 Presentations, hip, six successive, 212
 Pressure as a surgical remedy, 632
 Pressure in ascites, 173
 Prick of a pin, fatal, 218
 Prize essays, 223, 239, 432, 559, 783
 Prize question, 142
 Prolapsus ani, 723
 Prosecutions for malpraxis, 442
 Prussic acid, 232, 559
 Prussic acid, Dr. Epps on, 595
 Pseudo-carics, 655
 Psoriasis cured by sulphuric acid, 123
 Psoriasis cured by arsenic, 13
 Ptyalism cured, 239, 666
 Publications, new medical, 110, 303, 415
 Puerperal fever, 494
 Puerperal mania, camphor in, 414
 Punctured wounds, 575
 Pupil, double, 214
 Purpura hemorrhagica, 230, 325

 Quackery, 398
 Quackery, transatlantic, 509
 Quarantine laws, 331, 415
 Quinine, as augmenting salivation, 814
 Quinine in pertussis, 548
 Quinine, its qualities and modes of prescribing it, 269
 Quinine, new mode of administering, 446
 Quinine, new mode of preparing, 445

 Rabies canina, 802
 Rectum, debility of, 559
 Rectum, extirpation of, 719
 Rectum, stricture of, 369
 Respiration, phenomena connected with, 579
 Retina, termination of, 59
 Re-vaccination in France, 167
 Rheumatism, antimony in, 798
 Rheumatism, endermic treatment of, 637
 Rheumatism, iron in, 637
 Rheumatism of testicle, 284
 Robbins, Dr. C. Account of medical spoon, with plate, 374.—Anomalous eruption, 337
 Roots and herbs, 381, 511
 Rouge, how prepared, 591
 Rupture of pulmonary artery, 773
 Russia, surgery in, 372

 Sailors, absorbents of, 540
 Salts, qualities of, 142
 Sarcocele, 683
 Sarsaparilla, concentrated decoction of, 414
 Scabies, treatment of, 486
 Scirrhus mamma, 143
 Scrotum, enlarged, cured by iodine, 188
 Sea sickness, 332
 Self-supporting dispensaries, 266
 Senses, modification of, 348
 Sex, affected by age of parents, 654
 Shakspeare's test of insanity, 421
 Shoulder, amputation of, 767
 Siamese brothers, 459.—In London, 717, 735.—Sick, 799
 Siamese and Sir Astley, 830

- Silver obtained from human viscera, 255
 Sinuses, obstinate, 359
 Skin, anatomy of, 702
 Smallpox and vaccinia, simultaneous, 426
 Smallpox at Havana, 255
 Smallpox, Fisher's plates of, 78
 Smallpox in New Hampshire, 95, 187
 Smallpox in Pennsylvania, 505
 Smallpox, antiquity of, 473; divisions of, 742
 Smelling bottles, 573
 Smith, Dr. J. V. C. Case of absorption of crystalline lens, 228
 Smith, Dr. Nathan, 312
 Society, Mass. Medical, meeting of, 207
 Spine, fracture of—recovery, 745
 Spleen, extirpation of, 316
 Spleen, use of, 492
 Spoon, medical, description of, 374
 Spooner, Dr. J. P., on weaning, 785, 815
 St. Augustine for consumptives, 792
 Stevens, Dr. J. Stricture of rectum, 369
 Stomach, perforation of, 427, 615
 Stomach, ulceration of, 746, 762, 775
 Stone, Dr. E. Case of aneurism, 761
 Storer, Dr. D. H. Case of cerebral disorganization, 821
 Strabismus, 827
 Strangury, 697
 Strictures of urethra, 410
 Strychnine, 237
 Strychnine in hemiplegia, 153, 583, 815
 Strychnine in palsy, 574
 Success extraordinary, 639
 Sugar plums, poisoned, 463
 Sulphur, arsenic in, 189
 Sunflower, properties of its seeds, 447
 Suppuration, 809
 Swiss medical societies, 142
 Syphilis, mercurial pediluvium in, 366
 Syphilis, non-mercurial treatment of, 716
- Taliacotian operation, 302, 710
 Tannin in menorrhagia, 462
 Tannin in uterine hemorrhage, 317
 Tanning a healthful employment, 203
 Tartar on the teeth, 440, 708
 Teeth of glass, premium for, 334
 Teeth, some affections of, 708
 Tenia, new remedy for, 174, 343
 Tendo Achilles, division of, 285
 Tests of infant life, 712
 Tetanus, 703
 Tetanus cured by bleeding, 463
 Tetanus cured by calomel, 587
 Tetanus, intermittent, 463
 Tetanus, morphia in, 622
 Tetanus, singular treatment of, 446
 Thompson, Dr. A. R. Case of croup, 121
 Thompsonian practice, 366
 Tomb, robbery of, 686
 Tongue, cancer of, 157
 Tonsil, excision of, 188
 Townsend, Dr. S. D. Letter to the editor, on neuralgia, 197
- Tortion, arterial, 811
 Tracheotomy, 665
 Transferred diseases, 726
 Transfusion, case of, 60, 735
 Tumor in jejunum, 342
 Tumor within the ilium, 470
 Turkey, medical practice in, 449
 Tympanum, disease of, 515
- Ulcers, aloes in, 798
 Ulcers on tongue, 309
 Umbilical chord, unusual length of, 175
 United twins separated, 767
 Urethra, artificial, 321
 Urethra, case of diseased, 465
 Urethra, relieved of stem of a pipe, 395
 Urethra, restoration of, 247
 Urine, remarkable retention of, 271, 751
 Uterus, abstract of papers on, 74
 Uterus, double, 60
 Uterus, extirpation of, 559
 Uterus, inflammation of the veins of, 174
 Uterus, injurious effects of mercury on, 301
 Uterus, retroversion of, 12
 Uterus, rupture of, 43, 204, 238
- Vaccination and re-vaccination, 355
 Vaccination, new method for, 383
 Vaccination received among the poor, 766
 Vaccinia in fetus in utero, 602
 Vaccinia in the cow, 701
 Vaccine matter, 735
 Vaccine virus, best mode of preserving, 187
 Vagina, obliteration of, 609
 Vapor of iodine for consumption, 174
 Variolaria, 735
 Vein, abscess of, 169
 Venereal eruption, 12
 Venereal virus, anti-specific nature of, 456
 Venesection not indicated by appearance of the blood, 266
 Vesicating plaster, 655
 Vision, imperfection of, 345, 348
 Vomiting, facility of by Fuseli, 351
- Warren, Dr. J. C., on animal matter, 1, 17, 33.—On neuralgia, 98, 113, 129, 146, 177, 209
 Warren, Dr. J. P. Case of porphyra, 325
 Wasp, sting of, 159
 Waters, simple aromatic, 414
 Weaning, Dr. Spooner on, 785, 815
 Weekly form of this Journal, 384
 Wen cured by iodine, 365
 Wen extirpated, 335
 White swelling, incipient, 751
 Willow, bark of, 814
 Worm, new intestinal, 769
 Worms, case of, 581
 Worms, croton oil for, 318
 Worms, Rhind on, 253
- Yale College, professors at, 335

I.

Facts relating to the Influence of decomposing Animal Matter in producing Fevers.

Communicated for the Boston Medical and Surgical Journal.

(Continued from p. 7.)

IN the "Memoirs of the Society of Medicine" in Paris, and the "Annals of Chemistry," we find recorded some remarkable facts relating to the non-pestilential influence of decomposing animal substances. These having been introduced by Dr. Bancroft in his treatise on yellow fever, we shall avail ourselves of his translation, together with some remarks which he has connected with it.

"Many writers of celebrity have thought that no effluvia were so infectious and pernicious to mankind as those which issued from putrefying human bodies; and although a century and a half has elapsed since Diemerbroeck attempted to convince physicians that, at least, such effluvia could not produce the plague, yet the old opinion has kept its ground; and it is still believed, that, in their milder state, they may cause putrid fevers, and, in their more concentrated state, a true pestilence. There are facts, however, on a large scale, which com-

pletely decide this question;—two of these deserve particular notice.

"The first relates to the exhumations made in the church-yard of St. Eloi, at Dunkirk, in the year 1793; and the other to those made three years afterwards, in the church-yard of the Saints Innocens, at Paris. As the undertakings and results were similar in both instances, I shall, to avoid repetition, here describe only the latter, which I have preferred, because the corpses here taken up were much more numerous than at Dunkirk, and probably constituted the greatest mass of putrefying animal matter of which we have any accurate information.

"The church-yard of the Saints Innocens, at Paris, situated in one of the most populous quarters of the city, had been made the depository of so many bodies, that, although its area enclosed more than 1700 square toises, or near two acres, yet the soil had been raised by them eight or ten feet higher than the level of the adjoining streets; and upon the most moderate calculation, considerably more than six hundred thousand bodies had been buried in it, during the last six centuries; previous to which date, it was

already a very ancient burial ground.* Numerous complaints having been made concerning the offensive smells which arose from this spot, and sometimes penetrated into the adjoining houses, and the public mind having been greatly alarmed, it was at last determined to forbid all future burials there, and to remove so much of the superstratum as would reduce the surface to the level of the streets. This work was undertaken in 1786, under the superintendence of M. Thouret, a physician of eminence in Paris, and in two years he accomplished the removal of that superstratum, almost the whole of which was impregnated, or infected, as M. Thouret styles it, with the remains of carcasses, and of quantities of filth and ordure, thrown upon it from the adjoining houses.

“ ‘The exhumations,’ says this gentleman, (in the narrative of them, which he published in the *Journal de Physique*, for 1791,

page 258,) ‘were principally executed during the winter, but a considerable part of them was also carried on during the *greatest heats of summer*. They were begun with every possible care, and with every known precaution; but they were afterwards continued, almost for the *whole* period of the operations, without employing, it may be said, any precaution whatever; yet no danger manifested itself in the whole course of our labors,—no accident occurred to disturb the public tranquillity.’ This account is authentic,—and was read before the Royal Academy of Sciences at Paris. It is, moreover, confirmed by the report of M. Fourcroy, who was joined in this commission with M. Thouret for certain chemical objects, which report was also read at the Academy, and is printed in the sixth volume of the *Annales de Chimie*. If this result from taking up nearly twenty thousand bodies, in different stages of decomposition, be insufficient alone for my purpose, there is another almost equally conclusive in its nature and extent. It is well known that M. Berthé, Professor in the School of Medicine at Montpellier, and two of his colleagues in that University, were sent, by the government of France, into Spain, to examine, and report upon, the nature of the yellow fever, which has proved so fatal in several towns of Andalusia, in 1800. M. Berthé has published the report of the commission, of which he was a member, and in it has mentioned that, being at Seville only a few months after the epidemic had ceased, he frequently visited the burial places just without the city, in which the victims of the

* In less than thirty years, more than 90,000 corpses had been deposited here by the last grave-digger. The poorer inhabitants were buried in coffins made of very thin deal boards, and were regularly stowed as closely as possible, upon and beside each other, in large pits about thirty feet deep, and capable of receiving each from 12 to 1500 coffins. These pits were gradually filled with coffins, and then covered over with earth, about one foot in depth, and the bodies left to putrefy. But as the same space was generally wanted, in fifteen or twenty years, for other bodies, this mass of animal corruption was then dug up, and a like number of recent corpses deposited in the same pit; and this operation was successively repeated through nearly the whole extent of the church-yard, from generation to generation, until the earth itself had been so completely supersaturated with human putrefaction, as to have no longer any action, or decomposing influence, on bodies buried there.

fever had been interred ; that, in these excursions, he was accompanied by the French Consul at that city, and had occasion to converse much with the guards stationed at those places, and with the grave-diggers still employed in them ; and he states that, besides these, many thousands of the inhabitants of Seville also come hither, some from curiosity, and others in processions, to testify their sorrow and respect for their departed friends. In one of these grounds, south-westward of the city, ten thousand bodies had been buried ; in two others, seven or eight thousand ; and in that of Triana, about four thousand.

“ ‘The heats of the spring,’ says M. Berthe, (which, I need not observe, are considerable at Seville,) ‘were, at this time, beginning to be felt, and the ground of these burial places being clayey, was already cracked into wide and deep crevices, through which a fœtid odor was exhaled, the results of the decomposition which was going on among these heaps of bodies.’

“ Filled with alarm at the calamities which might be produced by such masses of putrefaction, M. Berthé and his colleagues represented these supposed dangers to the Spanish government ; and then went to Cadiz, where they found the churches more or less filled with putrid emanations from the same causes ; but as they did not discover that these supposed fomites of infection were productive of any disease, their fears concerning them seem at length to have subsided completely ; for, in their reply to the President and Members of the Board of Health, who had requested a

statement of their opinion, they expressly declare their belief, that ‘if the yellow fever could be reproduced by the effluvia arising from putrefying bodies, it was evident that such a misfortune must already have taken place, through the imperfect manner in which the tombs and vaults, pointed out by them, had been closed,—a defect which they had observed in the churches that were most frequented.’ Thus, it appears that the putrid emanations from the bodies of many thousand persons, who had recently died of the yellow fever, did not, and therefore could not, produce that disorder.”

To the preceding facts I may add another, which is related by a man whose veracity is as little to be questioned, as his exalted philanthropy,—I mean John Howard, in his work on Lazarettos, p. 25.*

“ The governor, at the French hospital at Smyrna, told me, (says Mr. Howard,) that, in the last dreadful plague there, his house was rendered almost intolerable by an offensive scent, especially when he opened those windows which looked towards the great burying ground, where numbers were left, every day, unburied ; but that it had no effect on the health of himself or his family. An opulent merchant, in this city,” adds he, “ likewise told me, that he and his family had felt the same inconvenience without any bad consequences.”

If the exhalations from piles of bodies destroyed by the plague itself, and corrupting in the open air, were thus incapable of generating the contagion either of fe-

* Bancroft on yellow fever.

ver or of plague, even during the prevalence of a pestilential constitution of the atmosphere, (if any state of the atmosphere ever deserved that title,) it may, I think, be safely affirmed, that there are no circumstances under which putrid animal matter can be supposed ever to produce febrile contagion.

The following statement is extracted from a letter written to Dr. Bancroft by Mr. Lawrence, Anatomical Demonstrator at St. Bartholomew's Hospital, whose character, talents, and professional acquirements, have already, at an early part of his life, greatly and justly advanced him in the road to eminence. It was dated February 21, 1809.

“In a constant attendance at St. Bartholomew's Hospital for more than ten years, I have never seen any illness produced by the closest attention to anatomical pursuits, except such as might be expected to follow from a similar confinement and application to any other employment. When it is considered that most of the students come from the country, and that many spend much time in dissection, being employed also in writing, reading, &c. during the rest of the day, it will not be a matter of surprise that their health should occasionally suffer: but the indisposition has never appeared to derive any peculiar character from the exposure of the subject to putrid effluvia. Of course you will except from this observation, the effects which may arise from the absorption of noxious matter from wounds received in dissection. It has not appeared to me, that ill consequences of that description follow more frequently from the dissec-

tion of the most putrid, than from that of recent bodies. The following particulars will afford the most complete proofs that the exhalations from decomposing animal substance are not necessarily injurious to the human body.—John Gilmore, together with his wife and two sons, lived for ten years in a room under the anatomical buildings of St. Bartholomew's. The whole family slept, as well as spent the day, in this apartment, which received a very small quantity of light, in consequence of its single window opening against a high wall. The room was at the end of a passage, in which several tubs containing bones in a state of maceration were generally placed, and with which other divisions of the cellars communicated, containing large excavations for receiving the refuse of the anatomical rooms. The latter were not separated from the general passage by any door.

“The animal matters thrown into the receptacles just mentioned, are, I believe, converted into adipocire, and the fetor is consequently not so offensive as if they went through the putrefactive process: but the whole place was constantly filled with a close cadaverous smell, very disagreeable to any persons who went down from the fresh air. During the whole day Gilmore was employed about the dissecting room, in removing the offals, in cleaning macerated bones, in short, in an almost constant handling of the most putrid matters. He always enjoyed good health, was fat, and possessed great bodily strength. He left his situation in consequence of an apoplectic attack, and died lately, at the age of 69,

after two other similar affections. His wife survived, enjoying a good state of health. Neither of his sons appears to have suffered from any unwholesomeness of their abode. They are both hearty and strong, although they have been employed some years in attending the dissecting rooms. But the whole family left the cellar soon after the father's first attack.

“ During the time that our very numerous fleet of transports lay in the bay of Aboukir, many bodies of sailors who had either died, or had been drowned, were washed upon the shore, where they remained unburied, exposed to the heat of the sun. In riding to Rosetta, it was necessary to keep along the shore. I passed eighteen or twenty corpses in this situation. They were in various states of putrefaction; but the stench from them all was offensive in the highest degree, and extended to more than one hundred yards. My curiosity led me to approach close to most of them, that I might examine the changes they had undergone. Some were swelled up to an enormous size, and the skin seemed so distended, that it appeared ready to burst. They were often of a dark brown color; some had not yet come to that state; others had passed it; and the skin having burst in several places, the air had escaped, and they had become more or less desiccated, and of a black color. Every person who had to pass from the camp to Rosetta, was obliged to come within reach of the vapors emitted by these bodies. There were orderly dragoons constantly passing, yet neither myself nor any one else, as far as I could learn, was attacked with fever in consequence of our

exposure to these vapors; and my professional situation would probably have enabled me to learn if any such consequence had followed.”

Orræus *Descriptio Pestis, &c.* p. 47. After stating that towards the decline of the plague in Moscow, in February, 1772, the College of Health received information, “ hinc inde in domibus emortuus et infectis—cadavera clanculum inhumata vel aliter occultata sepeliri;” and that they ordered all the houses to be searched, offered twenty roubles to informers, “ et quæ (cadavera) in locis spatiosis non sat profunde inhumata fuerunt, eorum sepulchra terra multa contegere, cætera vero nuda reperta in cæmeteria transportare;” he says, “ hac ratione circiter mille cadavera in habitationibus ipsis, reperta fuerunt. Notabile omnino fuit neminem et vespillonibus, vel aliis in negotio hoc periculoso versantibus infectum nedum morbo aliquo corruptum fuisse, quamvis tanta ab omni infectione incolumitas vix ac ne vix quidem sperari posse videbatur.”

In the *Edinburgh Medical and Surgical Journal* of October 1, 1810, may be seen an account, given by Dr. Chisholm, of a manufactory (of which I had some knowledge from the time of its first establishment) at Conham, near Bristol, destined for the conversion of animal flesh into a substance resembling spermaceti, by cutting up dead horses, asses, dogs, &c. and putting their muscular parts into boxes with holes for the admission of water, and afterwards placing them in pits filled with water, while the entrails and useless parts of many hundreds of carcasses were left

to putrefy on the surface of the ground. And it appears from Dr. Chisholm's statement, as well as from other information which was given to me on the subject, that though the effluvia of these putrefying animal matters were highly offensive to the overseer of this manufactory, and to the workmen employed under him, as well as to others within their reach, no injury was done by them to the health of any person, during the two years in which these operations were continued.

In regard to the morbid effects supposed to result from the putrefaction of fish, they appear, so far at least as regards fever, to have had no existence, but what was derived from the indiscriminating credulity of such writers as Forestus. That a large whale was formerly cast ashore, and suffered to putrefy on the sea coast, near Egmont, in North Holland, (a place nearly surrounded by marshy or low grounds,) I am willing to believe; but that the fever which is said by Forestus (tom. 1, lib. 6) to have followed that event, was produced by the whale rather than by marsh miasms, I cannot believe; because whales have not been found capable of producing such effects in later times, and because fevers from marsh effluvia constantly fall under our observation.

About the year 1788, a whale was stranded on the coast of France, near Havre de Grace, and M. Baussard, in an account of it, published in Rozier's Journal de Physique, for March, 1789, says, "Pendant que j'étois occupé a dissequer ce gros animal, une lueur phosphorique exhaloit de l'intérieur de son corps, et une odeur tres fetide de la tête."

"Les exhalaisons m'ont occasioné des inflammations aux narines et a la gorge et certaines parties huileuses de la tête m'ont mis les mains dans un etat pitoyable."

No mention is, however, made by M. Baussard of any febrile affection, occasioned either to himself or to any other person, by the putrefaction of this fish; and that no such affections do, in fact, result from that cause, was farther proved by the information which I obtained on the 2d of October, 1807, at the Greenland Dock, where the late proprietor, Mr. Ritchie, (who had just sold this property to Sir Charles Price and his associates for 25,000*l.*.) informed me that for a considerable time all the Greenland ships had been used to boil their blubber at this place, for which purpose, five coppers, with proper coolers, &c., had been erected. Mr. Ritchie had lived more than fifty years in the neighborhood of this dock, was well acquainted with the boiling process, and assured me, repeatedly, that though the blubber is often in a very offensive state, emitting a highly putrid smell, neither himself nor his people, nor the crews of the Greenland ships, who perform the whole boiling, &c., nor the neighbors, have ever, to his knowledge, suffered in their healths from that operation; that his people and himself have always been healthy, and that he believes no crews are more healthy than those of the Greenland ships. This account was confirmed by the master of a Greenland ship then in the dock, who said he had been employed in the whale fishery for the last twenty-two years, excepting one year, and had been used to boil down the blubber for sixteen or

eighteen years of that time. He said besides, that the Greenland ships, on their return home, often smell very offensively to strangers, though to themselves the stench is imperceptible; that the casks in which they carry out their water, are those in which they have brought home the blubber; and that the water generally is found very offensive for some hours after the bung is taken out; in which state, however, the men are accustomed to drink it; and that, notwithstanding all this, he does not conceive that any men are more healthy than the crews of those ships; that the stench from the blubber is universally admitted to be greatest when it is boiling; and that these effluvia, so far from being at all unhealthy, are, on the contrary, reckoned so wholesome, that it is very common for sick persons to come to the copper, as soon as they rise from their beds, and to hold their heads over the steam as close as they can.

Mr. Ritchie informed me, that what remained of the blubber, after the boiling was finished, was now very commonly bought for agricultural purposes; that it was usually taken away by the purchasers just after the boiling, and was allowed to lie by a certain time, till it was in a proper state to be used as manure; when it was laid upon the ground, and found to be very useful.

The use of fish as manure is no new invention. Herrings, pilchards, and mackerel, have been long employed for this purpose in those parts of Great Britain where they are caught in the greatest abundance, and so are the various species of mollusca. In some parts of Cambridgeshire, &c., a

small fresh water fish, called stickle-back, (*gastrosteus aculeatus*,) becomes so plentiful, that, leaving their native ditches, they form vast shoals in the rivers, and being caught in nets or baskets, are strewed over the ground, in the proportion of twenty bushels per acre. No morbid effect, however, so far as I can discover, has ever been known to result from the putrefaction of fish, or other animal matters employed in this way, though fevers ought to have resulted from it, if producible by the natural decomposition of animal substances.

Putrid human excrement seems equally incapable of producing fever. A night-man, who had been extensively employed for thirty years in this metropolis, assured me, that though his laborers frequently fell into asphyxia, or "died off," as he called it, they had always recovered on being brought into the open air; that no fever had ever ensued from such accidents, nor, as he believed, from this kind of occupation; that sometimes from intemperance, and getting cold, they had feverish indispositions, but not more so than other laborers; and that, when steady and sober, he thought them remarkably healthy; that their eyes were sometimes affected, so as to produce temporary blindness, from which, however, they commonly recovered in a few days; and that this, with asphyxia, were the only disorders to which he considered them particularly liable from the nature of their occupation.

The following extract from a writer on Egypt tends to show that the plague is not produced by animal decomposition:—"There are several writers who sup-

pose the plague proceeds from the canal or calige, which passes through Grand Cairo. It is very true that the remaining matter is horribly corrupted, by the filth thrown in from the adjoining houses, and the great number of necessaries that empty themselves into it, which occasions a most abominable stench for several months of the year, tarnishing in a short time even gold and silver in the houses near it. But in this case also, a corrupt air is naturally commonly supposed to be the cause, which will likewise not agree with the above mentioned observation. At the same time another strong argument may be brought against it, which is founded upon a very long experience, viz.: All the houses of the European merchants in Grand Cairo have, for more than two hundred years, been situated close to this canal or very near it; and neither have these, nor any of the other inhabitants, who live in the same situation, been more affected with diseases than the rest. This is a truth, which all the European physicians, who have for some time resided at Grand Cairo, will confirm."—*John Antes' Observations on Egypt, page 38.*

II.

Strictures on the Diseases of Young Children.—From Lectures delivered at Guy's Hospital,

By Dr. JAMES BLUNDELL.

Medical Diseases of Young Infants.—To investigate and treat those diseases of young infants which fall under the care of the physician, is no agreeable task, for at this early age we are often surrounded with more feeling than

judgment; and as the child cannot speak for itself, its complaints are sometimes involved in much obscurity. In fact, we are often compelled to investigate the complaints of young children much in the same manner as those of animals, by looking to certain external signs; and of these, the following are the principal deserving your attention:—

The diseases of young children frequently exhibit marks upon the skin; the surface of the body, therefore, ought always to be inspected; and, in doing this, you may, at the same time, observe the degree of plumpness or emaciation, as well as the bulk of the abdomen, which is always large in infants. The body may be cooler than natural, and is frequently warmer; this heat showing itself in the hands, feet, and mouth, and head more especially; do not, therefore, neglect to inquire into the temperature of the child. Croup, hooping cough, measles, gastric cough, thoracic inflammations, and so on, of course affect the breathing, and to the action of the lungs and thorax, therefore, our attention should, in all cases, be directed. In convulsive affections, the scalp is hot, the fontanels beat more forcibly than the radial artery, even the hair sometimes grows very fast, and the head sweats. Inquire into all these points. In chylopoietic and cerebral affections, so common in children, the number and character of the stools change, and vomiting is occasionally produced. Infantile vomiting is of less importance than the vomiting of the adult; and, it should be observed, that the rejection of coagulated milk, is no proof of gastric disease; for coagulation is

one of the first effects produced by the healthy digestive juice. The actions of young children ought not to pass unnoticed. They raise the knees to the abdomen, when affected with colic; put the fingers in the mouth, when teething; pick the nostrils (when older) in worms or analogous affections; and when disposed to cephalic diseases, they may roll the head on the pillow, or frequently apply the hand to it. In young children, I pay but little attention to the pulse; even in health, it is nearly twice as frequent as in the adult; at birth, about 140; at the end of the first year, 120; of the second, 110; of the third and fourth years, about 96; in the seventh, about 86; in manhood, various, from 70 to 80 in the minute; and, in old age, sometimes as low as 60. When investigating infantile diseases, do not lose sight of the gums.

In young infants, opiates must be given with great caution; for though some, under convulsive and bowel affections, bear anodynes very well, there is always a fear of an overdose; from half a drachm to a drachm of good syrup of poppies, (not treacle and laudanum,) or two drops of the tincture of opium, are a full daily quantity for an infant within the month. Negligent assistants ought not to be employed to measure out the preparation; infants have sometimes been killed by overdoses; and still more frequently they have become drowsy, so as to neglect the breast and food for hours together, to their great detriment in bowel complaints. It is to be regretted that poppy syrup, so useful in children, varies so much in its strength and quality.

Leeches sometimes draw from

young children more than intended; and one leech may be too much when a child is much reduced. Dr. O'Berne, formerly of Chillington in Devon, asserts that, like the horse of Baron Munchausen, if the hinder end of the leech be cut away, it will draw more copiously, being a sort of living pump, which gives off at one extremity what it absorbs at the other. When leeches are placed over bony surfaces, the bleeding, (if necessary,) may be more easily restrained by pressure; and the hand, sternum, and cranium, are convenient places for their application. Besides compression and lunar caustic, a useful help for stopping the bleeding from the leech-orifices, is a small portion of clean sponge, easily passed down by means of a probe into the cellular web under the skin, where the bleeding vessels are situated. To Mr. Franks, one of my pupils, I was indebted for this fact. Infants are best bled from the external jugular vein, particularly in head affections; and when the blood can be drawn in this manner, we know precisely the measure. What quantities may be safely drawn at once, must be determined by circumstances; but the following tabular statement of quantities of blood which I have taken away myself, at different ages, may, perhaps, be of some use to you:—

From a child of	oz.	oz. aver.
2 months old, from	1 to	$1\frac{1}{3}$
4 months . . .	$1\frac{1}{2}$ to	2
8 months . . .	2 to	3
12 months . . .	3 to	4
18 months . . .	4 to	5
3 years . . .	8 to	10
6 years . . .	10 to	12

For some of the facts on which this table is grounded, I am in-

debted to my friend, Mr. Edwards.

Beware of blistering infants, especially with eruptive diseases; if a child is under three years of age, you ought not to leave a blister on the skin for more than three hours together, without well considering what you are about. After removal of the blister, vesication will, I believe, generally ensue. Blisters, large and acrid, and of long application, are, it is to be feared, very apt to produce sloughing and death. Dreadful cases of this kind have now and then been brought under my notice.

The infantile diseases, like those of the adult, arise from causes exceedingly various; but, in most cases, irritability, acid acrimony, and errors in diet, have much to do in producing or modifying them. Children sometimes become gross and ailing because they are supplied too copiously with breast-milk; but far more frequently they suffer, because for human milk other food is substituted; marasmus and diarrhœa being the consequence. Children there are, and many, which thrive wonderfully upon pap; but some, and not a few, after two or three weeks' trial more especially, are found unfit for artificial food, and to them other food than the breast-milk is poison. Arsenic itself, though of more rapid operation, can scarcely produce more terrible effects than spoon-meat in such cases; excoriations of the bowels,—tormina,—diarrhœa,—death, not to mention dissolution from mere wasting. The rapidity with which children are brought back from death's door, under the use of the breast-milk, is, in some cases, very striking, and is a fur-

ther proof of its congeniality. So important is this aliment in these constitutions, that the milk should be drawn from a woman's breast, and given with the spoon or bottle, if the infant be too weak to suck. Within the first one or two months especially, no infant ought wantonly to be put upon spoon-meat. When there is purging, wasting, or cephalic affection, our first inquiry should always be, "What is the diet of this child?" If there is a wet-nurse, examine the evacuations, for when the breast is deficient, hirelings will sometimes clandestinely administer other food than the milk, nor can they be brought to confess it. All this is very shameful, no doubt. The nurse ought to be immaculate; or if otherwise, she ought to accuse herself; only look at the excellent examples, which she sees every week-day, and the orthodox and edifying advice which she receives every Sunday. Pity it is that our intimate acquaintance and bosom counsellor should be a great rogue; but so thou art, poor human nature! Ah! that *pomum adami*, we may always feel it in the throat!

I can hardly acquiesce in the opinion of those who maintain, that the evacuations of infants are naturally ascenscent; and certainly in health, the marks of acidity are at most very faint. Infantile evacuations, when natural, have much of the odor of new milk, and are of bright yellow tint. In some cases, however, these discharges become as sour as vinegar, and as green as this cloth, especially if breast-milk be denied; and cephalic or bowel-disease may be the result or the concomitant; it is always proper, therefore, in these affections, to

examine the evacuations generally, and more especially their acidity, giving antacids if necessary,—chalk if you wish to shut, magnesia if you wish to open, ammoniacal preparations if you wish to stimulate the older children, and carbonate of soda if you desire a remedy of powerful antacid operation.

“Varium et mutabile semper” —“pleased with a feather, tickled with a straw”—“genus irritabile vatum.” There is a great similarity between the nervous habits of women and children, and poets; and in all, much, and frequent, and various commotion is produced by small causes,—words, and looks, and accents, and a thousand other baubles; children, therefore, and those resembling them in nerves, become miserably obnoxious to nervous diseases. The proportion of the nervous system to the rest of the body is greater in the infant than in the adult. The cerebral vessels of the infant are much more prone to increased action than those of the healthy man; there appears, in earlier life, to subsist in the cerebral vessels, something of that irritability which is afterwards found in the mammaries and the pudendal. To these two causes, joined with a greater liveliness of the cerebral structure, the nervous temperament may, perhaps, be attributed; and in all cephalic and bowel diseases, therefore, great attention should be paid to the head, to its refrigeration, I mean, and the prevention or relief of the increased action of the vessels. Hence vegetable diet, leeching from the temples, bleeding from the jugular vein, evaporating lotions, and la douche; nor must anodynes be

neglected, nor the removal of irritants, particularly in the gums of older children.

The *strophulus intertinctus* is well represented in Bateman's plates, and is so common and gentle that it excites but little attention; cutaneous patches, of a red color, of an area varying between that of a split pea and a silver penny, constitute its principal character; in a few days the disease always ceases spontaneously. Do not confound it with measles. As there are no catarrhal symptoms nor febrile, and as the eruptions differ, the two affections are easily distinguished: look at Bateman's plate.—Nurses call the disease the red-gum. In the severer varieties there is a minute articular elevation in the centre of the red patch.

Cullen treats of the *icterus neophytorum* as if it were a very formidable disease; and cases with fatal organic disease of the liver may, perhaps, now and then occur. In infants, however, jaundice is never scarcely a dangerous disease, and it is of very frequent occurrence. Surely Haller is wrong in supposing that jaundice is produced in the infant by a clot of milk closing the *D. communis choledochus*; for when the skin is yellow, often the bile from the bowels is very abundant. The real cause of the *icterus* seems to be a redundancy of the bile under which a gorge and consequent absorption and reflux, are both of them produced in the same manner, as if obstruction existed in the passages. In a few days the yellowness vanishes: a tea-spoonful of castor oil may be given.

Flatulent colic is common in infants, especially if they are being poisoned by spoon-meat. Give

the breast-milk; change the nurse if the milk disâgree. Dillseed water, and friction of the abdomen, are good carminatives. *Cantando rumpitur anguis*. Nurses fancy that a lullaby is of use on these occasions; it may soothe the nerves, and is not, perhaps, altogether without its efficacy. A fit of anger, or some other nervous commotion in the nurse may, perhaps, produce this disease; it alters the quality of the milk.

Hundreds of children are yearly carried off by *cerebral affections, convulsions, hydrocephalus*, or a mixture of the two. In some infants the convulsions become chronic, but far more frequently they are acute, of a few days or a few hours' standing. During the fit, the child is insensible; dragged about by spasms, with fixing, or staring, or partial closure of the eyes, and distortion of the features, which darken, and assume an ashy tint. The fontanel often throbs, and the scalp may be hot. There is evident analogy between these infant fits, and those of puerperal women. A single paroxysm may destroy, but more generally not so. When the child, in slumbering, is twitched gently, and smiles, and half discloses the eyes, and looks very charming—with rosy cheeks and brightened eyeballs, and a mind more active than ordinary, convulsions may be apprehended. These smaller symptoms are called inward fits. Our predecessors, besotted with superstition, always prone to ascribe nervous affections to demoniacal agencies, took it into their heads, that infants, when dosing, smiling convulsively, and starting, were holding converse with some airy being, charmed with their tender graces, and that the con-

vulsions which followed were occasioned by a desperate struggle to escape from his grasp. This explained why children, the most forward and beautiful, as before observed, are most liable to this disease. There is a very pretty catch, called the *Erl King*, which turns entirely on this piece of foolery. Evening is often the apparent cause of the cephalic affections in children, and to this, as the song runs, the infant is exposed. The reign of imagination is likely to cease, when that of knowledge is established, and then—the dull realities of life and feelings, like those of five-and-forty. The real cause of the beauty, the brilliancy, the precocity, the dissolution of the child, is the press of the blood towards the brain, and perhaps of the teeth towards the gums. This gives glow to the cheek and splendor to the eye, and activity to the intellect, and death to the mother's hopes. Among the lower classes of the South of Europe, if I am rightly informed, nothing alarms the mother more than the commendation of her infant's beauty. The dread of Nemesis seems still to prevail even in Christian Italy, and such praise is supposed, in some unknown manner, to exert malignant influence. I have myself more than once been told with tears, that just before the fit some friend had been remarking, "how pretty the child looks;" but enough of this. Tumors, effused water, effused blood, and accumulation, and hurried circulation in the cerebral vessels, appear to be, in most instances, among the more immediate causes of this disease; and of these causes, congestion and aqueous effusion are the most

frequent. Blood is, I believe, rarely poured out, and tumors are uncommon. All these causes, *perhaps*, operate by pressure, but I doubt. Full diet, damp air, irritation in the primæ viæ, dentition, hooping cough, measles, and other acute diseases, are the more common remoter causes, and the convulsive and hydrocephalic affections may arise without any very obvious excitement. The evacuations are generally knotty, mucous, serous, and green. Scrofulous constitutions appear to be especially prone to the disease.

(To be continued.)

III.

On the Secale Cornutum.

By GIDEON MANTELL, Esq. F.R.S.

To the Editors of the London Medical Gazette.

GENTLEMEN,

Although the publications of Dr. Neale and Mr. Mitchell have directed the attention of the profession to the use of ergot of rye, in protracted parturition, yet as this remedy, like every new one, will have many prejudices to encounter before it is allowed a place in the materia medica of the accoucheur, I beg to lay before your readers a brief statement of my experience of its effects, in the hope of inducing other practitioners to give it a fair and immediate trial.

During the last three months I have administered the ergot either in powder or in the form of tincture in about thirty cases, and the following is the result of my observations.

1. The *secale cornutum* has, in no instance, produced any alarming symptom; the powder

was a most effectual preparation in doses of from ten to thirty grains. The tincture was best adapted for a delicate stomach.

2. It never failed to excite uterine action, and, with the exception of two cases, expedite delivery. In twenty-three cases strong expulsive pains were induced in from ten to twenty minutes after its exhibition, and the labors terminated favorably in a period varying from a few minutes to an hour and a half. All these were protracted labors, in which the pains were either very slight and ineffectual, or had entirely ceased when the ergot was given; so that no doubt could exist of the efficacy of the remedy.

3. In plethoric habits, when the pains were frequent but unavailing, venesection was found necessary before the administration of the ergot.

4. In a case where much constitutional irritability prevailed, the medicine occasioned the most excruciating pains, apparently without expediting delivery; in other cases of this kind, a large dose of laudanum was administered, and when the pains had entirely subsided the ergot was given, and produced the happiest effects.

5. In abortions where the placenta was retained, the ergot checked the hæmorrhage and occasioned the expulsion of the after-birth: in these cases from ten to fifteen grains of the powder were given, and repeated according to the urgency of the symptoms.

In short, gentlemen, limited as my experience has been of the effects of the ergot, I cannot hesitate to express my conviction that this medicine possesses all

the properties that have been ascribed to it by its warmest advocates, and will be found, if administered with due precaution, one of the most valuable agents the accoucheur can possess.

Having some time since observed, in a contemporary medical journal, remarks from several correspondents on the most effectual means of suppressing uterine hæmorrhage after delivery, I would beg to offer to the *inexperienced* accoucheur a few observations on this important subject. In cases of uterine hæmorrhage the usual practice of removing the placenta with one hand, while firm pressure is made on the abdomen with the other, and the uterus grasped, as it were, till it contracts upon, and expels the hand introduced, the immediate application of a cloth, or bandage, round the body, and, when required, the free application of napkins, wet with cold water and vinegar, have, with but two exceptions, been the only means I have found necessary to employ in upwards of two thousand cases. In the instances alluded to, passive hæmorrhage continuing after the removal of the placenta, the vagina was plugged with pieces of soft napkins, and both the patients recovered. Nothing has appeared to me to be so effectual in the prevention of hæmorrhage and syncope as the simple expedient of having, at the commencement of labor, a cloth, or napkin, pinned or tied round the abdomen, so as to afford moderate support. *This should be tightened when the child is born, and firmly secured so soon as the placenta is expelled:* and I would strongly recommend the medical attendant to apply the bandage himself, and not leave it to the nurse. The practitioner

has now a most powerful remedy in the *secale cornutum*: whenever hæmorrhage is threatened after the removal of the placenta, a moderate dose should be given;—under any circumstances it can do no harm.

IV.

SELECTIONS FROM FOREIGN JOURNALS.

Pathology of Dyspepsia.

1. WE have reason to believe that the muscular action of the stomach may be deficient, so that the alimentary matters remaining in it too long, are imperfectly changed, and pass into chemical decompositions.

2. There may be a deficiency of the intestinal action, interfering with the second stage of digestion, and giving rise to imperfect chylicification.

3. The fluids may be deficient in quantity, or morbid in quality, so as to derange the process in various ways. We see in certain cases a fluid brought up in large quantities, in a morbidly tenacious state, quite different from the healthy appearance of the fluids of the stomach; and we have reason to believe that similar changes may take place in the other fluids concerned in digestion.

If the mucous membrane be morbidly irritable, the muscular coat will probably be too easily excited to action. If this occur in the stomach, the articles will not be allowed to remain a sufficient time for digestion; but after producing uneasiness, they will either be rejected by vomiting, or propelled in a half-digested state into the intestine. If the irritability occur in the intestine, the articles may undergo their proper change in the stomach, but will be propelled too rapidly through the intestinal canal, without time being afforded for the complete process of healthy chylicification.

The following rules, although containing nothing of absolute novelty, are important:—

I. It appears that the muscular action of the stomach is both more vigorous and more extensive when its contents are in small quantity than when it is much distended; and if we suppose the fluids of the stomach to be secreted in nearly a uniform quantity, their action must also be greatly regulated by the quantity of matter which they have to act upon; hence the indispensable importance in dyspeptic cases of restricting the food to such a quantity as the stomach shall be found capable of digesting in a healthy manner. This is unquestionably the first and great principle in the treatment of indigestion; and without invariable attention to it, no other means will be of the smallest avail.

II. It appears that various articles of food are of various degrees of solubility in the stomach. When, therefore, digestion is apt to be easily impaired, it will be of the greatest importance not only to avoid articles which are of difficult solution, but also to avoid mixing various articles which are of different degrees of solubility. Attention to this rule will probably favor in a great measure the process of chymification going on in a regular and healthy manner, by avoiding a state in which the solution of one article may be more advanced than that of another. The articles of most easy solution appear to be solid animal food, and white fish, both plainly dressed; vegetables are less soluble; and among the articles of more difficult solution, appear to be fatty substances, tendinous and cartilaginous parts, concrete albumen, the epidermis of fruits, and, according to some, mucilaginous and sweet vegetables. From some experiments of Sir Astley Cooper, it is supposed that the solubility of animal food is in the order of pork, mutton, veal, and beef. Articles in small pieces are much more speedily dissolved than in larger, the action being more uniform at the circumference of the portion; and hence the importance of careful mastication.

III. If digestion go on more slowly and more imperfectly than in the healthy state, another important rule will be, not to take in additional food until full time has been given for the solution of the former. If the healthy period be four or five hours, the dyspeptic should probably allow six or seven. The injudicious infringement of this rule by a breakfast, a meat lunch, and a dinner, all within the space of seven or eight hours, is too obvious to require a single observation.—*London Medical Gazette.*

Flora Belgica.—The first volume of a work, under this title, has just been published, by two excellent botanists, MM. Le Jeune and Courtois, containing 597 species, arranged according to the Linnæan system, and extending, inclusively, to Pentaudria polygynia.

TO CORRESPONDENTS.

Dr. Brewster's paper on *Abortion* is received, and will appear in the next number.—ED.

WEEKLY REPORT OF DEATHS IN BOSTON,

Ending February 13, at noon.

Feb. 6.	John Bennet,	58 yrs.
7.	Eliza O'Donnel,	6
	Lydia Ellis,	73
	Sarah Carter,	48
	Azariah Dickinson,	77
	Mary E. Barber,	2 1-2
8.	Hannah Foot,	76
	Abel Billings,	50
	Theodore A. Simmons,	10 mo.
	Samuel Winslow,	6 w.
9.	John Hallam,	38 yrs.
10.	Hannah Lambert,	80
	Rebecca Dean,	70
	George M. Frost,	2 1-2
	Thomas Reed,	39
	Franklin Hastings,	2 1-2
	Kendall Pearson,	27
11.	Albert Douglas,	24
	Harriet Prescott,	24
12.	Joseph T. Edmands,	13
13.	John Hill,	2

Apoplexy, 1—convulsions, 1—consumption, 4—dropsy on the brain, 4—intemperance, 1—
inflammation on the lungs, 1—jaundice, 1—
old age, 4—pleurisy, 1—suffocation, 1—un-
known, 2. Males, 13—females, 8. Stillborn,
2. Total, 23.

ADVERTISEMENTS.

CURVED SPINE.

DR. GRIGG informs the Profession that he has lately made a new and important improvement in machines for Diseases of the Spine. From his success in its application, and from the unqualified approbation it has received from the most distinguished Surgeons and Physicians in Boston, New York and Philadelphia, he confidently presents it to public notice.

The benefit attendant on its use convinces him that most of the cases of deformity dependent on curvature of the spine, may be perfectly cured, and many of those which have been considered incurable may by this apparatus be very much relieved. Feb. 3.

Boston, 30 Atkinson Street.

MEDICAL SCHOOL OF MAINE
AT BOWDOIN COLLEGE.

THE Annual Course of Lectures at the Medical School of Maine, will commence at Brunswick on Tuesday, February 24, 1829, and will continue three months.

Theory and Practice of Physic, by JOHN DELAMATTER, M.D., Prof. of Surgery Western Col. Phys. and Surg. N. York. Chemistry and Materia Medica, PARKER CLEVELAND, M.D.

Anatomy and Surgery, JOHN D. WELLS, M.D.

Obstetrics, JAMES MCKEAN, M.D.

Degrees are conferred, after the usual examination, at the close of the Lectures, and at the annual commencement in September.

The Library and Cabinet have received considerable additions, and the Lecture-Rooms have been enlarged, since the last course of Lectures. 4t.

Brunswick, Jan. 1, 1829.

LECTURES ON ANATOMY.

TICKETS of admission to Dr. J. V. C. SMITH'S Evening Lectures on Anatomy, may be obtained at BREWER & BROTHERS, Apothecaries, Washington Street. Feb. 17.

EUROPEAN LEECHES.

RICHARD A. NEWELL, Druggist, 91, Summer Street, has on hand a small lot of EUROPEAN LEECHES, in excellent order, and of very large size, which he will sell at a fair price.

N. B. Leeches applied as usual, or sent to any part of the city. 4t.

Feb. 24.

SURGICAL INSTRUMENTS.

DAVID & JOHN HENSHAW & Co. No. 33, India Street, near the head of Central Wharf, have for sale a very extensive assortment of Surgical Instruments. Gentlemen wishing to purchase will find it to their advantage to call and examine them. Oct. 14.

CASEY'S APPARATUS FOR THE
CURE OF DISTORTED SPINE.

THE Proprietor of the Dormant Balance for the cure of Distorted Spine, gives notice, that he has established an agency in this city, for the convenience of those who may wish to avail themselves of this invention. Physicians having under their care the subjects of this disease, or patients themselves, may have an opportunity of inspecting the apparatus, and examining the testimonials of its efficacy, at Mr. Charles White's, corner of Winter Street. It is recommended, however, that all patients availing themselves of this invention, should do it by the advice, and under the superintendence, of their own physicians, as it is only by medical opinion that the proper subjects of the machine can be determined, or the other proper measures to be made use of in conjunction with it, can be pointed out. The Proprietor expressly disclaims the idea that a cure is to be effected, in any case, by mechanical means alone. This machine has received the approbation of many of the most eminent medical men in this city and New-York. Upon application to the agent, references will be given, and written testimonials exhibited.

All letters, post-paid, addressed to J. Lincoln, No. 27, Fayette Street, will be attended to.

Boston, Feb. 6, 1829.

I.

Facts and Remarks relating to the Influence of decomposing Animal Matter in producing Fevers.

(Continued from p. 24.)

THE facts stated in the two preceding papers are of some importance to the police of large towns.

Wherever considerable bodies of men are collected together, cleanliness is as necessary to health as it is to comfort. The means employed to obtain and preserve it, must be regulated by a knowledge of such facts as we have been calling into notice, and not by prejudices and visionary theories, such as form the basis of the police of a great number of cities, and the consequence of which must be an ill-directed expenditure of the public money. Large sums are appropriated to objects of comparatively small importance, and a disproportionate share is left for those which are great, and indispensable to the security of the public.

Let us apply the facts before stated, and the inferences which may be derived from them legitimately, to some of the objects of the police of large cities.

First, we may consider their application to the interment of dead bodies in the midst of towns.

Nearly all the well authenticated facts which have been stated, appear to justify the belief that burying places in towns are perfectly innocent in producing fevers or other malignant diseases. The case of the cemetery of the Innocens in Paris, taken alone, is quite sufficient to show that malignant fevers are not generated by such causes. At least, we must so consider it, unless we can adduce positive, countervailing facts. That cemetery, consisting of about three acres, received, it appears, six hundred thousand bodies: thirty thousand had been deposited within a short time,—ninety thousand within the life of one man. The soil was filled with, or composed of, an immense mass of animal matter, and this being elevated above the surrounding grounds, pressed in upon the cellars of the vicinity, and filled them with the salts and other combinations arising from animal matter. But, although the neighboring houses were greatly annoyed by the influence of this formidable accumulation, they were not the seats of fevers or other diseases, either common or contagious. When the inconvenience became so great as to require a remedy, then the bodies, in every stage of decomposition,

were taken up and removed, under strong apprehensions of ill consequences. These apprehensions proving to be unfounded, the removal was continued without any peculiar precautions, during summer as well as winter, and no disease either attended or followed this extraordinary disinterment.

This is not a solitary case. Similar occurrences have been noticed in other places, and they are abundantly sufficient to show that there is no ground for the apprehensions that burial grounds cause fevers or other diseases.

There is a mode in which very large collections of putrefying bodies may be mischievous in towns,—this is by contaminating the water of wells. The analysis of the water of large towns shows that a certain quantity of foreign substance, apparently animal and vegetable matter, is found to impregnate and render it impure. What are the principal sources of such impurities? I suppose them to proceed, first, from liquid filth thrown on the surface of the earth; second, from badly constructed drains in the vicinity; third, from neighboring vaults; and, lastly, from burial grounds, where the bodies are deposited in graves, or accumulated in masses in large tombs.

When the deposit of bodies is made in family tombs, it appears to me not only improbable, but nearly impossible that the putrefying mass can so much impregnate the soil as to penetrate by infiltration to springs or wells. If the tombs are placed under churches or other edifices, where the water from rains cannot reach them, there can be no infiltration, and of course no injury to the springs below.

It must be inferred, then, that the contamination of the waters of cities, from cemeteries, in general, if it really exists, is very slight, and certainly less than what proceeds from other causes; that is, from drains, vaults, and house filth.

The case of the cemetery of the Innocens has been considered above to be conclusive, if no positive and satisfactory facts can be adduced on the other side. Such positive facts may exist, but I must confess I have no knowledge of them. During the last yellow fever of New-York, much was said of the fatal effects of the emanations from Trinity Church yard. The same apprehensions arose in regard to the burial grounds in Philadelphia, in the yellow fever of 1798, as already seen in the quotation from Dr. Rush, and the popular feeling, as is usual in such cases, became strongly excited. In conducting investigations of this nature, however, we are not to be influenced by popular prejudice, nor even by the opinion of a few medical men, who have preconceived opinions to support. The question should be, what is the opinion of the medical profession in general, or that portion of it which have experience to observe and judgment to discriminate. I do not recollect that the body of the profession have ever agreed in the admission of fever from a burying ground, in this or any country; and it seems that Dr. Rush, certainly an acute observer, was of an opposite opinion, and probably nearly the whole of the profession in the city in which he lived. Dr. R. believed that the vicinity of the burial grounds was more healthy than other places,

because the air in and about them was less confined. This opinion of his was founded on actual observation, and merits great attention; for it shows that instead of being the sources of disease, the cemeteries are of real utility in cities, by preserving a number of spaces where the air may freely circulate, and where an abundant vegetation may serve to disinfect and purify the atmosphere.

The vegetable growth of burial grounds is indeed little more than the common herbage. Its influence, though not great, is of some value. If to this were added plantations of trees, the burial grounds would certainly be most useful to the public health. In what manner it is that the leaves of trees and plants render the atmosphere salubrious, has not been satisfactorily shown. That they actually change the qualities of air, by absorbing some of its essential or adventitious properties and exhaling into it others, is beyond a doubt. There is, also, much reason to believe that, under ordinary circumstances, a reciprocal and beneficial action is exerted on the atmosphere by the respiration of animals and plants. Trees must be considered, therefore, of great benefit to cities. They should be introduced wherever there is room for them. In public and open cemeteries they should be planted, both for the purpose of purifying the air by their leaves, and of imbibing, by their roots, the substances produced by the decomposition of dead bodies.

In connexion with this subject, we cannot pass over a report which has been circulated through the United States, copied, as it should seem, from a French jour-

nal. In this we are told that among the deputation of French savans lately embarked for Egypt, there is a commission of medical men, whose object is to ascertain the origin of the plague. At the head of this commission is placed M. Pariset, who has distinguished himself by inventing a *new theory* of the origin of the plague. He supposes this disease to be generated from the putrefaction of dead bodies, which, having been buried, are uncovered and brought to the air by the inundations of the Nile. He has been led to the construction of this theory, it is said, by the coincidence of the first appearance of the plague in Egypt, with the change in the practice of embalming for that of interring the bodies of the dead. This wonderful coincidence is, we are told, sufficient to justify M. Pariset in the doctrine that the plague is the offspring of animal decomposition.

To the physicians of this country, the statement of such a doctrine is a sufficient refutation of it. If there are any persons not conversant in medical matters who have been influenced by such a fancy, we refer them to the facts already quoted from different authors, and particularly to that which refers to the putrefying substance thrown into the canal of Cairo; and that in which it appears that officers and soldiers passed and repassed the bodies of the dead near the bay of Aboukir, in the most active putrefaction and the hottest weather, without ill consequence.

As to the fact that bodies are washed out of their graves by the inundation of the Nile, we know nothing; but we do know that it is after the inundation of the Nile

that the whole country is filled with the miasmata from decomposing vegetables, rotted by the moisture of the Nile and the heat of the sun; and we also know that there is no inundation to uncover the dead bodies of the city of Constantinople, and other places, where the plague is continually appearing.

If M. Pariset is the same gentleman who belonged to the French commission sent to Cadiz and Seville, a few years since, to investigate the yellow fever, and who published a splendid quarto volume, with a number of terrifying engravings of this disease, it is to be feared his labors will not bring to light any important phenomena which have escaped the experience of RUSSELL and the sagacity of SENAC.

Let us next proceed to consider the application of the preceding facts to the vaults and drains of cities.

Vaults, constructed as they now are, and thrust into our very houses, by the habits and wants of large towns, are a most serious annoyance to the senses. Their effluvia is so generally experienced, as to afford abundant opportunities for proving that they do not generate fevers. Few persons maintain that they do so, and we shall not waste time in demonstrating the non-existence of a power which is not generally believed in. The harmlessness of such exhalations might be advanced as a proof, on a large scale, of the innocence of decomposing animal substances in causing fevers. We do not, however, consider them as affording any such proof; and not having a particular theory to support, shall not press into our service any facts which do not le-

gitimately belong to it. The contents of vaults are not animal substances; and, although in their chemical composition they are in some respects the same, the state in which their constituents exist is such as to compose a totally different matter.

Although not mischievous in breeding fevers, vaults are pernicious in another way; that is, by corrupting the wells. Their semi-liquid contents, accumulating as they do to a large mass, come at length to exert a considerable pressure on the soil around. Portions of liquids are, in consequence, forced into the neighboring earth; and when, as often happens, they are near to wells, they enter them, and impair the purity of, or in some instances wholly spoil the water. This may be prevented, as I am told by a medical friend, by additional boxing and curbing the well to the depth of about twenty feet.*

* The water of a large part of our wells is not the best qualified for use. The impurity introduced by animal and vegetable matters is generally slight, and may be removed by boiling. A more important impurity is that from the multitude of saline substances taken up in the passage of water through the earth, and which render it hard or brackish. Such water is always improper, and sometimes very injurious in complaints of the digestive and urinary organs. Clear rain water, and that of the aqueduct from Jamaica pond, is more conducive to health and better for cookery. A copious supply of good water would greatly improve the health of the citizens of Boston. In defect of this, every one who builds a house for his own use, should construct as large and deep a rain-water cistern as he can obtain; and he must take care to have it supplied from the higher parts of his edifices, and avoid that from low sheds and outhouses. In this way he may command an invaluable supply of the most wholesome water. Many persons object to the use of rain water as uncleanly; its cleanliness depends, however, on the manner

This improvement will not, however, be generally resorted to by those who build on speculation, and we must therefore seek some other remedy. Such a remedy may be found; one of general and easy application, which I shall presently indicate.

Common sewers and drains, or subterraneous passages for conveying away liquid filth, are of great importance in a crowded population. In Rome and some other European cities, these excavations are of such magnitude as to give passage to a cart and horses. Some of the cities of this country are well drained, while others are surprisingly neglected. In the city of New-York, the whole atmosphere is impregnated, in hot weather, with effluvia from house filth, thrown on the surface of the earth and stagnating in yards and streets. Such an atmosphere is very uncomfortable and may predispose to fever. That from this cause the yellow fever has ever been generated, I am not prepared to say.

Boston is tolerably well drained. Nature has given it advantages for carrying off its liquid filth which all cities do not possess. Many of the common sewers, and nearly all the house drains are, however, wretchedly con-

structed. They are composed of a channel between two rows of bricks, placed on a board and covered by uneven slates and shavings of wood. Liquids, of course, are not confined in this passage. They exude from its sides, penetrate the surrounding soil, and make their way into wells, cisterns, and cellars. Often we find a well is to be newly dug to get rid of a source of impurity, which might be expelled at a cheaper rate by building a good drain. Within a few years, a great improvement has been made by substituting the cylindrical brick sewer, which is impervious and durable.

These drains are used for conveying the washings of houses only. There is another important use to which they should also be applied,—the draining of the fluids of vaults. It has been already shown that these fluids make so great pressure as to force the walls which contain them, contaminate the surrounding earth, and sometimes find a course to neighboring wells. There is no mode in which this can so easily be remedied as by making a passage from the vault to the nearest drain. There should, I conceive, be an ordinance of the police, that every vault hereafter built should have an aperture, covered by a proper strainer, placed at a certain height from its bottom, and communicating with a drain in such a way as to carry off all the fluids deposited there into the common sewer. This plan would have three important advantages. First, it would prevent these fluids from entering the wells; second, it would lessen the effluvia, by conveying away the liquid and more volatile contents, and keep-

in which it is received and preserved. These individuals should recollect that the spring water is nothing more than the rains percolated through the earth; and their prejudices, perhaps, may be further diminished, by knowing that many cities, even in warm latitudes, are supplied wholly from this source. The prejudice against soft water, or, in other words, pure water, is so great in Boston, that I have repeatedly known a spring of the purest and softest water wholly deserted for another in its vicinity, which "had more taste," or, in other words, was brackish.

ing the mass more distant from the surface of the earth; third, this would make it unnecessary to clear out these places frequently, and thus the city would be saved a great expense, and the senses of the inhabitants a horrible and frequent nuisance.

Should it be apprehended that a communication with the vaults would *contaminate* the *common sewers*, a consideration of the facts before stated will wholly remove the ground of that apprehension. The house-washings, containing vegetable matters, are far more dangerous to health than the contents of vaults. Even there is reason to believe that, so far from contaminating the sewers, the liquids from vaults diminish their bad qualities. Probably they, in some degree, decompose the vegetable miasmata. However this may be, it is a fact which I hold from the most intelligent and observing inspectors of the common sewers, that where the fluids from vaults have mingled with the ordinary contents of these receptacles, the effluvia, on cleaning them, is less offensive to the smell than usual.

Vegetable and animal substances of a solid nature are, in Boston, placed in temporary receptacles and carried away in carts. This is the only mode in which they can be disposed of; but the temporary receptacle should be of a form and construction regulated by the police, and the vehicles should be kept in a more cleanly state than has been usual; for the annoyance produced by them has been greater than that from any other nuisance to which the citizens are exposed.

The street dirt, in a northern city, and one in which the streets

are so much inclined as in Boston, is of little importance to health. For the sake of comfort, the streets should be sometimes swept, and the carcasses of dead animals should be daily removed; but that excessive sweeping, which leaves the pavements unsupported and endangers the limbs of the good citizens and their horses, is neither necessary nor proper.

As these remarks are intended to aid in promoting the public health in Boston, it would, perhaps, not be thought irrelevant to advert to two topics, closely connected with the subject; first, the effect of the vegetable miasmata about the city on the health of the citizens, and, second, the quarantine laws for preventing the introduction of contagious diseases. To consider these subjects with the attention their importance might demand, would too much prolong these remarks. In regard to the first, I will say a few words only.

The malignant epidemic fever, called yellow fever, which has occasionally shown itself in Boston to a limited extent, is caused by the *miasmata arising from the decomposition of vegetable matters*. These miasmata have been generated in a particular district only. Why they have not existed in other quarters, I will not undertake to say. Probably it is in this district only that the necessary degree of *heat*, combined with *moisture* and the *proper material*, is found to exist. I advert to this subject principally in order to state, that if a new street were made on the outside of the marshes or flats of the district where this disease has always appeared, and near to the sea-channel, the cause

of the yellow fever in Boston would probably be removed.

As to the quarantine laws, it is, I believe, generally agreed on by the medical profession, that in this country and in Europe they are based on false principles; of course, are more likely to produce than to prevent disease; and that they are a vexatious and useless interference with the interests of commerce. When the police of large cities shall be governed by enlightened observation instead of popular prejudice, the quarantine system will be revised, rendered more efficient, and less onerous.* There is, I suspect,

* The following is one instance of the unfavorable operation of the quarantine laws.

The summer of the year 1819 was hot, and some appearances of malignant fever in Boston, in the month of July, excited alarm. In the course of this month, arrived the ship *Ten Brothers*, from Africa, by the way of the West Indies, with a cargo composed of Coffee and other articles. Part of the coffee escaped its enclosures, and being acted on by the moisture in the hold of the ship, became offensive. In this condition, the vessel was made to perform quarantine the usual term in a burning July sun. The law, having been satisfied, the ship was allowed to enter Boston harbor; and measures were immediately taken to free her of the offensive bilge-water and putrid vegetable substances mixed with it.

Nearly all the persons who went on board that ship after the putrid substances were disturbed, were attacked by malignant fever, and to the number of ten or twelve died in from three to five days. Some died in Boston; two in Charlestown, near Boston; one in Portsmouth, sixty miles from Boston; one in Portland, a hundred miles from Boston, and one on Cape Cod. None of them communicated the disease to other persons.

Had the apprehensions in regard to this ship been directed, not to any supposed infection contained in her, but to that vegetable corruption with which she was charged, the evil would probably have been removed early enough to prevent the production of those fatal malignant fevers.

no place where a greater improvement in this department has been effected than in Boston.

The opinions expressed in this paper will, I hope, be found to rest, as they should do, on facts; and to be supported by the experience of my professional brethren. If they were the doctrines or the theories of an individual only, they would not and ought not to have that influence in public improvements, which otherwise they might be expected to do. Should a difference of opinion exist on any important point, I hope these remarks may have the effect to bring it forth; to exhibit the results of greater experience and sagacity, and thus to aid me in attaining the objects I have had in view,—the removal of prejudices and the promotion of the public health and comfort.

J. C. W.

II.

Cases of Abortion.

Communicated for the Boston Medical and Surgical Journal,

By Dr. WM. A. BREWSTER.

Mrs. ——— suffered an abortion Aug. 27th, 1826, at the close of the second month of gestation. She had very slight hemorrhage, and in about a week rode two miles in a chaise and returned at evening. She retired to rest, and was awakened from sleep by profuse hemorrhage from the uterus. She was pale, faint, and pulse almost imperceptible. Large cloths, dipped in cold vinegar and water, were immediately applied to the abdomen, which soon checked the flow of blood. Coagula were formed, plugging the os uteri, which restrained the hemor-

rhage until they were discharged, when the flooding was renewed. She continued in this alarming state for about seven days, without the true cause of the hemorrhage having been suspected. It was ascribed to riding too soon, before the bloodvessels of the uterus had regained their tone. But at length a coagulum protruded the external orifice, of more than ordinary size and density. A putrid smell being perceived, led us to suspect a retention of the placenta being the cause of the flooding. The mass that filled the os uteri was removed, and to our great satisfaction the hemorrhage ceased. It proved to be the placenta, which we supposed had been expelled with coagula at the time of abortion. The above case shows the necessity of careful examinations of the discharges after abortions, and of the importance of rest until the placenta is expelled.

CASE II. shows the effect of Sac: Saturni in curing uterine hemorrhage.

Mrs. — had an abortion before the end of the second month, which took place June 28th, 1827. The discharge of blood was moderate, and the placenta was retained. Manual assistance was of no avail, for it could not be reached. Frequent discharges of blood occurred, which were very alarming to the patient, although not very profuse. In about eight or ten days, the placenta was thrown off by the efforts of the uterus. Blood still continued to flow from the uterus at intervals, and sometimes a constant stillicidium for a considerable length of time. The patient was confined to a recumbent posture,

expecting the discharge, which was supposed to be of a lochial nature, to cease. But in this we were disappointed; and after waiting a reasonable time, administered calomel, sulphate of copper, alum, kino, and, by advice of a neighboring physician, tinct. canth. But my patient was still kept in a state of debility by frequent discharges of blood. I then administered sac. sat., 2 to 3 grs., ipecac., 1 gr.; opii, $\frac{1}{2}$ gr.; every six hours. This remedy soon had the effect of stopping the hemorrhage, and my patient convalesced.

CASE III. is noticed to manifest the effect of Ergot and Ens Veneris on a case of retention of the placenta, which occurred June, 1828.

In this case, the abortion occurred in the fourth month, the foetus was expelled without profuse hemorrhage, and the placenta retained. The attending physician told the patient that the placenta was detached, and that a cathartic would cause its expulsion. The cathartic was taken, but the placenta was not thrown off. On the fourth day I was called, and on examination, found the os uteri to admit only one finger, and that the placenta could not be felt. There was no hemorrhage, but a violent oppression and spasmodic pain at the stomach. Opium, in large doses, gave relief. Another cathartic was administered, and stimulating glysters, but without any effect as to removing the placenta. A subsequent examination showed that the os uteri was enlarged, and the placenta could be felt, but appeared adherent and could not be removed. Ergot was administered, in as large doses as

the stomach could bear, for forty-eight hours, without causing any uterine pains or any perceptible effect on the placenta. I then directed *ens veneris, ferum ammoniacale*, in teaspoonful doses, every six hours, to be taken in infusion of tansy. Uterine contraction was soon perceived by the patient, and on the second day the expulsion of the placenta took place.

Hampton, Conn., Feb., 1829.

III.

A Case of Idiocy following Epilepsy, with the Appearances on Examination after Death.

Communicated for the Boston Medical and Surgical Journal.

J. M. B. had been subject to epileptic convulsions from his birth to the time of his death, a period of about twenty-two years. Sometimes he would have several fits in the course of twenty-four hours; at other times, he would go nearly a month without an attack. His stature was about four feet only, and his body and limbs were small in proportion, excepting his hands and organs of generation, which were as large as of a man of full size. When calm and not provoked, (for he was easily excited to violent passion,) his countenance and figure, while standing up, exhibited most perfect idiocy. His knees partially bent, his toes inclining inwards, his shoulders protruding forwards, his head and face a little turned to the right side, with a pouting lip and tongue lolling from his mouth,—all contributed to give the idea that mental capacity was wanting. In fact, his mind was exceedingly imbecile; though at times he would display a degree of cunning

such as could hardly be reconciled with his usual impotence. The marks of puberty appeared as early and as fully as usual, and he frequently exhibited great desire to gratify the sexual appetite. A few weeks before his death, he began to show signs of uncommon weakness, though without any increased frequency of the fits, which were soon followed by apparent great internal distress. He was unable to tell whence his uneasiness proceeded, yet it was evident from a continued wringing and twisting of his body, and his frequent loud groans. This state continued for a few days, when his limbs became cold and his lips purple, and he gradually sunk without convulsions. He became blind a short time before death.

Post-mortem Examination, fifty hours after death.—The head only was examined. External appearance, nothing unnatural, except its size, which was quite small. Internally, the dura mater was thought to adhere, with uncommon firmness, to the cranial bones. External appearance of the brain itself quite natural; but upon slicing the cerebrum, it was found much harder, or of much greater consistence than common, and that the medullary bore a far less proportion to the cineritious matter than is usual in sound brains. The septum lucidum had the appearance, and almost the consistence of cartilage. The lateral ventricle, on the right side, was natural, excepting, perhaps, it contained more water than is usual; but in tracing the posterior horn of the left lateral ventricle, at its extremity a hole was discovered, large enough to admit the end of the finger, which communicat-

ed with a membranous sac, of about the size of an English walnut, and which was filled with water. When the sac was pressed, the water passed freely into the ventricle. At its most extreme portion, that, viz., which was the posterior termination of the left hemisphere, the membranes of the brain only remained, and formed the sac in that portion of it, the substance of the brain there having entirely disappeared.

IV.

On Inflammation of the Placenta.

By S. J. STRATFORD, Surgeon.

THAT inflammation of the placenta will sometimes occur is, I believe, now placed beyond all doubt: the symptoms, and more especially the consequences, do not appear to be fully understood: perhaps, however, the circumstances attending the following cases may tend in some degree to illustrate them.

About the middle of June, 1828, I was called to Mrs. C. who believed herself in about the third month of pregnancy. She had been attacked with pain in the back, extending down the thighs; it had come on gradually, and was attended with symptoms of fever; such as a quick pulse, sickness at stomach, constipation, &c. These symptoms increased; she was attacked with cold shivers, and discharge of blood from the uterus: this and the pains increased; and after a short time an ovum was discharged, with its membranes, placenta, &c. The pains now somewhat subsided; so also did the hæmorrhage; but there was a degree of tenderness experienced upon pressure just above the

symphysis pubis. This, however, subsided after the administration of some purgative, and sudorific medicines.

Upon examining the ovum I found that the fœtus and all its appendages were present. The placenta was large, soft, and spongy; its surface covered with flakes of coagulable lymph: these were particularly marked upon its inner surface, while some were loose, and easily detached. The fœtal membranes I thought somewhat thicker than usual, and more opaque; the liquor amnii contained small portions of lymph floating in it. The umbilical cord was swelled; and the whole cellular tissue of the fœtus was loaded with a thin serous fluid; in some parts to the extent as almost to render it transparent.

Reflecting upon this case, I am led to conclude that inflammation of the placenta is sometimes a cause of abortion, and that the effects of inflammatory action in this membrane are similar to those which evince themselves in the other animal tissues. The disease appears in some degree to have extended to the structure of the uterus; as may be inferred from the pain on pressure, and febrile symptoms; while the effused lymph decidedly points to the part affected. A very curious, and not the less interesting point, is the effusion of serum into the structure of the fœtus—a kind of congenital dropsy, bearing a very considerable analogy to general anasarca caused by disease of the lungs. The similarity in function of the parts tend to convince us, that although it may differ as to the positive situation of its cause, the effects are the same. These conclusions are al-

so supported by a case which occurred to me while a student in London. I had engaged to attend a poor woman at her labor; when I first saw her she believed herself to be in about the seventh month of her pregnancy; she was particularly large, the abdomen being greatly distended. She had long experienced severe pains in the back, which I suspected might arise from the evident distension of the uterus. About a month after I first saw her, I was called to attend her: before I arrived the membranes had broken, and considerable quantities of water were occasionally discharged. The labor proved tedious, but the child was at last expelled; and I confess I was somewhat surprised to find, although alive, it was completely œdematous; its cellular tissue was filled with serum, as in a common dropsy; the distension of this texture was universal; while in all the parts endowed with a lax cellular tissue it was particularly remarkable. The respiration was very short and quick, evidently oppressed, while the whole of the child felt extremely cold. The umbilical cord was also swelled and full of serum, so much so that I found it difficult to restrain the hæmorrhage by the ligature. The child lived about three weeks, during which period a considerable portion of the serum was removed by the absorbents. The skin now was lax, and the countenance appeared shrivelled and ancient, while general debility was particularly marked; and it sunk without presenting indications of any obvious disease. The symptoms which here presented themselves I am now inclined to believe were caused by inflammation of the

placenta; much more chronic, however, than the preceding variety; and the morbid accumulation of the liquor amnii, in all probability, was connected with the existence of the same disease. Some of the symptoms nearly correspond with the description of the compact œdema of infants, as given by M. Leger, and I cannot help suspecting that future experience will confirm the fact, while it will be found that inflammation of the placenta afforded the mechanical obstruction to the foetal circulation which he imagined was a cause of that disease.

 V.

SELECTIONS.

Rupture of the Uterus—Cæsarean Section.

At a meeting of the Medical Society of London, Nov. 17, 1828, Mr. Lord related the case of ruptured uterus, to which he had alluded on the preceding evening. The patient was 36 years of age. At the period when the os uteri was fully dilated, the vagina well lubricated, and a portion of the scalp protruding, all uterine action subsided. Three doses of the secale cornutum were administered, but without producing any marked effect: the parietal bone was felt at the brim of the pelvis. The vectis was used without effect. It was then deemed proper to perforate the head: upon examining, however, previous to this step, it was found that the head had got beyond the reach of the hand, and it was soon seen that all the evidences of a rupture of the uterus were present. Dr. Hopkins saw the patient at this crisis. Upon examination per va-

ginam, the uterus was found permanently contracted, and although the laceration of the organ could be discovered, it was not possible to reach the fœtus, which was lying in the cavity of the abdomen. It was then, in consultation, determined that the Cæsarean operation should be performed. An incision, half an inch distant from the linea alba, and extending to seven inches and a half, was made; the extremities and trunk of the child presented, and the head, in a very enlarged state from hydrocephalic effusion, was found to have been the cause of the protraction of the labor. During the operation not more than a teaspoonful of blood was lost; the placenta was easily detached, and the wound closed in the usual way. The patient expressed herself greatly relieved by the operation. Leeches were applied to the abdomen, and a mild nourishment given. For a time the patient appeared to rally; she had a quiet night; the pulse, however, was rapid; and death took place eight hours after the operation.

Medico-Chirurgical Society, December 9, 1828.

A paper was read "upon the Morbid Affection in young Children, resembling Hydrocephalus, but arising from circumstances of exhaustion," by Dr. Marshall Hall.

About the period of weaning, or from errors in diet, infants are apt to be affected with diarrhœa. This leads to a state of exhaustion; and in some of these cases there arise symptoms resembling those of hydrocephalus. A similar affection occurs in older children in the course of diseases

which have required leeches, purgatives, and other evacuant remedies, which equally induce a state of exhaustion.

In such cases the child dozes, the eyes being half open and unfixed; the conjunctiva is apt to become inflamed from exposure; the pupils are tardily affected by light. The countenance is pallid; the cheeks cool or cold. The unfixed state of the eyes is to be distinguished from strabismus; and the condition of the countenance is to be taken in connexion with the history of the case, in order to establish the diagnosis between this affection and hydrocephalus.

The diagnosis is highly important, for the recovery of the little patient depends entirely upon it. To treat it as hydrocephalus is inevitably to destroy life. Brandy alone can cure.

This affection is by no means rare. It has been slightly described by Dr. Abercrombie in his late work on diseases of the brain; otherwise it appears to have escaped the notice of medical writers. The author describes several interesting cases. The subject is altogether one of great interest and novelty.

Nux Vomica in Chronic Diarrhœa and Intestinal Hemorrhages.

M. Recamier, of the Hôtel Dieu, having learnt that the nux vomica was used in chronic diarrhœa by the practitioners of the north, administered it in the following case, and with success.

A man, fifty years of age, eminently nervous, had been long subject to alternations of bilious diarrhœa and intestinal hemorrhagy, which had reduced him to an alarming state; his lips and coun-

tenance were pallid. Sometimes the bilious flux preceded the hemorrhoidal discharge; at others, the order was reversed. Colombo, semirouba, and powdered charcoal, had been tried without effect. Opium, in the dose of a quarter of a grain, disagreed. One-eighth of a grain of the alcoholic extract of nux vomica was then prescribed. On the following day the stools were reduced from twelve or fifteen to three or four. The dose was then doubled, one-quarter of a grain given, and the patient was speedily cured by this treatment.—*La Clinique.*

Imperforate Anus.

Died at Woodstock, Conn., on the 27th, Ralph Alonzo, infant child of the Rev. Ralph S. Crampton.

The circumstance which occasioned the death of the child, was a peculiar and novel malformation in the inferior part of the pelvis, producing an imperforated anus.

The peculiarity of the case consisted in a tendinous ligament passing laterally across the lower part of the pelvis, about six or eight lines from the sacrum, and about one inch from the anus. To this ligament, the superior and inferior portions of the rectum were perfectly united. The obstruction was discovered about twenty-two hours after birth, by attempting to administer an injection per anum. Surgical aid was immediately procured, and upon examination, the tendinous cord could be felt; but directing the probe either anterior or posterior to this line, it might be introduced a little further up the rectum. Under these circumstances, it was concluded to attempt an opening by an incision: accordingly, a director was introduced, anterior

to the ligament, until it met with resistance; a sharp pointed bistoury was then directed up the groove of the director, and an incision made towards the sacrum. A portion of the meconium was then discharged, with the aid of the director. No motion of the bowels could be produced after the operation, and the child expired in about six hours. Upon examination after death, it was found that the point of the bistoury had passed through the anterior part of the inferior portion of the rectum, (which was extended at the time into the form of a sac, by the point of the director,) in front of the ligament; from thence it passed directly into the superior portion of the rectum, which was extended over the ligament in front by the meconium. Thus, a communication was not only made between the two portions of the rectum, but also with the cavity of the pelvis, producing a general effusion of blood throughout that part of the body.

BOSTON, TUESDAY, MARCH 3, 1829.

Compendium of Operative Midwifery; or, the Manual and Instrumental Operations of Preternatural Labors reduced to the greatest Simplicity; preceded by an Investigation of the Mechanism of Natural Labor. From the French of JULIUS HATIN, Doctor of the Medical Faculty of Paris, &c. &c. By RICHARD TUITE, M. D., formerly President of the Royal Physical Society of Edinburgh, &c. New-York and Boston. C. S. Francis and Munroe & Francis. 1828.

EVERY student of midwifery must have been struck with the elaborate minuteness of detail which characterizes French writers on this subject.

The remark applies especially to labor, the *mechanism* of labor as it is so appropriately termed by them. It hardly seems possible that the fœtus can present in any way, or that there is any portion of it which by any possibility can become the presenting part, which has not been distinctly pointed out by these writers, and the rule of practice laid down with a precision not surpassed in the most mechanical methods. One cannot but be struck, if he be not instructed, by the mathematical accuracy with which the pelvis, the fœtal head, and the mechanism of labor, are described in many of the earlier French authors. It is quite sufficient to refer to Levret and La Motte for confirmation of this remark. The diagrams, with their right lines, circles, and letters of reference, might almost lead you to suppose that a book on geometry had been put in your hands, instead of a humble, practical treatise of midwifery. These remarks are not made to detract from the high value of the works referred to. If studied faithfully, and they can never be understood by the common business of mere *reading*, let the case and the rule be once known, and exactly remembered, and an approximation to the same certainty which characterises much of operative surgery, will belong to midwifery. The work at the head of this notice is strictly French, and it presents in a very convenient form the peculiarities and excellences of the French system. To the student of English midwifery, which is characterised by generalization more than by detail, this work will, much of it, seem very obscure. The whole

language he will find new to him, and he will be led to ask himself, "can *presentations* be so numerous and diverse, and can I ever make them out in actual practice?" To those who have been taught after the system of Baudelocque, which is adopted at least by one of our schools, this work will offer great facilities of reference, and forms a neat, convenient manual. It may be further added, that as some patience, some study, will soon enable all pupils and practitioners to avail themselves of its helps, it is hoped that it will be favorably received by the profession. Some slight errors and inadvertences were marked in the margin as we read the *Compendium*, but as the purpose of this notice is rather recommendation, than criticism, they need not be specified. In a future edition the translator will probably correct them.

The following extract, taken up without particular selection, will give the reader some notion of the work.

General Rules for the application of the Forceps.

1. Whenever the head of the fœtus is placed in a direct* position, you must introduce in the first place the left branch with the left hand, and then the right branch with the right hand.

2. Whenever the head is placed diagonally, you must observe which extremity of its antero-posterior diameter presents forwards. When the occiput or the forehead is in correspondence with the left cotyloid cavity, introduce in the first place the right branch with the right hand, and then the left branch, which must also

* We shall always apply the term direct to those positions in which the occipito-frontal diameter of the head is found in the direction of the antero-posterior diameter of the pelvis.

be introduced by the right hand, for in all the diagonals you must introduce both branches with the same hand.

3. When the occiput or the forehead corresponds to the right cotyloid cavity, first introduce the left branch with the left hand, and then the right branch also with the left hand.

4. The branch ought to be so placed, that the old curve of the blades may correspond by their convexity to the concavity of the pelvis, and by their concavity to the convexity of the head.

The new curve ought to correspond by its concavity to the pubis, and by its convexity to the sacrum.

5. The hand which is free ought always to serve as a guide to the branches, and to be directed backwards towards the sacro-iliac symphysis; it ought likewise to be placed between the womb and the head, when the head is still enclosed in the womb, and between the vagina and the head when it has passed through the neck of the womb; in this manner you will most certainly avoid wounding the womb or the vagina.

6. Each branch of the forceps ought to be held, not as you would hold a pen in writing, but with a firmer grasp and with the whole hand, the thumb extended on the external side of the articulation.

7. The forceps ought to be warmed and lubricated by an unctuous substance, to facilitate its introduction.

8. The patient ought to be placed in the same position as for a manual delivery.

9. The accoucheur, when about to introduce the forceps, ought to be placed between the thighs of the woman; he directs the blade in the first place back of the head, and afterwards raises it upon its lateral region by means of the hand introduced into the parts. To raise the blade to the place which it should occupy, he glides his index finger behind its an-

terior cheek, the middle finger behind the posterior cheek, and the thumb under the latter.

10. When the instrument is applied, the accoucheur places himself to the right or left of the handle in the direct position, but constantly behind it in the diagonal position.

11. The hands of the accoucheur, in grasping the forceps when applied, ought to be placed differently in the positions of the superior and inferior straits. At the inferior strait, the hand which grasps the handle ought to be first placed under the instrument, while the other which is near the genitals ought to be placed upon it.

At the superior strait it is the contrary; moreover, the index finger of the hand which is near the genitals ought to be carried up to the head, in order to ascertain if it follow the movements which you are endeavoring to execute with the forceps."

WEEKLY REPORT OF DEATHS IN BOSTON,

Ending February 26, at noon.

Feb. 19.	Adeline E. Hartshorn,	17 mo.
20.	Ezekiel Car,	28 yrs.
	Michael Stone,	41
	John Pilsbury,	17 mo.
	Deborah Tufts,	
21.	Robie A. Butler,	18
	Jos. H. Hill,	15
	Mary Steel,	79 yrs.
	Mary Peirce,	20
	Elizabeth Mitchel,	33
22.	Barnard Hunt,	31
	Edward Strain,	2
	Elthier Holt,	4
	Lydia Petty,	40
	Daniel W. Colby,	6 mo.
23.	Hugh R. Kendall,	64 yrs.
	Son of Jacob Page,	6 w.
24.	Wm. Baker Ingalls,	5 mo.
	Hannah E. Daniels,	5
	Henrietta Keen,	22 yrs.
25.	Susanna Bennet,	54
	Thomas Roddin,	38
	Sarah Burge,	64
	Ann Lovering,	69
	John Clifford,	48
26.	Isaac Ridler,	21
	Samuel Hale Parker,	3
	Amanda Brackett,	

Convulsions, 2—consumption, 6—childbed, 1—debility, 1—inflammation, 1—inflammation in the bowels, 2—inflammation in the brain, 1—infantile, 1—lung fever, 5—old age, 1—palpitation of the heart, 1—sudden, 1—teething, 2—unknown, 2. Males, 14—females, 14. Stillborn, 1. Total, 29.

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

ADVERTISEMENTS.

THE ATHENEUM;

OR

SPIRIT OF THE ENGLISH MAGAZINES.

Embellished with elegant colored Plates of the Female Fashions, Portraits of distinguished Characters, &c., and containing select Pieces of the newest Popular Music.

THIS Publication is intended for those who desire a periodical work which both in its form, and the nature of its contents, is more elegant and durable than the newspapers of the day, without, on the other hand, being confined to the more weighty subjects and elaborate criticisms to which our valuable quarterly journals are devoted. It is the intention of the Editor to unite instruction with amusement, and that those who read for either may obtain it in the Atheneum, from the pens of the most distinguished writers of the age, free from impure admixture, and without having their religious or political creed interfered with.

To those who know the high character of many of the English Magazines, a better idea of the nature of the Atheneum cannot be given than by stating that it contains the *Spirit* of these Magazines and those of Scotland; a preference being given by the Editor, however, to such articles as are best adapted to the American reader. It is thus designed to constitute a work which will unite the vivid sketching, the raciness and vigor of Blackwood, the sprightly and elegant genius, and the literary discrimination of the *New Monthly*, with the qualities of the various other journals of merit. The Poetry with which it is enriched cannot, while the names of the most gifted English poets are on the list of contributors to these Magazines, be otherwise than the best.

On the first of October last the Third Series of the Atheneum was commenced, on an improved plan, with new and handsome type. Since that period, the number published on the 1st of each month has been embellished with a colored plate, containing two whole-length Portrait-figures, representing the latest FEMALE FASHIONS. These are executed on fine paper, in a style highly ornamental

to the work, and are accompanied by full explanations. Other plates are occasionally introduced:—No. 2, of the present volume, is embellished with a Portrait of the late Bishop Heber, and the No. for the 1st of March with one of Thomas Moore, Esq. On the 15th of February, a piece of MUSIC was added, which plan, together with that of the Fashions and other plates, will be continued. The recent increase of its circulation among every class of the reading community, justifies the Publisher in believing that these improvements, combined with the value of its literary department, have rendered the Spirit of the English Magazines a pleasing and useful accession to the LADY'S TOILET, the DRAWING ROOM and the LIBRARY.

The Atheneum is published at 184, Washington Street, Boston, by JOHN COTTON, on the 1st and 15th of every month, each number containing 40 pages, large octavo, and forming two volumes a year of 480 pages each. The price of the work, with the Plates of the Fashions, is six dollars a year; without them, five dollars. It is sent by mail to any part of the United States, enclosed in strong wrappers. Those who wish for the back numbers can be furnished with them.

February 28, 1829.

EUROPEAN LEECHES.

RICHARD A. NEWELL, Druggist, 91, Summer Street, has on hand a small lot of EUROPEAN LEECHES, in excellent order, and of very large size, which he will sell at a fair price.

N. B. Leeches applied as usual, or sent to any part of the city. 4t.

SURGICAL INSTRUMENTS.

DAVID & JOHN HENSHAW & Co. No. 33, India Street, near the head of Central Wharf, have for sale a very extensive assortment of Surgical Instruments. Gentlemen wishing to purchase will find it to their advantage to call and examine them. Oct. 14.

LECTURES ON ANATOMY.

TICKETS of admission to Dr. J. V. C. SMITH'S Evening Lectures on Anatomy, may be obtained at BREWER & BROTHERS, Apothecaries, Washington Street. Feb. 17.

I.

*Collections in Morbid Anatomy.**

No. I.

Communicated for the Boston Medical and Surgical Journal,

By WALTER CHANNING, M.D.

Case of Phthisis Pulmonalis.

J. F., aged 66, presented the following symptoms when first seen, Jan. 19, 1829. It may be premised, that he had been under treatment, immediately previous to this period, for retention of urine, and of which he was now free. He states that he has had some cough and dyspnœa for several years. Four months since, had catarrh, with much expectoration, cough, and dyspnœa,—now no distinct pain in chest, cough very urgent, especially in erect posture; copious expectoration, frothy, mucous; much dyspnœa; respiration laborious, rapid, wheezing; lying on left side increases dyspnœa. Tongue at root covered with thick, brown, dry coat; clean and moist at edges. No appetite; three dejections to-day

from ol. ricini. Pulse 66; skin soft, moist; countenance anxious, emaciated; sleep much interrupted by difficulties in thorax. Eruptions on thorax from antimonial ointment.

20th, 9, A.M. Pulse 72, intermitting; respiration laborious, with much rattling in throat, and often with a groan; very irregularly; more motion in the abdomen than among the ribs.

R. Antim. Tart. gr. i.
Pulv. Opii, gr. vj.
Pulv. Digital. gr. v.
Hyd. Submur. gr. xij. M. fi.
Pil. No. xij.

Two now, and two night and morning.

21st. Not relieved,—symptoms rather increased. Was bled to $\frac{3}{4}$ xij.

23d. Some relief of dyspnœa from bleeding,—blood strongly cupped, ruffled at edges, buffed.

Very little relief at any time subsequently to last report occurred,—the disease became more and more aggravated, and the power to resist lessened. He sunk, and died Feb. 2d.

Examination fifteen hours, post-mortem.—On percussion of thorax, the left side resounded sufficiently well,—the right side well

* Under this head it is proposed to publish, from time to time, such original and selected cases in Morbid Anatomy, as may be interesting and useful to the profession. Communications for this department, as for all others, are requested from our contributors.—Ed.

in front, to fifth or sixth ribs, elsewhere flat.

Upon opening the thorax, from three to four ounces of a reddish yellow serous fluid were found in the left cavity of the pleura.

Left lung every where edematous, holding deep pits on pressure, but crepitating freely,—posterior part less loaded with blood from gravitation than usual,—on incision in some parts, a reddish frothy fluid issued; the color not belonging to the frothy fluid, but arising from the mixture of blood.

Right thorax. Less serous fluid in the cavity of the pleura, than in the left thorax. *Lung*, at its upper and anterior part, much like left lung. This may be called the healthy portion, in comparison, and constituted about one third of the whole lung. On incision, however, this portion was not in so good a state as the left lung; more fluid issued upon incision, and the incised surface was more red, likewise. 1st, in one part, at least, there was some pus, and 2d, in one an indurated, melanose tumor. *Of the pus*, (1) this was thick and pure. It issued from two opposite surfaces upon incision, as if a tube containing pus had been cut across; possibly this was an enlarged bronchial tube, but upon closer examination, no evidence to this point could be obtained. The cavity containing the pus was laid open; in form it was somewhat tubular, but in structure there was nothing distinct. This pus did not contain air globules. The tumor (2) was not encysted, nor regular in form. It was in a great part, but not uniformly, black. The more diseased portion of the lung constituted not more than one quarter part of what was presented to view on

raising the sternum and cartilages; but the posterior and lateral views of the lung showed that about two thirds of the whole was greatly indurated, so as not to crepitate at all. The pleura was red, having membranous adhesions, not strong, to the diaphragm, and partly above, but not much on the posterior part. The upper part of this portion was least diseased; when cut, its surface poured out bloody and somewhat frothy fluid. In approaching the inferior part, the morbid change was greater; and at the lowest part, the incised surface had a smooth, gelatinous appearance, without showing of the natural structure. From this surface, there was not any sudden flow; but on scraping it, a fluid nearly colorless was readily obtained, and a piece laid on the table was greatly altered within an hour, by the gradual escape of the more fluid parts. In various parts of the diseased portion, when divided, pure and thick pus, without air, escaped from tube-like cavities, such as described above. Besides, there were three or four cavities (*vomicæ*?) of a different kind. Two were particularly examined. One would have contained a large pea, at least; the other would have held two hazelnuts of good size. They were ragged cavities, of a dark brown color internally, with distinct, but not thick parietes, and contained a thin, dark fluid, the smell of which was very offensive.

The heart was rather small for the subject. On its upper or interior face were two white patches, from effusion of coagulating lymph under or in the serous coat. Similar appearances were seen more slightly accompanying the

coronary arteries. A great part of its external surface, also, exhibited appearances less common, viz., the appearance of infiltration of, or under the serous coat, of a light dingy, yellow, gelatinous matter. This was not fat, and on being cut into, there issued a very little serous fluid. It was, perhaps, coagulating lymph. Internally the heart was natural, the age of the patient considered. The *aorta* had internally appearances of disease not unusual, and was also somewhat enlarged at its commencement, or near it. The internal change consisted in the deposition under the inner coat of a caseous matter,—a formation of matter like cartilage in some parts, and in one spot a deposition of earthy matter, (ossification). But the largest of the spots diseased was in some measure peculiar or unusual. This spot was flat, about $1\frac{1}{2}$ inch in length, and in its extreme breadth about half an inch. Like the others, it rose into the arterial tube. It was nearly connected with a smaller tumor, under one of the semi-lunar valves, i. e., in the ventricle, but not in communication with its cavity. The larger tumor, when opened, was found, like the others, to contain caseous matter; but in connexion with this, in one part, was a thick, cream-like fluid, not unlike pus. Was this a softening, such as M. Laennec believes to occur in tubercles, or was it analogous to suppuration? The quantity of this matter was one very large drop.

Other morbid changes were, enlargement of the prostate, especially the middle lobe,—inflammation and thickening of the coats of the bladder, so that they had

become nearly half an inch thick, —a hernia of the large intestines, which had dragged down the stomach so that it lay completely up and down in the left side of the abdomen,—gravel in the kidneys, and a stone in the bladder.

II.

Tincture of Iodine in Diseases of the Joints.

AN Essay has lately been published in London, by Mr. Thomas Buchanan, Surgeon, on a new mode of treatment for diseased joints, and the non-union of fracture, &c. The remedy principally relied on by Mr. B. is the *Tincture of Iodine*, made by dissolving one drachm of iodine in three ounces of rectified alcohol. It is applied *externally* to the diseased part, by means of a camel's hair pencil. According to Mr. B., this treatment has been highly successful in a majority of the cases in which he has employed it. The Editors of this Journal have been requested at different times to give some account of the medicines which have recently been introduced into practice. In farther compliance with these requests, they have selected the following from the cases of Mr. Buchanan.

Beside these cases, it was employed in gangrene, enlarged inguinal glands, and fistula in ano, and perineo, and with alleged benefit. Mr. B., it will be perceived, does not rely alone on the tincture. His patients, or some of them, take the blue pill; leeches; cathartics; the dulcamara; rest; and where the disease requires motion, as in some cases of

united fracture, exercise is made part of the treatment. These facts are very important; for, while they do not take away the just claims of any one remedy, whether new or old, to farther trial they place those claims just where they should be placed. It is especially the duty of those medical writers who bring forward new means of treatment, and challenge for them the respectful notice of the profession, that they should tell the whole truth about them; especially should they not conceal, however small they may think it to be, any agency which any other treatment might have had in the cases. In no work is the proof attempted to be more complete of the utility of Iodine in many diseases, than in Manson's on this remedy. But he has very fairly stated what, and all other means employed along with it. Many of these are of acknowledged use in the same diseases, and the iodine obviously did little more than aid in the result. The same qualifications should probably be made of the recommendation of iodine by Mr. Buchanan.

It will be seen that this author recommends the *external* use of the *tincture* of iodine. It is in this, much of the novelty of his plan consists. Heretofore the tincture has been given *internally*, and the form of an ointment has been preferred for its external use.

CASE IV.—A girl, aged 19, had great pain in the joint of the left index finger, extending up the forearm and down to the point of the finger; pain increased by motion; parts slightly discolored, and

matter distinctly felt; grating noise or crepitus perceptible when the joint was moved. The complaint originated about a year before. The tincture of iodine was applied daily to the part affected, and the patient was ordered to take a little blue pill and rhubarb every night. She first applied on the 1st of March; and by the 7th the pain was gone, and the swelling considerably diminished. The matter within the capsular ligament was absorbed: 10th, as the patient persisted in returning to her service, she was discharged. On the 31st she again presented herself, with the part much swollen, from having used the joint too soon. The same remedy was again resorted to; and on the 12th of April the patient was dismissed, cured.

CASE VIII.—The eighth case is that of a bricklayer, aged 24, whose right knee was swollen to above twice the size of the left. The injury was supposed to have arisen from a fall. He had had an abscess in the same knee ever since he was six years of age, until about two months previous to the commencement of the present swelling. The eschars were still visible on the sides of the knee. Before applying to Mr. Buchanan, he had been confined for several days to his room, in expectation that, by rest, the swelling would disappear. The patient was of a fair complexion, skin thin and white; hair reddish, with freckles on the face. Mr. Buchanan being unable to attend the evening when first called, sent the patient six leeches to apply to the knee. On the following day the tumefaction was increasing, and he was no better in any respect. The tincture of iodine was now applied to

the inflamed parts, and an opening mixture prescribed. On the third day the swelling and pain were considerably diminished. On the ninth day the patient was able to go to work; by the twelfth he was perfectly recovered, and the remedy was therefore discontinued. The patient said, that the limb, which was formerly diseased, was now stronger than the other.

CASE IX.—March 19th, 1827. Robert Oliver, aged one year and nine months, was brought to me under the following circumstances: Right hip greatly enlarged, particularly the parts covering, and around the joint; limb shortened; the toes turned inwards, and the leg and thigh of the diseased limb wasted; appetite bad; fæces dark colored, with hectic fever. Hair fair, skin clear, veins seen distinctly. Patient a twin brother, but of rather large stature. Complaint began about six months ago, and during that period the case had been submitted successively to the inspection and treatment of two eminent physicians, and also of two surgeons. Agreeably to their directions, leeches and poultices had been applied, and medicine administered in various forms without affording any relief. One of the physicians refused to prescribe, alleging that medicine was of no use, the child being emaciated with symptoms of hectic fever, could not survive the shock which the system had received.*

* These circumstances are mentioned, not with any view to depreciate the professional character of the gentlemen consulted, they being the most respectable practitioners in the town or neighborhood; but merely to show the deplorable state to which the patient was reduced.

At present there is a large collection of matter forming a conical shaped tumor, rather over the posterior parts of the joint, and apparently ready to burst. The integuments of the central parts of the tumor of a whitish color, similar to that which is usually seen covering collections of matter, and surrounded with a blush of red, indicative of the acute stage of inflammation. The tumefaction of the joint forms a striking contrast to the emaciation of the leg and thigh. Great pain felt when the least attempt is made to move the limb, or even when the parts are slightly touched.

R. Applicat. Tinct. Iodinæ partibus dolentibus et tumefactæ omni die.

R. Pulv. Comp. gr. v. sumend. omni nocte.

21st. Size of the parts rather diminished, and the integuments considerably shrivelled.

R. Decoct. Dulcam. C. ʒviij. cujus capiat coch. j. mag. ter in die. Contin. pulvis.

24th. Tumor still more diminished; the external integuments considerably softer and wrinkled.

Repet. applicat. et contin. medi.

April 1st. Tumor less conical; patient can move the limb with considerably more ease than formerly.

8th. Tumefaction of the parts decreased; integuments more wrinkled and softer; appetite good; general health improving; patient can raise the limb, when desired, without pain. Aspect of the toes gradually resuming their natural position. Integuments covering the joint of the natural color, but considerably thickened.

11th. Head of the trochanter major felt.

Cont. applicat. tincturæ et medi.

May 9th. The whole of the hip nearly of the same size as that of the left, except over the joint, which is rather more full. Right leg not quite so firm and muscular as the left. Discoloration completely gone; child looking remarkably well; induration of the integuments diminishing.

Cont. applicat. tincturæ et medi.

June 8th. Child brought to the surgery, where he walked across the room with a little help. Swelling gone, there remaining only a slight elevation formed by the indurated integuments.

Cont. applicat. tincturæ et medi.

August 8th. The tincture has been applied every second day this week past. The muscular substance of the leg and thigh very much improved. During a considerable period no motion could be obtained without great pain. The application speedily caused a cessation of pain, except when the joint was violently moved, and even then the pain was only partial. When absorption of the tumor took place, the parts continued for some time apparently of the same size, but turned gradually soft and spongy to the touch, and diminished almost imperceptibly.

In the early part of the treatment, the integuments on and around the joint used to be more swollen some days than others; but now the parts are regularly of a uniform size, except a slight enlargement about the joint, and even this slight elevation is gradually diminishing.

At present (1828) the boy can

run about without any assistance, has the free use of the limb, but has a slight halt, which may be attributed to part of the head of the femur being destroyed by ulceration during the time occupied by the palliative mode of practice, which was certainly consistent with the prevailing mode of treatment; but failed completely in arresting the progress of the disease in this instance, as well as in many others.

Hull, November 18th, 1826.
Samuel Ridpath, ætat. 18, seaman apprentice, applied to me under the following circumstances: The patient had been employed, during the preceding summer, on board of the ship Alfred, in the Davis' Straits fishery; and on the 31st of May his right leg was fractured by the tiller of the vessel, when she was making a stern board among the ice. The tibia and fibula were both broken, but reduced immediately afterwards by the surgeon of the vessel. The fracture being oblique, and bad weather occurring, the medical attendant failed in keeping the extremities of the bones in apposition. As to the propriety of his conduct in allowing the bones to remain in that state, it forms no part of the present subject, and I shall merely state the situation in which I found the limb at the time of application. The extremity of the lower portion of the fibula was detained in the gastrocnemius muscle, while the extremity of the upper portion was in partial contact with the extremity of the lower portion of the tibia, and the extremity of the upper portion of the tibia, from the obliquity of the fracture, overlaid, but in partial contact with the extremity of the lower por-

tion. The patient was obliged to be supported at first with a crutch, and afterwards with a staff, from the weakness of the limb; otherwise in excellent health, and a strong, good-looking young man. The tincture was used in this case, and as stated, with perfect success.

III.

Strictures on the Diseases of Young Children.—From Lectures delivered at Guy's Hospital,

By Dr. JAMES BLUNDELL.

(Continued from p. 29.)

THE essential part of the treatment may be comprised in a few words: in chronic cases, after effusion has taken place, bleeding from the head is of very doubtful propriety; but it seems to be a principal remedy if the attack is sudden and recent. The blood may be taken by leeches, or from the jugular vein; of the quantities, you may judge from the table already given. Again.

To clear the chylopoietic viscera, is always proper in these convulsive and hydrocephalic affections; ipecacuanha and calomel, or other laxatives and emetics, being employed for the purpose. Pastry and fruit are sometimes brought away in this manner, given, perhaps, to please the child by some indiscreet acquaintance.

In convulsive affections, be sure to refrigerate the head, particularly if the attack be recent. Let the hair be removed by the razor, or by the diligent use of the scissors. Ether and water, vinegar and water, or liquor ammon. acetatis, being employed in the way of lotion. Take care of the eyes. Ice may be thought of; water

may be poured over the scalp from a coffee pot; this is, in fact, *la douche*. Once a day, or half a dozen times, for a few seconds, or for a few minutes, the administration of refrigerants may be continued, according to the effect produced. Coolness of the scalp, and paleness and shrinking of the features, are the indications that the refrigerating applications have exerted their full operation. Warmth about the head, pulsating fontanels, and inward fits, are the best signs that the refrigerants are again required,

To equalize the circulation, the warm bath is of great service; and although timorous mothers are very anxious lest the water should weaken, I think I never in one instance witnessed a dangerous debility produced in this manner; and of the bath I have made frequent use. 97 deg. of Fahrenheit's thermometer appears to be a very fit temperature; ten or fifteen minutes is an average period of immersion, to be lengthened if the child seem lively, and to be abbreviated should faintness occur; perhaps it is better to keep the head above water.

If after three or four immersions the child still scream when bathed, the bathing vessel may be covered with a blanket, and this being gradually pressed down with the infant, the water transudes almost unperceived through the texture, so that the little patient is in the bath before it is aware of it. When the bath is obstinately refused, wrapping the infant in a flannel, wrung out of water at the temperature of 97 deg. of Fahrenheit, may be found an excellent substitute; it may lie there among the folds, as comfortably as in the womb of the mother. If you wish to make the

child superlatively happy, tell the friends to put a few broken corks in the water : *Dis miscent superis*. Thirty or forty years afterwards they would not find half the pleasure in a globe and sceptre.

I have known infants to be regularly attacked with convulsions every time they screamed ; vex them, and a fit ensued : hence the importance of keeping all quiet. When the other remedies, namely, bleeding, purging, refrigeration of the head, and warm immersion, have been used, quiet may sometimes be ensured by syrup of poppies, or other anodynes. I know that in convulsive cases, with much lethargy, protracted for one or two weeks together, infants sometimes unexpectedly survive ; and I have seen these recoveries recur under the use of opium, in such doses as decidedly affected the system, given with no other view than that of easing the distress of the little sufferer. Lowder, the predecessor of Haighton, used to state his conviction, that opiates were of effective use in curing the disease ; and certainly my own persuasion is, that when administered in cases verging to the chronic form, and attended with distress and restlessness, they not only do not marked injury, but tend to accelerate the cure. I wish it were in my power to be more definite in my statements here ; but I want more light.

When the disposition to cerebral afflux, and general hurry of the circulation, is obstinate, digitalis may deserve consideration. It is a dangerous but powerful agent, and must be sedulously watched. In convulsions, inquire whether any irritant is in operation. In all cases when the gums

are suspected, they ought to be lanced.

A warm surface, a cool scalp, a vegetable diet, and gums lanced, when necessary, are, I believe, the best preventives of hydrocephalic and convulsive affections. With such children, evening walks are dangerous. Inward fits, bright eyes, glowing cheeks, and that slight irritability of temper which tender mothers deem an additional interest, constitute some of the plainer indications of an approaching attack. In one family, sometimes five or six infants are lost in succession under these cephalic affections ; the necessity of preventive treatment is, in such cases, obvious enough.

Serous diarrhœa is a disease which proves the death of many infants, especially within the month. Ten or twenty watery evacuations, green, or becoming greenish, may occur in the course of the day. In the course of twenty or thirty hours, the fat may be absorbed so rapidly, that the skin, hanging loosely over the body, reminds one of the modish dresses of the day ; and the body at first, perhaps, disposed to heat, becomes cold, pale, and collapsed, the patient recovering gradually, or dying at the end of some three or four days. This diarrhœa is more particularly dangerous, if the infant, not above a week or two old, has been gradually pining before the attack.

Mere irritability of the chylopoietic apparatus is not always, nor, perhaps, often the sole and immediate cause of these attacks. In some severe cases, superficial ulcers are found in the villous membrane after death ; in others, on different parts of the intestinal surface, we discover spots of in-

creased vascularity. When the conjunctiva, the urethra, the vagina, and the Schneiderian membrane, are inflamed superficially, they all increase in their irritability and their secretions, unless the inflammation be pushed beyond a certain degree; and it seems not improbable, therefore, that in infants the serous diarrhœa may more properly be referred to inflammation, than simple irritability of the inner surface of the membrane. In this preparation, presented by a very excellent and promising young gentleman, the late Dr. Cox, in the compass of one foot of intestine, you may see fifteen or twenty superficial ulcers, large as the surface of a split pea.

The substitution of other aliment for the human breast-milk, is the ordinary cause of watery diarrhœa; and to correct this error, is the first step of the cure. As observed before, if the infant be too weak to draw from the breast, the milk should be procured by proper drawing instruments, and administered with a spoon. Unless the human milk be promptly supplied, there is no reasonable hope of cure. In some cases, when the disease has been recent, I have, to appearance, successfully treated the watery diarrhœa on the antiphlogistic plan; but poppies, opiates, anti-acids, and aromatics, are the remedies which have appeared to have the best effects; and, at present, I know of none preferable. Two or three drops (not minims) daily of the opiate tincture, in slighter cases, may check the diarrhœa much; the great evil of this, and, indeed, of all the anodynes, is, that they make the infant so torpid, that it neglects to draw the

breath. Beware of overdosing. A useful formula in these cases, is the following: of aromatic confection, one drachm; of poppy syrup, (genuine,) one drachm; of dill-seed water, an ounce and a half; of spirit of nutmeg, thirty or forty drops. A teaspoonful to be given after every, or every other watery evacuation, unless the infant be drowsy, so that the whole may be taken in the course of the twenty-four hours. Till the breath is out of the body, you must never despair of children laboring under this disease.

Infants are obnoxious to a sort of specific inflammation of the mucous membrane, the thrush, or aphthæ, as it is called, and which may attack the mouth only, or the whole length of the alimentary tube. That the milder thrush is begun, we may suspect when the nipple is apthous and the child is drowsy; and when the suckling is frequently interrupted with crying, and the tongue and inner surface of the cheeks are red, and scattered over with a substance, like the curd of milk. When, in conjunction with these symptoms, the bowels purge, and the stomach vomits, and screaming and gas indicate intestinal spasms, and an apthous appearance is remarked in the perinæum and parts adjacent to the anus, we may then reasonably infer that the whole track of the intestinal tube is affected with apthæ, or with apthous irritation. The vagina, invested by a membrane like the oral epithelium, is, in women, sometimes attacked with a disease, which I conceive to be very analogous to the thrush of infants; and, under this disease, large quantities of curdy matter, of which I here show a specimen,

will sometimes form itself in no sparing abundance. Now, what is the exact nature of the white specks of infantile thrush I am not certain, but it appears to me, that, not unlike this in nature, it consists of a morbid secretion from the mucous membrane.

When thrush is attended with purging, it may, I believe, be best treated like the aqueous diarrhœa just considered. When confined to the mouth, borax, mulberry syrup, and other stimulant astringents may be used with success. A useful linctus consists of borax, one drachm, and of simple syrup one ounce, or honey may be substituted for syrup, if not too irritating. Of this linctus, a little may be put into the mouth repeatedly in the course of the day; the best instrument for diffusing it over the mouth is the child's own tongue.

Mesenteric obstructions are not, I think, frequent in very young children, but, without such obstruction, you may frequently meet with an inflated abdomen, and a gradual wasting of the other parts. *Marasmus*, as it is called, usually, I think, arises from one of three causes,—a denial of the human breast-milk; an inertness of the chylopoietic viscera, which either form their secretions too sparingly, or of deficient digestive power; and an afflux of blood on the head, with, perhaps, a concealed hydrocephalus. When the chylopoietic viscera are inert, without cephalic disease, I have seen much apparent benefit from Cayenne pepper, and quinine, in pill, according to effect produced, with a dose of blue pill, or a grain or so of calomel, two or three times a week. Think of intro-susception, bowel irritation, bloody

stools, and tenesmus, and beware of too frequent or too large a use of calomel. Change of air, and country air, or of the sea-shore, seem sometimes, in marasmus, to do more good than all our medicines. And thus much, then, in the way of practical remark, on the diseases of young infants, those especially which occur within the first few weeks, for to these it is that the preceding remarks, with few exceptions, are designed mainly to apply.

IV.

SELECTIONS FROM FOREIGN JOURNALS.

Case of Dislocation of the Femur backwards, which had existed five months, and in which the Reduction was effected.

BENJAMIN WHITTEBURGH, a stout muscular man, was admitted under the care of Mr. Travers, on the 4th of November, with dislocation of the femur on the dorsum of the ilium. He stated, that on the 4th of June last, a tree fell upon him, and he thus received a severe injury, on account of which he sent for a practitioner, who failed to discover any thing wrong about the hip. However, at the end of six weeks, he told the *surgeon* that he was certain the bone was displaced; to which the *surgeon* replied, that if it were so, it must remain, for it was too late to attempt reduction. At length he was advised to go to the Hospital, after the dislocation had existed five months.

When admitted, the characteristic signs of dislocation of the hip backwards were found to be very distinct;—the limb was about two inches and a half short-

er than the opposite. Notwithstanding the great length of time in which the bone had remained dislocated, Mr. Travers determined on attempting reduction; and with this view, on Friday last, the man was put on the table of the operating theatre, having first been put in the warm bath, and bled. Extension was made in a right line with the body, and a dose of solution of tartar emetic was given every ten minutes. After the extension had been kept up for about half an hour, blood was taken from the arm; and afterwards, continuing the force steadily for nearly the same length of time, the bone was at length reduced.

The patient passed a restless night, and suffered much pain, but we found, on visiting him at noon, that the bone was *in situ*, and he had the power of rotating the foot outwards. But, when seen by Mr. Travers, in the afternoon, the bone had become displaced—there was considerable shortening of the limb—and, in short, every symptom as before reduction.

It is intended to attempt reduction again, and then to place the limb on a double inclined plane.

Termination of the Retina in the Human Eye.

It has very often been discussed, where the retina terminates anteriorly, and, as far as we know, the opinions of anatomists as to this point are not yet settled. Dr. Schneider, of the University of Munich, has lately, by very accurate researches, endeavored to determine the question. According to him, the following are the different opinions on the subject:—

1. The retina reaches no further than the middle of the vitre-

ous humor.—Fallopian and Vesalius.

2. It terminates at the exterior margin of the processus ciliares.—Meckel, Sömmering, Wrisberg, Zinn, Rudolphi, Velpeau, Home, Jacob, Paullucci.

3. It extends to the circumference of the lens, where it is inserted in the capsule.—Ferrin, Haller, Lieutaud, Monro, Winslow.

4. It is continued into the processus ciliares.

5. Having reached the external zone of Zinn, it forms a defined edge, from which it extends, as a very delicate membrane, to the margin of the lens.—Baerens, Walter, Doellinger, Hesselbach.

According to M. Schneider, it proceeds from the external margin of the corpus ciliare, where it was generally supposed to terminate, to the lens on the greatest circumference of which it ends, by a free margin, and without any firm attachment to the capsule. This continuation of the retina lies between the zone of Zinn and the corpus ciliare; it appears as a very delicate, thin, medullary membrane, somewhat thickened at its internal free margin. It is covered by the pigmentum nigrum, which is most copious on the external portion, but gradually decreases anteriorly and interiorly, so that the free margin of the retina is not covered by it. At the distance of about one-eighteenth of an inch from the circumference of the lens, the retina increases in thickness, is very white, and of a folded structure, in which the separate folds, from 70 to 75 in number, are placed at regular intervals. The internal margin of this folded ring adheres to the capsule. Under the microscope,

the termination of these folds anteriorly appear as more or less coniform bodies placed in different directions, and very similar to the nervous papillæ of the tongue.

Successful Case of Transfusion.

Dr. Blundell, on the 7th instant, performed the operation of transfusion on a lady at Walworth, assisted by Mr. Poynter, of Somerstown, Mr. Davies, and Mr. Lambert. The circumstances of the case were briefly as follow :—The patient, a delicate woman, 25 years of age, the mother of two children, was taken in labor on the morning of the 7th; Mr. Poynter had been engaged to attend her, but it was found necessary, before the arrival of this gentleman, to call in Mr. Davies. There was nothing remarkable in the labor; the child presented naturally, the placenta came away entire in the course of a few minutes, and the patient remained for about an hour and a half, to use her own expression, “quite comfortable.” An alarming state of collapse somewhat suddenly ensued, and it was found that considerable hæmorrhage had taken place from the uterus: pressure was made on the abdomen; ice was introduced into the vagina, and various means employed. No further discharge of blood took place, but the patient was in an extreme state of prostration, blanched, and perfectly bloodless in appearance; the pulse not higher than 120, but sometimes almost imperceptible. Stimulants (brandy and port wine) were freely given, but with no marked benefit. In this state of affairs, Dr. Blundell arrived, and determined on transfusion, observing, that although there were some symp-

toms absent, which were necessary to make the case one of an extreme kind, namely, a greater rapidity of pulse, and restlessness; and although there was a possibility of the patient recovering, as the hæmorrhage was restrained, yet looking to the exhausted state of the patient, and the slight temporary benefit that had accrued from the use of stimulants, he thought the balance was against her, and that it was desirable to give the pabulum vitæ,—*blood*. About eight ounces, procured from the arm of Mr. Davies, were injected at different times—the whole operation occupying upwards of three hours. It was not until the whole quantity had been thrown in, that there was any decided amendment in the condition of the patient; she then rallied, and became in every respect better. Her convalescence has been gradual, and at this time, eleven days after delivery, she is doing well. The lochial discharge has returned within the last three days, and she says that she feels stronger and better than in the same lapse of time, after her two previous labors. There has been some tumefaction, and likewise pain of the arm, in which the transfusion was made; but these have subsided. It is worthy of notice, that the patient expresses herself very strongly on the benefits resulting from the injection of the blood; her observations are equivalent to this—that she felt as if life were infused into her body.

Double Uterus, and double Impregnation.

L. B., ætat. 30, of a robust constitution, had been in labor for two days, when Dr. Geiss, who describes the case, was sent for.

He observed that the pains were confined to the right side, where the uterus reached almost to the true ribs, while, on the left side, it did not rise higher than the navel. The external genitals were regularly formed; and it having been found that the shoulder presented, the operation of turning was resorted to, and a healthy female child extracted. Soon after delivery, the right side of the abdomen collapsed, the left half retaining its size. An hour after the birth of this child, the labor-pains returned, and, on examination, it was found that, at the side of the os uteri, and quite distinct from it, there existed a circular opening, through which the distended membranes of another child protruded. It was a full-grown boy, and, after its birth, Dr. Geiss, having introduced his hand into the left cavity, convinced himself that it had no communication with the right half of the uterus, which had already contracted. The left uterus contracted rather slowly, and the patient lost much blood from it. Two months afterwards, both children, as well as the mother, were perfectly healthy. Two years afterwards she was again delivered, but of one child only.

Rust's Magazine.

BOSTON, TUESDAY, MARCH 10, 1829.

THE Transactions of the Medical Society of the State of New-York, at the meetings held in February, 1829, have been received. The Society met at Albany, on Tuesday, the 3d of February, and was in session three days. Much important business was transacted, and the best spirit evinced to preserve to the pro-

feccion an honorable and useful influence on the whole community. A communication was received from the Medical Society of New-York, through a delegation to the State Society, requesting the coöperation of the latter in an attempt to establish a *State Vaccination Institution*, to be fixed in the city of New-York; also to petition the legislature for pecuniary aid to relieve the embarrassments of the College of Physicians and Surgeons; to procure changes in the laws regulating the practice of Physic and Surgery; and requesting the assistance of the State Society in suppressing intemperance, and preventing irregular vending of medicine. The communication was committed, and the Committee reported favorably on all the subjects enumerated, excepting that which relates to an alteration in the laws regulating the practice of Physic and Surgery. Committees were then appointed on the subject of a Vaccine Institution; the College of Physicians and Surgeons; and on licensing retailers of medicine. The Committee on Prize Questions and Dissertations then reported—

“That they have received four dissertations on Typhous Fever—but from the late period of their arrival and their voluminous contents, the whole of the committee have not had sufficient time for their examination. Your committee will be able to decide on their merits by the 1st day of May next.*

* The mottos of the above Dissertations are as follows:

“1. ‘In Medicina, sine qua non observatio.’

“2. ‘Ex principiis nascitur probabilitas, ex factis vero veritas.’

“3. ‘Beatum est causas cognoscere rerum.’

“4. ‘Studium sine calamo, somnium.’

"For the ensuing year, they would propose the following questions—viz.

"1. The history of *Prussic Acid*; including the best mode of preparing it, its modus operandi—the diseases in which it is most useful, and the best manner of exhibiting it.

"2. The history, preparation, and medical uses of *Iodine*.

"3. The symptoms, causes, and treatment of *Delirium Tremens*, illustrated by cases.

"4. The nature, causes, and cure of *Psoriasis*.

"Whereupon, *Resolved*, That the following be the prize questions for the year 1830.

"1. *The history, preparation, and medical uses of Iodine.*

"2. *The nature, symptoms, causes, and treatment of Delirium Tremens, illustrated by cases.*

"On motion, *Resolved*, That the sum of Fifty Dollars be offered as a premium on each of the above subjects."

The Transactions contain the annual Address by T. ROMEYN BECK, M.D., President of the Society. This is a very valuable part of the volume. We have read it with much pleasure. Such communications cannot fail to exert a very useful influence upon the Society itself and upon the profession. They show very distinctly that a strong interest is felt in its character by those who have been called to fill its high offices,—that this interest is not lost in personal success, but is ever ready to discover itself upon all such occasions as demand it. We had marked some passages in this address, which, by the kindness of its author, had reached us before the Transactions. We are always happy to acknowledge such obligations, and to communicate, as far as we are able, the valuable

observations of which we, in this way, become possessed.

Dr. Beck's address is on Improvement in Medicine; and the first illustration he offers on what has been done to promote it, is the *distrust which is obtaining against general theories*. The second illustration is derived from *advancement in pathological research*. After a passing eulogy of Bichat and of his successful labors in the promotion of this object, Dr. B. remarks:

"Look at the practical operation of this pursuit. An individual, after struggling with disease which resists all medical skill, sinks under its effects. The symptoms have been narrowly watched by his attendant, and he has endeavored to apply appropriate remedies. But occasionally some appearances have been noticed, the cause of which he cannot explain. His medical agents also do not produce their usual effects. What are the morbid changes that have caused this? If the lifeless body be consigned to its mother earth without examination, can any information, except of a mere negative kind, be drawn from the case, to be hereafter applied for the benefit of the living? Not so is the practice in the foreign countries which I have noticed. The view of the ravages of the disease illustrates the alterations which have taken place; and although they frequently appear rather as effects, than causes, yet sufficient is obvious to enable useful deductions to be formed, to explain many of the symptoms, and to furnish materials for reflection and improvement in future practice. Need I suggest that many diseases are yet imperfectly understood, and can only be elucidated by the light of this torch. How many have been thus developed by the labors of Morgagni, Baillie and others. How many,

even within the present century, have been successfully explored by Laennec and his compeers in France, by Bell and others in England. The nature of new or unknown diseases can thus alone be discovered. Allow me, in illustration, to refer to a case of mortality, the sudden announcement of which is feelingly remembered by every man in the community who was then living. If the death of our beloved and lamented WASHINGTON, was owing, as would seem from the brief account we have of his symptoms, to the disease now styled Laryngitis, where was the instruction to guide the practitioner? It was not until several years thereafter, that the sudden decease from it of two distinguished physicians in London, led to pathological examination. Its nature became evident—its mortality was rendered less certain—and dangerous as it must ever prove, instances are even multiplying of recovery from its effects. And yet this disease must have occurred centuries ago, and who can tell how many lives might have been prolonged, had its character been thus specially marked and investigated at an early period.”

Following this are some remarks on the importance of Dissection.

“The tendency of these observations necessarily leads me to notice the importance of dissection. I am aware of the prejudices that must be encountered in discussing its necessity; but they must be overcome, if at all, by arguments that shall shake their vehemence. They owe their origin, in some respects, to the best feelings of the human heart—while they are unquestionably heightened by the practice of disinterment. But it is because we would render this alternative unnecessary, that I venture to mention the subject.

“That an intimate knowledge of the condition of the human system, both in health and in disease, is indispensable to the judicious applica-

tion of curative means, would seem to be an axiom that requires only to be stated, in order to meet with universal credence. It is no less certain that the community must suffer from the consequences of ignorance. The truth of these remarks appears most strikingly in the department of surgery, although they will be no less conspicuous to him who will investigate, in that of medicine.

“A word or two is necessary in defence of those who pursue these studies. All will grant that they would not have been selected, except from a high sense of duty. It requires some lofty incitement—some moral courage, to be thus employed. The mysterious change which death induces, is alone sufficient to startle the buoyant spirit; but with this, the pathologist must familiarize himself. He proceeds to his high office at the risk of health—often indeed of existence. I appeal to your reading, in confirmation of the truth of my assertion, that for several years, scarcely a medical journal has arrived from abroad, which does not contain an account of some individual, who has either met with irreparable injury to his constitution, or has lost his life, from accidents occurring during dissection. Instances of a similar nature have happened in our own country—and apart from the honorable ambition of acquiring some fame, what can be the object of this untiring and hazardous labor? Is it not to ascertain what has been the cause of the mortality, and whether its seat and nature are under the power of human skill? Surely, under the obstacles which I have noticed, a triumphant proof is given of the desire of improvement in our profession.”

The progress of medical science is shown in the third place, *in the remarkable improvement* which has been made *in the composition and administration of remedies*. For the remarks under this head, we must refer to the address.

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

ADVERTISEMENTS.

THE ATHENEUM;

OR

SPIRIT OF THE ENGLISH MAGAZINES.

Embellished with elegant colored Plates of the Female Fashions, Portraits of distinguished Characters, &c., and containing select Pieces of the newest Popular Music.

THIS Publication is intended for those who desire a periodical work which both in its form, and the nature of its contents, is more elegant and durable than the newspapers of the day, without, on the other hand, being confined to the more weighty subjects and elaborate criticisms to which our valuable quarterly journals are devoted. It is the intention of the Editor to unite instruction with amusement, and that those who read for either may obtain it in the Atheneum, from the pens of the most distinguished writers of the age, free from impure admixture, and without having their religious or political creed interfered with.

To those who know the high character of many of the English Magazines, a better idea of the nature of the Atheneum cannot be given than by stating that it contains the *Spirit* of these Magazines and those of Scotland; a preference being given by the Editor, however, to such articles as are best adapted to the American reader. It is thus designed to constitute a work which will unite the vivid sketching, the raciness and vigor of Blackwood, the sprightly and elegant genius, and the literary discrimination of the New Monthly, with the qualities of the various other journals of merit. The Poetry with which it is enriched cannot, while the names of the most gifted English poets are on the list of contributors to these Magazines, be otherwise than the best.

On the first of October last the Third Series of the Atheneum was commenced, on an improved plan, with new and handsome type. Since that period, the number published on the 1st of each month has been embellished with a colored plate, containing two whole-length Portrait-figures, representing the latest FEMALE FASHIONS. These are executed on fine paper, in a style highly ornamental

to the work, and are accompanied by full explanations. Other plates are occasionally introduced:—No. 2, of the present volume, is embellished with a Portrait of the late Bishop Heber, and the No. for the 1st of March with one of Thomas Moore, Esq. On the 15th of February, a piece of MUSIC was added, which plan, together with that of the Fashions and other plates, will be continued. The recent increase of its circulation among every class of the reading community, justifies the Publisher in believing that these improvements, combined with the value of its literary department, have rendered the Spirit of the English Magazines a pleasing and useful accession to the LADY'S TOILET, the DRAWING ROOM and the LIBRARY.

The Atheneum is published at 184, Washington Street, Boston, by JOHN COTTON, on the 1st and 15th of every month, each number containing 40 pages, large octavo, and forming two volumes a year of 480 pages each. The price of the work, with the Plates of the Fashions, is six dollars a year; without them, five dollars. It is sent by mail to any part of the United States, enclosed in strong wrappers. Those who wish for the back numbers can be furnished with them.

February 28, 1829.

EUROPEAN LEECHES.

RICHARD A. NEWELL, Druggist, 91, Summer Street, has on hand a small lot of EUROPEAN LEECHES, in excellent order, and of very large size, which he will sell at a fair price.

N. B. Leeches applied as usual, or sent to any part of the city. 4t.

SURGICAL INSTRUMENTS.

DAVID & JOHN HENSHAW & Co. No. 33, India Street, near the head of Central Wharf, have for sale a very extensive assortment of Surgical Instruments. Gentlemen wishing to purchase will find it to their advantage to call and examine them. Oct. 14.

LECTURES ON ANATOMY.

TICKETS of admission to Dr. J. V. C. SMITH'S Evening Lectures on Anatomy, may be obtained at BREWER & BROTHERS, Apothecaries, Washington Street. Feb. 17.

I.

Hospital Report.

THE following, among other cases, have been admitted into the Massachusetts General Hospital within a few days.*

March, 1829.

Catharine B., æt. 51, widow.—This patient noticed darting pains in right breast last May for the first time. Were not constant,—particularly felt after handling or disturbing the breast. She could discover *no tumor* or *unnatural hardness* in the organ. Latter part of summer, began to swell. Skin became red, and sometimes slightly livid. About five weeks ago, began to grow hard throughout the whole gland,—skin more livid; pains more frequent. Now enlarged, scirrhus; nipple somewhat drawn in; painful, particularly after examination; skin mottled.

She has had ten children, the last about six years ago; has always enjoyed most perfect health, and is very large and fat.

The tumor is large; not distinctly circumscribed; irregular

in feeling; not discolored; not so hard as many tumors in this part. The glands in the axilla are not swelled. The patient's breath is not good; she has particularly a shortness or constraint in respiration; want of appetite, and increased frequency of pulse.

At first view, this case might be taken for a cancerous disease. It however differs from this affection in the want of hardness and regularity in the tumor; in the character of the pain, which is aching, rather than burning; also in the excessive tenderness of the swelling on its being handled.

These circumstances, together with the bad state of general health, led Dr. Warren to decide against an operation, and he referred her to the charge of the attending physician of the Hospital.

C. M., æt. 15, Boston.—Enlargement of glands of neck. This patient says, has always noticed a small tumor under the right angle of jaw, and that it has remained perfectly stationary, without pain or inconvenience. About two months since, was unwell; had no appetite; felt a general languor and diminution of strength. Soon after this, *the small tumor*

* The records of these cases are made by William Parker, A.B., one of the house physicians; and the additional observations and remarks by the attending surgeon of the Hospital, Dr. Warren.

was found to be increasing. Took medicine, by which the mouth was made sore ; made some external applications, all to no advantage. The swelling went on rapidly, though not attended with much pain. About three weeks ago, first began to feel sore in the right tonsil, and impeded deglutition. This has now increased to the size of a *shagbark*; is actually very troublesome ; hard ; not very tender. *Tonsil* red, but not as if about to suppurate ; has greatly diminished the isthmus fascium. Quite deaf in his right ear ; has had a blister applied behind the ear.

His general health has ever been delicate ; more deranged in spring for some years past. Countenance florid ; skin fair ; eyes blue ; pupil dilates largely. Says his family have never been troubled with glandular swellings.

This is not the common glandular swelling of the neck. It has about the size of an egg, though irregular in form, from the number of lymphatic glands affected. From the common glandular swelling it differs in its duration ; its hardness ; its connection with the tonsil ; in its painfulness, and disposition to affect the whole body.

The patient having been first relieved by a saline purgative, was ordered to take the muriatic acid in the following form :—

R. Acidi Muriatici, ʒi.
 Aquæ distillatæ, ʒ viij.
 Conserv. Rosæ, ʒ i. M. et filtra.

Take half an ounce once in two hours. Inhalation of the steam of hot vinegar. Gargle of decoction of chainomile.

Three leeches to the external tumor, and afterwards a poultice

of bread, water, and sea-weed, applied warm, every four hours.

When the inflammation of the tonsil is somewhat reduced, to take three grains of the Hydriodate of Soda, three times a day, and the tepid sea-water bath.

Swelling of the knee.—Mr. Garr, laborer, Boston, æt. 30. About 21 months since, patient slipped from a chair and came upon the inner condyle of the femur. Felt no pain at the time, and was not lame after the accident. He noticed nothing till about two months since, then felt a darting pain, extending upwards and downwards from the joint. This pain not constant. In a short time, noticed swelling between patella and inner condyle of femur. A day or two after this, was obliged to work in water for some hours. Immediately after this, pain and swelling increased, and lameness ensued. He then applied N. E. rum a few times with great relief ; has done nothing since. Swelling has increased more at times, particularly after an exposure and cold. At present, knee not very sore, but tender. Tibia and fibula natural ; motion difficult ; whole joint about two inches larger than the natural size.

This patient is so lame as to be disqualified for pursuing the occupation by which he has gained his living ; and though respectable in his character, was reduced to a state of great poverty and privation, till he fortunately met the eye of a humane gentleman, who advised him to the hospital and procured him a bed there.

The enlargement of the knee is general, and for the most part hard. No texture seems to be

affected exclusively, but all partake in the derangement; of course, the case will be difficult and slow of remedy.

The patient's health being good, no internal remedies are advised at present.

He is first to maintain perfect rest in the horizontal posture; second, to have a tepid sea-water fomentation twice a day, followed by friction continued half an hour, at each time.

Fungus Hæmatodes on right leg, outside, and eight inches below knee joint.—Mrs. D., æt. 50. Little more than a year since, bruised the limb against the wheel of a waggon. The part was considerably discolored, and patient lame for three or four weeks. Often struck the part when carrying a bucket, and thus kept up an irritation for a time in the part; made no application, but as lameness subsided, thought all was well. About two months from the time she was hurt, while accidentally passing the hand over the leg, perceived a tumor as large as an acorn. It was hard; not tender to touch; skin white and shining. Showed it to a physician a few days after, who called it a *scrofulous wen*, and proposed to remove it, but patient would not consent. He made some application and left her. From this time it increased very fast, retaining the same aspect. Saw Dr. Kittredge. He ordered salt water bath, ointment, &c. This had no effect in retarding the growth, but in keeping it cool. Saw Dr. Whiting, of Haverhill. He ordered showering, otherwise perfect quiet to the part; but notwithstanding, continued to grow, retaining same external appear-

ance. At this time she chanced to fall in with a *quack*, who attempted to produce suppuration. While under his treatment, and when as large as a goose egg, it changed its complexion; became very red and hot; bloodvessels began to show themselves. This happened about five months since. From that time to this, has made several trivial applications. Began to bleed about three weeks since, and has continued; it is now as large as an infant's head; of a sublivid appearance. Pains shoot from it to the groin and ankle, and, as she thinks, affect every part.

General health not very good.

This interesting case was sent to the Hospital by Dr. KITTREDGE, of Andover. This gentleman having detected the dangerous nature of the disease, informed the patient that unless removed speedily, it would prove fatal. He then wrote to Dr. Warren, stating the case and the destitute condition of the patient, and requested a free bed for her. This being immediately obtained, the patient came to the Hospital on the 2d of March.

The aspect of the tumor was truly formidable.* Its circumference about sixteen inches. The fungous protrusion through the skin, which had appeared within a few days only, had already attained the size of six inches in circumference. The color of the fungus was a dark red, intermixed with purple; that of the tumor, still covered by the skin, was variegated with red, green, purple,

* A drawing has been made of this fungus, which we shall, perhaps, publish hereafter.

blue, and white, richly intermixed. Whenever the dressings were removed, the fungus bled in a copious manner, sometimes till the patient was quite exhausted.

On the 5th of March, a meeting of the consulting physicians being called, Dr. WELSH and Dr. WALKER attended; who, with the assistant surgeons, Dr. REYNOLDS and Dr. OTIS, proceeded to examine the tumor, and decided in favor of an immediate amputation.

The operation was directly performed by Dr. WARREN, as follows:—The patient was placed on a firm table, of convenient height; the pelvis brought as near as possible to the edge, and the patient's arms and shoulders well supported by two assistants, to prevent her from slipping forwards. The leg was firmly and carefully held by Mr. PARKER, the house surgeon. The care of compressing the femoral artery in the groin was confided to Dr. Reynolds; and that of supporting the integuments of the thigh and the flap, to Dr. Otis. The operator, standing on the right side of the patient, placed his left hand on the thigh, so that the edge touched the patella; then raising the hand to the line indicated by the superior edge of the hand, there he applied the knife, carrying it round the inside of the limb, and then with a sweep along the outside, so as to divide precisely the skin all around. Next, setting the instrument on the muscles exactly below the retracted skin, he divided the muscles on the fore part, and with a second stroke, on the back part of the thigh. Drawing up the skin and muscles with the aid of the assist-

ant, the knife was carried through the remaining muscles to the bone. A retractor of linen was directly applied, and being taken by the assistant surgeon, was strongly drawn upwards, especially on the back of the limb. Finding a slight protrusion of muscle through the retractor about the bone, this was divided by a scalpel and the saw applied to the bone. This being supported by the left hand of the operator, was, by short strokes, entered into the bone; and being fixed, the strokes were lengthened gradually and deliberately. Now, the assistant, slightly inclining the leg upwards, caught the saw, but immediately correcting the position, the sawing was completed.

The retractor was then taken off and a tenaculum passed through the coats of the femoral artery; this vessel was drawn out and carefully tied with a silk ligature, one end of which was cut close to the artery, the other brought out of the wound. Another artery of some size was then tied. The pressure in the groin being removed, no other artery bled, excepting a small one in the subcutaneous cellular membrane, in which it was buried. This being drawn out, a small ligature was applied; but immediately the patient screamed violently. Perceiving there must be a small nervous filament included, the operator cut off this ligature, drew out the cellular membrane with a tenaculum, and from the midst of it separated the little artery by a forceps, and a ligature was again applied; but the patient cried out as before. Finding that the filament was very small, it was not thought expedient to repeat the attempt to exclude it.

The ligature was drawn as tight as possible and the pain ceased.

The artery had been so effectually compressed in the groin, that scarcely any arterial blood was lost. Finding, however, that the veins bled freely, a circular bandage was at once carried a few times round the stump, and this venous bleeding was stopped.

The patient was put to bed for three hours; then the dressings were applied, of adhesive plaster and bandage, as usual. No hemorrhage followed. At the evening visit, the patient was free from pain and comfortable.

The circular and the flap operation of the thigh have been tried alternately at the Hospital for some time back. On a review of these operations, the preference is given to the circular for the following reasons:—First. The wound made in this mode is not so vast. Second. The hemorrhage is less. Third. The incisions are more regular and precise, than in the flap operation. Fourth. The constitutional affection, and, of course, the danger, is less, in the circular, than the flap operation. The last can be done quicker, and makes a good stump. These advantages do not overbalance the objections. Whether the operation is a minute and a half or four minutes in duration, is not so important, as that the patient's safety should be ensured. When the operation is done as above described, all the incisions are smooth and exact; not the least irregularity of muscle appears on the face of the stump; and the covering of muscle, cellular membrane, and skin, is as perfect as possible.

II.

Case in which the Tincture of Iodine was externally used.

Communicated to the Editors of the Boston Medical and Surgical Journal.

IN your last number were published some extracts from a work, on the use of the Tincture of Iodine in diseases of the joints, &c. I had a case under treatment at the time I read the notice, which I thought might be benefited by Mr. Buchanan's plan. The following is a brief account of the case and the effects of the Iodine.

T. R., aged about 14. Has for three or four years or more been annoyed with rheumatism. His family is rheumatic and gouty. Has had himself chronic rheumatism in many joints, the smaller as well as the larger. The knee was long afflicted in this way. Great enlargement and stiffness, but not much pain, followed one of the attacks. Effusion took place, and an imperfect pus was at length discharged from a small and round opening. This was slow to heal. Similar trouble occurred to one toe, and the top of the foot of the same limb. The whole aspect of this boy was bad, and I was not a little surprised, as well as gratified, at his progress to recovery. This was perfect. He had been greatly emaciated, pale, and feeble, resembling most truly, in his whole appearance, the cases of scrofula, with imperfect nutrition, we so often meet with. He grew fleshy, with good complexion, and was as active and happy as any of his mates.

Rheumatism attacked him again some months since. It pursued very much its own and its old

course. It subsided at last, leaving his left elbow stiff, some swollen, with the forearm bent at a right angle with the humerus. This had been long the case when I saw him. I was called to see the father, laboring under acute rheumatism, when I was asked to look at the boy, Thomas. I have described the state of the elbow. His general health was better than common after an attack. All I recommended was friction, with daily attempts to move the joint. Much was done by this course. The swelling slowly subsided, and the angle of the elbow, from 96 deg., became one of 45. At this time I saw the use of the Tincture of Iodine recommended, and though something had been gained after a pretty long trial of the above means, I determined to try the Tincture of Iodine, after the method of Mr. Buchanan. It was tried three times, at intervals of about fourteen hours,—the strength of the tincture being one drachm of iodine to three ounces of rectified spirit, applied by means of a feather.

Slight swelling followed the first application, more the second, and so much the third, as to excite much alarm in the friends, and to give the limb a truly formidable appearance. The whole arm was swollen, from the top of the shoulder to the hand, and part of this last. The skin was tight, at first glossy, and then covered with miliary vesicles. It was very hot, and itched and smarted. Any considerable motion of the arm produced rupture of these vesicles; and especially when an attempt was made to bend the arm, a large discharge of water took place. It was most considerable from the inside of

the elbow joint. General irritation was manifested, by heat of surface, flush in face, thirst, dry tongue, &c. He was also costive. Means were at once used to diminish the local disease, and to evacuate the bowels. These consisted in solution of acetate of lead by day, poultice of same at night, and a saline cathartic draught. The second day the general symptoms had much yielded, and the swelling, &c. have since continued to decline.

The immediate effects of the Iodine were more severe from this mode of using it, viz., tincture applied by means of a feather, than I have seen from any other use of the remedy. It was probably applied too often,—a day, at least, should intervene before it be repeated. But in this case, local symptoms appeared immediately, and the constitutional ones were considerable. There might have been something in the patient that aided in the production of the severe symptoms recorded. The case is given for caution. No such effects are mentioned by Mr. Buchanan. The limb should be carefully watched, and the remedy lessened or discontinued when any local effects begin to manifest themselves. If any further circumstances of importance occur in this case, I will send them to you for publication.

Yours, &c.,

A. B.

March, 1829.

III.

Lectures on the Nervous System.

It is generally known that Mr. Charles Bell has offered to the public many new views respecting the nervous system. These views are

founded on a vast number and variety of experiments. Mr. Bell the last year gave four Lectures on the nervous system to the London College of Surgeons. Abstracts of these have been published. The following is the Introductory Lecture on the subject.

Mr. President and Gentlemen,— You perceive by the preparations and drawings around me the subject of the lecture. I have deferred to the very last my observations on the nervous system, and I would still defer them, if I thought I were prepared with another subject as well suited to fix your attention. If I enter upon it unwillingly, it is not so much from the conduct of those who have opposed my particular views, as from the overpowering recollections of him from whom I have received the chief assistance, and who is in my mind associated with every step of this inquiry:—lost to my affections, and to the profession, a painful blank is presented in performing this task.

We enter upon a subject the most difficult of all anatomy. The nerves have been called the vital solids, as it is on them, in an especial manner, that the chief endowments of life are bestowed. Through them, we are prepared to comprehend the phenomena of a living body, and are enabled to observe and arrange the symptoms of disease: it is therefore by far the highest department of anatomy, and on that account well suited to the audience which I have now the honor of addressing.

The nerves themselves inform us of nothing: it is not yet determined if they be sources of power: but by observing their relations, and their course through

the different parts of the body, we arrive at the most curious and important conclusions.

When the nerves are minutely dissected, they present an extraordinary degree of intricacy, which may excuse some in saying that the study of them can lead to no useful result. The discovery of new branches of nerves, or of new ganglions, have tended only to involve the subject in deeper obscurity, and to repel inquiry in the last fifty years. Diligence finds its reward in the enthusiasm that springs out of it. There was a pupil in Windmill Street, a German physician, who dissected the nerves with extraordinary perseverance, so that when the body was lifted out of the spirits in which it was preserved, it presented a complete tissue, or network of nerves all over it. Different individuals form different anticipations of their employment in a future life. Painters have assigned us our places and occupation, surrounded with clouds and sun-beams: but this gentleman's notions of the pleasures of a future state were, that he might prosecute these nerves to still greater minuteness, and know their origins and terminations.

If you contemplate a body that has been thus preserved in spirits for three months, and dissected morning, noon, and night, the tissue of nerves which is displayed appears in inextricable confusion. It is difficult to conceive that there is design and system here: look even to this drawing, or to these preparations, and you see threads of nerves passing in all directions—some part of the body receiving one nerve, another two; some three, or even more: you see little ganglions seated in dif-

ferent parts, as if it were by chance; and nerves diverging from them or seeming to terminate in them, and the whole is in apparent confusion. But when you dissect a second body, and perhaps a third; and when your curiosity leads you to inquire whether a certain part is supplied with one, two, or three nerves in all the bodies, or whether the same little ganglion lodges in the same recess, and receives the same branches in the first and in the second and the third, and you discover that the nerves correspond exactly in every body,—that there is no such thing as a nerve deviating, or being wanting, unless through the hurry or awkwardness of dissection, you are constrained to believe that the confusion is in our heads, and that there must reign a symmetry and a systematic arrangement in the distribution of the nerves. Now the desire to find the clue to this labyrinth naturally arises. The origin and distribution of each nerve must surely explain its function and use: therefore the relations of the nerves must be like a language: and how happy should we be to find a key that made the characters of this language intelligible!

The history of this subject does not assist us much: one prevailing error has misled all who have entered upon it. From the time of Herophilus and Erasistratus, the ancient physicians had the notion that the brain presided over the animal system, by the mediation of the spinal marrow and the nerves which are produced from it, and distributed to the body. From the time of Galen, they knew that by cutting or tying a nerve, or in any way intercept-

ing the communication with the brain, the parts to which it belonged were immediately deprived of sense and motion. What Dr. Martin (in the Edinburgh Essays) calls "the prettiest instance," was their experiment of tying the arteries by the side of the windpipe, and immediately striking the animal dumb. Galen, who labored at this matter more than any of his predecessors, proved that it was not tying the vessels, but the recurrent nerves; which, by depriving the glottis of power, destroyed the voice.

The operators, in those days, appear to have had that boldness which characterises ignorance. A scrofulous boy, falling into the hands of an ignorant surgeon, had a tumor extirpated from the neck, and the recurrent nerve at the same time cut, by which he lost half the strength of his voice;—and it is added that he escaped better than another boy, who, in a similar operation, had both the recurrenents cut, and was left quite dumb.

However, such were the occurrences and experiments which confirmed the notion that all power emanated from the brain. The prevalence of the same opinions has been a natural consequence of looking on the subject exactly in the same aspect. Every treatise begins formally with the enumeration of the parts of the nervous system; as the brain, the spinal marrow, the nerves, &c. thinking that, by such an enumeration, an exactness and precision must attend their method; whereas, in fact, they have already entered on a wrong path, and have taken an improper guide.

On the other hand, a more extensive survey of animated nature

should have informed them, long before the present age, that there are innumerable animals which have neither brain nor nerves, and yet have life, and sensibility, and motion. By such a contemplation of the chain of beings, we learn that the matter which possesses the endowment, and which is capable of being excited, and consequently of reaction, exists independently of the brain and nerves; and that this matter of nerve is diffused in the animal body. It would not be a just method of investigating, to admit that the same phenomena were produced by different organizations. If sensibility and motion belong to the nerves—if the matter of the nerves be appropriated for receiving these endowments of life—we are not authorized, when the same phenomena are presented, to presume that these result from any other organization than that of nerves. Therefore, if we see, in the lower creatures, that they shrink from injury, it implies that they have nervous matter distributed in the body, although not in that form to be displayed by the knife of the anatomist. The matter of nerve is diffused, not bound up in cords.

If the investigation were prosecuted from this point, and by ascending in the scale of animals, it would soon be made apparent that nervous threads were introduced to connect parts already in possession of vital power; that organs are connected in sympathy through them, so as to constitute a circle of the economy; and muscles are associated by them, so as to combine in action.

But the subject has not been pursued in this manner. Galen, as we have said, described mi-

nutely the brain, the medulla spinalis, and the nerves proceeding from the brain. He taught that the will resides in the brain, as the origin of the nerves, and that the nerves are tubes carrying animal spirits from the brain to the moving parts of the body. A lucid spirit, he says, may be seen flowing through them; but some of the nerves are, in his opinion, not hollow, and the influence is propagated along these, by impulse. The anatomy and the opinions of Galen prevailed from the second to the sixteenth century, down to the time of Vesalius.—(The Professor, at this part, introduced a slight notice of Vesalius's life and pursuits, as forming an æra in the progress of anatomy.)—Though, on many points, Vesalius resisted the authority of Galen, he adopted both his anatomy and his opinions of the nervous system, with little variation. With him, the vital spirits were formed from the blood in the brain, were collected in the cavities, or ventricles, and there elaborated;—thence he traced them into the spinal marrow and the roots of the nerves, and so over the body. These doctrines came down, with no essential variation, till the time of Haller. Willis, indeed, gave us an arrangement of the system, adapted to the dissection of the body, and he entertained many ingenious conjectures on the uses of the parts of the brain; but still that organ was, with him, the sole *officina spirituum*, providing a subtle spirit which distilled through the nerves; and the nerves had no other distinction than as this spirit was liberally or sparingly supplied to them. However minutely he details the manner of the blood ascending into the brain,

and the processes of distillation and circulation of the spirits, it is, in all material circumstances, the hypothesis of the ancients.

It has been said that it is singular that the sagacity of the Greeks should have, so long ago, suggested the distinct functions of the nerves, and, in fact, have announced the different uses of the nerves, which I shall make, in the course of these Lectures, a matter of demonstration. But there is nothing distinctly stated further than what is proposed hypothetically to account for common phenomena; for it was known to them, as to you, that a limb was sometimes deprived of sensation and retained its motion, or enjoyed sensation and lost the power of motion. There will be found in Willis's works, as in the ancients, a great deal of discussion regarding the properties of the *spirit*—as for example, whether there was an animal or a vital spirit, or a sensorial and motor spirit; but all hypothetically, and neither proceeding on anatomy nor on experiment. Nor did they, in reality, make any distinction of nerves further than the speculations of Galen—whether the hard nerves were for motion, and the soft ones for sensation, or whether the nerves from the spinal marrow were best calculated for muscular nerves, and those from the brain for sensitive nerves.

All these questions will be found touched on by Haller, where, in the end, he concludes, "But I know not a nerve which has sensation without also producing motion. The nerve which gives feeling to the finger, is that which moves the muscles; and the fifth nerve of the brain branches to the

papillæ of the tongue, and also to the muscles."

(To be continued.)

IV.

THE following is an abstract, made for this Journal, of some of the papers on the Uterus, which have been lately received from abroad.

Several papers have recently appeared in the foreign journals on rupture, and other diseased states of the uterus. In the Med. Gazette for January 17th, Mr. Spark communicates a case of rupture from a fall. A distinct sensation was experienced at the moment of the accident, of some "tearing, and giving way on the inside." Pains came on four days after the fall. During the intervening three days there was uneasiness, restlessness, irritability, indescribable feeling of weight and pressure in the abdomen; no pain; slight sanguineous discharge from the vagina; patient able to walk about, and attend to her ordinary domestic duties. A circumstance worthy of remark in this case was the continuance of pains after rupture; their increase after examination, and exhibition of ergot.

"Slight uterine pains commenced on the 19th, (four days after the fall,) and continued with variable force (all last night they were very strong) till this morning (22d). I found her seated on the side of the bed, with her feet on the floor; she looked pale and exhausted, her respiration was hurried and difficult, voice tremulous, surface of the body cold, pulse 190. She has not felt the

child since the accident, and has had no uterine pain for several hours. The abdomen is tense, and so exquisitely sore as to preclude the slightest attempt at external examination by pressure. On examining per vaginam, I found the os uteri much dilated and flabby within an inch of the external aperture, but could discover no part of the fœtus with the finger passed as far as possible into the uterus, though I could distinctly feel its head through the upper and posterior parietes of the vagina, which were bulging forwards. On introducing my hand into the uterus, I found that the legs and thighs of the child, with the placenta and cord, were its only contents, the whole of the body having passed into the abdomen through a fissure in the right side of the uterus, the breech of the child occupying the aperture, but not so closely as to prevent my feeling the intestines with the point of the finger. The contractile power of the uterus being again excited by the manual irritation, aided perhaps by a dose of the *secale cornutum*, and the external parts in a very relaxed state, the delivery of a full-sized male child, in a state of putrefaction, was easily effected, by gently drawing down the feet; but the instant the child was extracted, the patient sunk into a most alarming state of collapse, from which she was difficulty roused by the application of pressure to the uterine region, hot flannels to all parts of the body, and the free administration of brandy with tinct. opii. The reaction, however, was of short continuance, for in five hours after delivery she died."

In the same number is another

paper, in which the writer states that he has known rupture to happen in six cases, all of which were fatal, and one only which recovered. In this, as well as in the above, the pains are stated to have continued after the rupture, and what is still more remarkable, the child was delivered without manual aid through the natural passages. A slight rupture of the perineum took place. This patient had a child, two years after, without any untoward occurrence.

In the *Lancet* for Dec. 6th, 1828, in the records of the meetings of the London Medical Society, a case of rupture of the womb is related by Mr. Lord. The woman was pregnant with her fifth child. The liquor amnii was discharged when Mr. L. saw the patient; the vagina dilated and well lubricated, but pains much abated. Three doses of ergot were given. Pains were somewhat increased. The scalp was felt to be tense and puffy; the vectis was tried. The head was believed to be hydrocephalic, and perforation was attempted. The head receded, and the pains entirely ceasing, it was thought a rupture had taken place. Another physician was called in; he found that the child had escaped into the cavity of the abdomen, and proposed the operation of gastrotomy. This was done; the patient expressed herself greatly relieved, passed a good night, but died on the following afternoon. On examination after death, a rupture abundantly large for the escape of the fœtus was discovered. The head of the fœtus was immensely large.

The discussion upon this case occupied the Society three successive meetings. The questions more especially agitated were, the agency, if any, of the ergot in producing the rupture; and the practice which, under the circumstances preceding the rupture, ought to have been pursued. The following is from Dr. Hopkins, who performed the operation of gastrotomy; and whose opinions seem deserving of respect in this debate.

“ Dr. Hopkins objected to the notion of the ergot, alone, producing the accident, though absent when this remedy was had recourse to. On examining the uterus after death, which, together with the fœtus, he has now in his possession, he found it *healthy, excepting near the laceration*, through which the child passed; but on that part, namely, the posterior surface, the organ appeared completely altered, and softened in its texture. Judging from the morbid appearance of this part, he could not reconcile his feelings to the idea that the *secale cornutum* had been the sole means of causing the mischief; but that the parturient efforts, *unaided*, would have been sufficient to produce the rupture. Indeed, he made a point of inquiring from the patient, and ascertained that she had felt a dull and continued pain in one particular part of the abdomen, the situation of that part of the uterus found subsequently lacerated; the pain had continued for three months without intermission. He conceived, therefore, from the *post-mortem* appearances, there could not be a question but that it originated from *chronic inflammation*.

The fœtal head, again, being partially decomposed, the integuments must have given way, before the accident could have occurred, had the entire uterus been in a healthy condition.”

The other question, of what ought to have been done, was variously answered. A considerable number, however, of the members thought that the head ought to have been opened. In reading the debate with tolerable attention only, it can hardly but occur to any one, that this opinion, if it had not its origin, got much support from the discoveries made as to the state of the fœtal head after its removal from the mother. It was then found to be immensely large, and was supposed, upon a moderate calculation, to contain a gallon of water. It is somewhat doubtful, from what Mr. Lord states he noticed on careful examination, *per vaginam*, if any practitioner would have been justified in perforating when the ergot was given.

The following is from the report of the third meeting on this case of Mr. L.

“ He was desirous, at once, of coming to the question, as to what were the most advisable means to be pursued when such an untoward event had taken place? The practice which had been adopted by Dr. Hopkins, in the operation of gastrotomy, he considered to be the only proper measure. Three modes of treatment present themselves for consideration, as Burns justly observes, when the uterus is ruptured during gestation, and prior to delivery:—To leave the case to Nature, to deliver *per vias na-*

turales, or to perform gastrotomy. With respect to the first measure, he would simply remark, that there was no well-authenticated case of recovery, where the fœtus was allowed to remain in the cavity of the abdomen, the woman being at the full period of gestation. As regards the second means, delivery *per vias naturales*, he would only repeat the language of an eminent writer:—"To dilate the os uteri forcibly, and thus extract the child, is a proposition so rash and hazardous, that I know no one who would adopt it." The operation of gastrotomy, then, was the most preferable measure, and although the experience on the subject was but limited, yet, looking to the results of the few cases in which the operation had been performed, we are fully borne out in its adoption. Since the last meeting, he had referred to the authorities on this subject, and he found that the first case recorded, is in the 3d volume of the Journal de Medicine for 1768: the woman here survived. In the Memoirs of the French Academy was an account of a case, in which the operation was twice performed by Lambron, on the same female, yet she did well; and, lastly, in the 2d volume of the Quarterly Journal of Foreign Medicine, a successful case was related, on the authority of Bernard and Latouche. With respect to Dr. Ryan's observations on Dr. Hopkins having operated at a time when there was much depression of vital power, he (Mr. Lambert) would say, that the prostration is a leading characteristic throughout of the rupture of any viscus; that patients die in this condition, without any apparent effort at reaction; and, consequently, that

any delay in opening the abdomen, and removing an oppressive cause, in his opinion, would have been culpable."

In a French Journal, a case is reported of extra-uterine pregnancy, which was fatal in the fourth month. This was one of those rare cases first reported by Mauideau, Schemit, and Albert, in which the fœtus is developed in the substance of the womb itself, and hence termed interstitial extra-uterine pregnancy. The womb in this, as in other cases, in which the fœtus does not reach its cavity, was found enlarged,—to have formed the membrana decidua,—and to have made in short all its usual preparation for the reception of the ovum.

A case is reported in one of the English Journals, in which a decoction of ergot, in the proportion of four scruples of the powder to four ounces of water, boiled down to two, was exhibited with great benefit in a case of abortion, at the sixth month, in which the cord broke off near the placenta. The placenta was retained five days, and much irritation being produced and no pains, the ergot was given, in doses of half an ounce of the above every half hour. The placenta, with a quantity of coagula, was expelled after the third dose, by most powerful contractions of the womb. The ergot used was twelve months old.

In another communication on the Ergot, a number of cases are related illustrative of the speedy effect of this substance in lingering labors. The writer says he has met with but one case of stillborn child in numerous instances where he has used the

ergot. His dose varies from a scruple to half a drachm. In most he gives a scruple.

A case is reported by F. Froggatt, surgeon, of violent flooding, in a patient six months gone with child, in which he tried ergot without producing the least action in the womb. Slight pains preceded the flooding. He first gave ℥iiss. in ℥ij. water; after ten minutes, the same quantity. Then from another portion of ergot he gave ℥i. and 1 scruple in ℥iiss. water, repeating every quarter of an hour till three doses were taken. ℥ss. was next procured from another source, and in a quarter of an hour from last dose, half of this was given; and in ten minutes the other ℥ij. No pain whatever was excited, but the hemorrhage was entirely checked, and she seemed, at time of report, to be in a fair way to go the full time. The only noticeable effect was strangury; and as no uterine action was produced by the above large quantities, Mr. F. occasionally gave a drachm of the powder, by way of experiment, and always found the same desire to void urine, and the same sort of strangury, as when full doses were given.

BOSTON, TUESDAY, MARCH 17, 1829.

Description of the Smallpox, Varioloid, Cowpox and Chickenpox, illustrated by thirteen Engravings.
By J. D. FISHER, M.D.

A QUARTO volume with this title has within a few days been published in this city, by Messrs. Wells & Lilly. It is truly a splendid specimen of printing. The paper is of the best quality, and the engravings admira-

bly well executed. The accuracy of the drawings, or paintings, from which these were taken, may be gathered from the following account of eleven of them, in Dr. Fisher's prospectus.

“The paintings, from which these eleven plates are to be engraved, and of which they are to be the exact copies, were made in Paris, in 1825-6, at the time when the diseases which they are to represent prevailed epidemically in that city. They were executed by a French artist for, and under the immediate direction and personal observation of the author of the proposed publication, and were all commenced and finished at the bed-side of the patients from whom they were taken.”

It was the purpose of Dr. F. to have completed his work by twelve plates,—a thirteenth, however, has been added, without any addition to the price. The letter press amounts to nearly eighty pages, and instead of mere explanations of the plates, Dr. F. has added descriptions of the disease in every instance. In this he has exceeded his original plan, still without adding to the price of his work. The first five plates contain representations of the progressive development of the *Distinct*, the *Confluent*, and *Inoculated Smallpox*,—the next seven, of the *Distinct*, and *Confluent Varioloid* eruption,—that of the *Chickenpox*, and the perfect and imperfect *Cowpox*. The cases represented are not of the mildest or the severest forms of the diseases. Dr. F. has purposely made choice of cases of an intermediate character and moderate severity, from a belief that the delineations of such would be the best calculated

to convey to the unpractised observer the general character of the symptoms.

It will be perceived from examining the plates, that the *same identical* pustules are delineated in succession, so that the progress which they make from period to period, and the changes they undergo, are exhibited and may be studied. This representation of the progressive development of the eruptions, constitutes the great value of the work. For, although the inexperienced practitioner might not be able to recognise the eruption at its early stage, by comparing it with the representations in the plate, yet he cannot fail to distinguish its character in some part of its course, by studying the other parts in which the progressive development of the eruption is delineated.

In the text the author has given an explanation of the plates, and a particular description of the diseases which they are intended to illustrate,—and, lastly, in order to render the diagnosis as plain as possible, he has instituted a comparison between the symptoms and characters of the *Smallpox* and the *Varioloid disease*,—the *Smallpox* and the *Chickenpox*,—and the *Cowpox* and inoculated *Smallpox*. It is hardly necessary to add to the recommendations of a work which promises so much, and in which we cheerfully add, the author has so well accomplished his task, that it is *unique* in its kind. It may seem strange, but it is no less true, that this is the first work in which the smallpox and the varioloid have been represented in colored plates, and in which the comparison of them with diseases to which they

are more or less nearly allied, has been so faithfully made. It should be in the hands of every practitioner; and it would be a very useful work in every vessel destined to a foreign port, as well as to every town.

Method of arresting the Bleeding from Leech-bites.

It is well known that sometimes, especially in very young children and persons of scorbutic habit, all the means recommended to check the hæmorrhage from leech-bites, as cold water, flour, alum, caustics, and pressure, prove so entirely useless, that actual cautery and ligature must at last be resorted to. M. Ridolfo, of Leghorn, recommends a new method, which he has found as safe as it is simple. It consists in applying a cupping-glass to the wound, when a coagulum is almost immediately formed, and the bleeding arrested. This effect is very quickly produced, and has been found to take place even in children, and in persons where the mass of the blood appears to be in a state of dissolution, and without any tendency to coagulation. The instrument may safely be removed within a few minutes, but it is prudent to let the coagulum remain for some time.

WEEKLY REPORT OF DEATHS IN BOSTON,

Ending March 14, at noon.

March 7.	Sarah Gurney,	39 yrs.
	Mary Smith,	57
	Samuel Cass,	22
	Abigail Mangalls,	36
	Robert Turner,	2
8.	George Shaw,	4 w.
9.	John Boit,	56 yrs.
10.	Mary Sullivan,	14 mo.
11.	Mary Porter,	4 yrs.
	Elizabeth Leeds,	14
14.	Andrew Shea,	40
	Edward Perkins,	21

Bilious fever, 2—childbed, 1—hooping cough, 1—infantile, 1—lung fever, 1—ossification of the heart, 1—rheumatic, 1—typhous fever, 2—unknown, 2. Males, 6—females, 6. Stillborn, 3. Total, 15.

ADVERTISEMENTS.

DENTAL SURGERY.

THIS day received by Benjamin Perkins & Co., No. 135, Washington Street.—A SYSTEM OF DENTAL SURGERY. In three parts.

1. Dental Surgery as a Science.
2. Operative Dental Surgery.
3. Pharmacy connected with Dental Surgery.

By SAMUEL SHELDON FITCH, M.D., Surgeon Dentist. *Denticum curam habeto ut bene digeras et diu vivas; laxatis dentibus laxantur et chylaceo officinæ; hinc mille malorum occasiones.*—Baglivi XIII. March 17.

ep6w

NEW MEDICAL WORK.

JUST published and for sale by Benjamin Perkins & Co.—THE FRENCH PRACTICE OF MEDICINE; being a translation of L. F. Begin's treatise on Therapeutics; with occasional notes and observations, illustrative of the treatment of diseases in the climate of North America. By XAVIER TESSIER.

ep3w

March 17.

CASEY'S APPARATUS FOR THE CURE OF DISTORTED SPINE.

THE Proprietor of the Dormant Balance for the cure of Distorted Spine, gives notice, that he has established an agency in this city, for the convenience of those who may wish to avail themselves of this invention. Physicians having under their care the subjects of this disease, or patients themselves, may have an opportunity of inspecting the apparatus, and examining the testimonials of its efficacy, at Mr. Charles White's, corner of Winter Street. It is recommended, however, that all patients availing themselves of this invention, should do it by the advice, and under the superintendence, of their own physicians, as it is only by medical opinion that the proper subjects of the machine can be determined, or the other proper measures to be made use of in conjunction with it, can be pointed out. The Proprietor expressly disclaims the idea that a cure is to be effected, in any case, by mechanical means alone. This machine has received

the approbation of many of the most eminent medical men in this city and New-York. Upon application to the agent, references will be given, and written testimonials exhibited.

All letters, post-paid, addressed to J. Lincoln, No. 27, Fayette Street, will be attended to.

Boston, Feb. 6, 1829.

EUROPEAN LEECHES.

RICHARD A. NEWELL, Druggist, 91, Summer Street, has on hand a small lot of EUROPEAN LEECHES, in excellent order, and of very large size, which he will sell at a fair price.

N. B. Leeches applied as usual, or sent to any part of the city. 4t.

SURGICAL INSTRUMENTS.

DAVID & JOHN HENSHAW & Co. No. 33, India Street, near the head of Central Wharf, have for sale a very extensive assortment of Surgical Instruments. Gentlemen wishing to purchase will find it to their advantage to call and examine them. Oct. 14.

NATHAN JARVIS,

Druggist and Apothecary,

HAS taken the Apothecaries' Hall, No. 183, Washington Street (lately kept by Messrs. Wm. B. & Henry White.) His stock of Drugs and Medicines is complete and genuine. Physicians and others are assured that their orders, prescriptions, &c. will meet with prompt and strict personal attention.

The old friends of this establishment are requested to continue their patronage.

MANUAL FOR THE USE OF THE STETHOSCOPE.

JUST published by Benjamin Perkins, & Co.,—MANUAL FOR THE USE OF THE STETHOSCOPE, being a short Treatise on investigating Diseases of the Chest. From the French of M. Collin, with an Introduction and Plates. By a Fellow of the Mass. Med. Soc.

The Stethoscope may also be obtained as above in the most approved form.

ep3w

Jan. 20.

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

I.

*Hospital Report.**Fractures of the Limbs.*

Feb. 4.—JAMES C., a seaman, aged 24, was occupied in loosening the main-top-sail of a ship, preparing to sail; in consequence of the sail being taken by a sudden gust of wind, he lost his hold, and was precipitated a distance of seventy feet on the deck.

Being brought to the Hospital in a state of insensibility, and his skin exceedingly cold, hot cloths were applied to the body and limbs, and some hot water and a little brandy poured down his throat. By these applications the natural heat was restored.

On examination, there appeared a gash, two inches long, on the left temple. The left leg was broken below the middle. The fracture oblique, lower fragment protruding. On the inside of the leg was a wound, two inches long, through which the broken bones had protruded. This bled constantly, as frequently happens in compound fractures. Before night, the patient, who had recovered his senses, became very hot and restless, with a sense of oppression at the pit of the stomach, and a disposition to stupor,—which led to the apprehension

that there might be some grave injury of the head. He was copiously bled, and the bad symptoms relieved. He then took two ounces of compound infusion of senna, with one ounce of tartrate of potass and soda. This operated favorably the next day.

The fractured limb was placed on a pillow, the bones in their proper position, and the pillow supported in such manner by a cradle, as to keep it quite steady. The wound being covered by a pledget of cerate, the whole limb was kept bathed with diluted alcohol.

On the day following, the leg swelled and put on a bad aspect; but the young man having a good constitution, the swelling subsided in a few days, so that on the 12th of March it was thought safe to give more support to the limb; especially as the patient showed a disposition to move. Splints, well padded, were applied on the inside and outside of the limb, and supported by pillow and cradle as before, in such way that the wound could be examined without motion of the limb.

March 15th.—Under this treatment he is recovering. The wound has nearly healed; no motion of the fractured bones is felt. A tight circular bandage is now

applied, and the patient allowed to get out of bed.

Although it might be thought that the mode of treating fractured limbs were well established by this time, yet we find quite a contest of opinions as to the proper applications. Some surgeons deprecate the use of splints; others use them in all cases: some can tolerate no splints but those of their own contrivance; others, captivated by what is new, apply the most complicated apparatus for the simplest fractures.

In this Hospital we have not discovered any one mode of treatment applicable to all cases. The treatment must be varied according to the case. The House Physician does not feel himself authorized to clap on a great apparatus of splints and bandages, as soon as the patient enters the Hospital.

At first, the limb is placed in an easy and natural posture, so that the bones shall not goad and irritate the muscles. In this posture the limb is confined by soft pillows and an enclosing cradle, until the tumefaction of the limb has subsided. Then it is supported by splints, most carefully guarded by tow or cotton, and examined once in three, four, or five days; or, if a compound fracture, daily.

Bandages for fractured legs we rarely use. The 18 tailed, or Scultetus' bandage, so generally employed, is found to be an incumbrance in many cases; as it affords no real support to the limb, and is troublesome in application.

Let us compare the preceding case with another, where the injury was nearly similar; in order to show the influence of habits,

good and bad, on the result of these accidents.

Oct. 31.—Charles R., laborer, Boston, aged 30, was brought into the Hospital with a compound fracture of the tibia and simple fracture of the fibula, occasioned by a fall. Habits very bad. He had slight delirium tremens when brought in. Ordered a pill of two grains of opium, every four hours, till he slept. An Indian meal poultice upon leg.

Nov. 1st.—He has taken the pills to this time, but obtained no sleep. Let him have a pill of four grains of opium, every three hours, till he sleeps.

2d.—He was quiet after three pills, and had some sleep. Ordered two ounces of the compound infusion of senna, every four hours, till it operate. Pills as yesterday, if required.

3d.—Is quiet; has had some sleep; medicine operated well. The poultice was discontinued, and the leg dressed.

4th.—Delirium came on in the early part of yesterday afternoon; was violent in the evening and during the night. Sleep or stupor came on between 6 and 7 o'clock this morning, which continues. Began to take pills at 3, P. M., and has taken six. Dressings displaced by the violence of delirium, and the end of fractured bone protruded through the wound in the skin. Rum and water for drink. Pills, if necessary, from two to four hours; poultice to leg.

5, P. M. Continues quiet, with some sleep. Pill at 8, P. M., and another at 10. Afterwards as directed this morning.

5th.

R. Tinct. Alces et Myrrh, ʒ.

every three hours, till it operates. He took the pills as directed, at 5, P. M. yesterday; has had no delirium since. Let him have opium if necessary. Poultice, and also rum as before.

6th.—No delirium; sufficient sleep. Omit poultice. Dress the leg every four hours with Cerat. Resini; applying over it compresses wet with warm rum. Apply pledget to bruise on foot.

R. Tinct. Cinchonæ, ʒ ss.
Tinct. Opii, gutt. x. M.

every four hours. Continue spirit.

7th.—No delirium; mind stupid; parts about the fracture gangrenous; pulse more frequent and feeble, showing increased constitutional irritation. Whole appearance less favorable.

R. Tinct. Myrrh et Aloes, ʒ ss.

every three hours, till it operates. Afterwards,

Pill. Opii, gr. iv. and one ounce of brandy,

every three hours. Let the limb be bathed in spirit, and kept warm.

10th.—Eight in the morning. Let him have four grains of opium every hour, until he has taken three doses.

Lower part of the limb gangrenous, but progress of gangrene is now checked. A consultation was called, and amputation of the limb found necessary; and the constitutional symptoms being sufficiently improved to warrant, it was advised immediately.

One o'clock. The limb was removed by circular incision, about four inches below the knee. There was considerable venous hemorrhage.

11th.—No delirium; has had some sleep. Has taken three pills of four grains of opium each.

Tongue dry and denuded; pulse better; whole appearance quite as good as before the operation. Vomits the bark. Omit it.

12th.—No delirium; more sleep; three dejections, very small and thin; tongue denuded; ulcerations about the mouth.

R. Tinct. Cinnamon. ʒ ss.

If diarrhœa continue, also a pill of four grains of opium after every dejection.

22d.—Diarrhœa still continues.

R. Tinct. Cinnamon. ʒ ss.

Tinct. Kino, ʒi. M.

To be given according to the urgency of the diarrhœa.

25th.—Diarrhœa continues. Repeat the medicine of yesterday after every discharge. At bed time, a pill of four grains of opium. After this, the diarrhœa was checked, and the patient slowly recovered.

This man lost his limb from the habitual use of rum. The affection of the bowels is to be attributed to the loss of tone, from the same cause; and under the complicated effects of the accident, the operation, and the ardent spirits, his life was saved with great difficulty.

Compound Fracture, with partial sloughing, and subsequent Operation on the Exfoliating Bones.

During the summer of 1828, the patient, Mrs. —, fell the distance of ten feet, and being very heavy, fractured both bones of the right leg. Dr. Warren being presently called to her, found her lying upon the floor of the room; the right leg exposed, presented the fractured end of the tibia; protruded two inches through a wound of the skin. On attempting to push down the bone, great resistance was made by the sur-

rounding skin. An assistant was requested to extend the limb ; a director was passed under the skin, which was forcibly elevated and extended, and thus the bone returned. The patient was then placed on a board and carried home.

On subsequent examination, the bones were found to be comminuted ; that is, not only broken, but shattered into many pieces. The disposition to spasmodic action in the muscles of the limb was considerable ; so that on any slight motion of the body or limb, a contraction was brought on, accompanied by severe pain. In order to prevent this, it was necessary to support the limb by pressure. The patient being fixed on a bed, as well accommodated to her case as circumstances would permit, the fractured bones were restored to their natural situation. Then a splint, covered with cotton wadding, was placed on each side of the limb ; an 18 tailed bandage being interposed and applied next the skin, to confine the dressings of the wound. These dressings were, lint, a pledget of resinous cerate, and a compress wet with spirit, extended over the whole limb, which was kept constantly moistened with the same liquid. The splints being secured by tapes, tied with a very moderate firmness, the limb was laid on a thin pillow, which, being covered by a cradle, kept the whole apparatus very steady ; and yet permitted it to be opened without jarring the limb. In the evening a dose of tincture of opium was required. The next day, the patient exhibiting marks of constitutional affection, required bleeding. She was now committed to the care of her family phy-

sician, Dr. S. Shurtleff. A severe inflammation of the limb soon occurred, which assumed for a short time the erysipelatous aspect, with a gangrenous color over the fractured part. The patient, though very fleshy, was of a healthy constitution ; about 35 years of age ; of much fortitude, and a strong religious confidence. These circumstances, combined with the judicious and constant attention she received, gave a favorable turn to the erysipelatous inflammation, and limited the gangrene to the skin about the wound, which sloughed off. At this time she was dressed, not only daily, but many times in the day and night. Extensive and deep suppurations followed, and one of them opened on the lower part of the limb.

A question which had presented itself at the beginning of this case, now recurred with increased force,—whether the limb could be allowed to remain with safety to the patient's life. The heat of the weather, the corpulency of the patient, the shattered condition of the limb, the deep and increasing suppuration, put a discouraging aspect on the case. On the other hand, the good state of body and mind in which she was, with successful experience of similar cases, encouraged the hope of saving both limb and life. Dr. W. therefore resolved to take the responsibility of allowing the limb to remain, without suggesting to the patient the question of amputation ; and this opinion was concurred in by Dr. S. After this time, various changes, favorable and unfavorable, occurred. At times she suffered great inflammation and exquisite pain, followed by a season of calm. In

this manner was passed the autumn of 1828. As winter came on, the variable state of the limb gradually settled into a quiet and regular suppuration. The patient was now able to leave her bed. The fractured bones at length united,—the limb, in consequence of the loss of the shattered pieces, being shortened from two to three inches. Portions of the ends of the tibia died, but remained for a long time firmly attached. These portions, acting like dead matter, kept up a suppuration through four separate orifices or ulcers, from two to three inches apart.

In March, 1829, the appearance on examination by the probe was such, as to encourage the hope of being able to remove these dead pieces; and thus relieve the patient of the irritations and inflammations caused by them. Dr. W., with the aid of Dr. S., proceeded as follows:—He made two diagonal incisions, in such way as to unite the four openings; then, raising the four flaps, he proceeded to search for the dead bones. First, at the upper and outer wound, a piece was found lying very deeply in the limb. A probe being introduced to the bone, serving as a guide, a narrow bladed forceps was carried to the bone, which, being seized, was extricated by slow and cautious movements. This piece was about two inches long. At the lower part lay a broader portion, comprehending apparently the whole diameter of the lower part of the tibia. From this the skin was dissected and raised; the piece of bone was grasped by a dissecting forceps, and loosened from its attachment to the living bone; and separated entire. This was connected with the two lower

openings. At the upper and inner orifice, a third portion of bone was found and removed. The remaining bones appearing firm and healthy, the operation was terminated. The patient suffered considerable pain during the operation, but was afterwards comfortable and even gay. No severe symptoms occurred after the operation. The patient is now in good health,—the wounds healing rapidly. The disposition to inflammation and pain has gone; the limb feels well; the patient will soon be allowed to walk; and will undoubtedly have a good and useful limb, though something shorter than before the accident.

Where the constitution of the patient is not vitiated by bad habits, or any original defect, nature should be trusted as far as possible; while her operations are watched with a vigilant eye.

II.

Lectures on the Nervous System.

By MR. CHARLES BELL.

(Introductory Lecture concluded from p. 74.)

THERE could be no speculations regarding the nervous system at all satisfactory, that did not embrace the ganglions, which are such conspicuous appendages of the nerves. The opinions concerning them exhibit, however, the same imperfect reasoning, and the same confusion and contradiction. Ganglions are swellings upon the nerves, of a firm consistence, and are within of a mixed substance. The word was first used by Fallopius, who conceived some resemblance between them and the swellings which form on tendons in consequence of sprains. Lancisi had

the fancy that the ganglions were muscular bodies, and were for propelling onwards the nervous fluid; which coincided with a notion which you may remember then obtained, that the dura mater was muscular for the same purpose—viz. for compressing the brain. Winslow had the more rational opinion that the ganglions were lesser brains. And one English author, Johnstone, supported the prevailing opinion that these bodies were formed on the nerves for the purpose of cutting off communication with the brain, and that all nerves going to vital parts were distinguished by having ganglions; that the vital actions might not be disturbed by passion, or a man resign life by merèly willing it.

The French physiologists, among whom we must chiefly notice Bichat, have had the merit of contemning all authority. We must speak of Bichat with that respect which is due to a man of genius: he possessed ingenuity, industry, and eloquence. But, as it appears to me, he allowed the unhappy condition of his country so far to influence him that he never mentions the authorities of England, and I wish I could believe that he was ignorant of them. Nothing would suit the time (the commencement of the French revolution) but the entire overthrow of former systems, and the substitution of a new theory. It was the pleasure of Bichat to divide the nerves into two distinct systems, instead of the one uniform system of the ancients, in which the nerves were supposed to proceed from the sensorium, as a grand centre, and from that to derive their powers. One of his nervous systems he conceived

to have its centre in the brain, consisting of the nerves destined to receive impressions, and of the nerves which convey the influence of the will to the muscular system. The other had many centres. The power of this system emanated from the ganglions, which he observed largely scattered over the viscera; and each ganglion he conceived, with the authorities above, though he was far from acknowledging such authorities, to be a distinct source of nervous influence, whilst a relation was preserved between them by connecting nerves. The first was, according to this author, the nervous system of the animal life having one centre in the brain, to which sensation is propagated, and from which motion proceeds; whilst the second system was for organic life, had many distinct centres, and many functions relating to the operations of the animal economy, over which the mind had no power.

This bold invention was supported by many curious instances, and its author exhibited much knowledge, as well as ingenuity: but it was anatomically incorrect, and nothing more clearly evinced the wrong methods of study prevailing on the Continent, than the acquiescence and approbation with which this system was received there. Two errors pervaded the whole, which ought not, for an instant, to have been left undetected. The first was in screening from himself what he could not be ignorant of—that the cerebral nerves also had ganglions; that 31 pairs of large ganglions, in regular order, and carefully protected, like important organs, are to be found in the nerves of the head and spine. This at once

should have caused the rejection of the name of ganglionic system of nerves, given to his nerves of organic life. But his error was not merely the misapplication of a name : there was misconception and radical error throughout the whole system. Although Bichat's *ganglionic system* was presented with the aspect of novelty, there was, in truth, no actual discovery. Anatomists had already convinced themselves that the sixth nerve was not the root of this sympathetic nerve ; that a filament so small could not be the trunk of that system which, expanding into larger branches, and furnished with numerous ganglions, was seen to pervade the whole viscera, and to connect itself with every nerve of the body. The opinion had been propagated that it was a system of visceral nerves extending every where, and not depending upon the encephalon.

But the most remarkable misconception of Bichat was, in imagining that he saw, in the ganglionic system, or the sympathetic system of man, the developement of that series of nerves which is seen in the lower creatures : thus considering those nerves which, in them give sensation and volition, to be the same system which, in the human body, even by his own showing, give no token of being either the organ of sensation or of voluntary motion. But of this more hereafter.

The Professor, having brought up the review of the opinions on the nervous system to this point, concluded his Lecture with a view of the structure of a nerve—the membranes which cover it, and enter into its composition—its vascularity—the dependence of its powers upon the circulation

through it :—he observed, that the impression on any part of a nerve in its course, was always referred by the sufferer to the extremity of the nerve. He stated that the membranes investing the nerves were subject to be inflamed in patches, or parts, and that such inflammation produced pain remote from the seat of the disease : he gave an instance of a tumor formed in the nerve of the ham being mistaken for a disease in the sole of the foot : he illustrated the same order of symptoms, by cancerous disease in the pelvis, often affecting the ischiatic nerve ;—he then detailed instances to show that when two nerves are bound together in the same sheath, one diverging to a part internal, and the other to a part external and cutaneous, the irritation upon the former is ever attributed to the part supplied by the latter ; and of this he gave the examples of sympathetic pains attending inflammations of the throat, affections of the heart and lungs, of the liver and duodenum, of the colon, the uterus, and ovarium.

III.

Aneurism of the Innominata and Root of the Carotid, successfully treated by tying the Carotid Artery.

By D. EVANS, Esq., Surgeon at Belper, Derbyshire.

WILLIAM HALL, ætat. 30, a butcher and horse-dealer, an athletic and spirited young man, about five feet six inches high, has been accustomed to laborious exercise, frequently riding from 70 to 100 miles a day, and has always enjoyed excellent health, until the

appearance of the following symptoms:—About fourteen months ago he was seized with shortness of breath, troublesome cough, and tightness over the chest, after much exertion, especially in walking fast up a hill. These symptoms continued until the 6th of March, when he had an attack of bronchitis, which he attributed to cold. His expectoration was copious, consisting of mucus slightly streaked with blood, and his cough came on in violent paroxysms, which were followed by a sense of suffocation.

On the 10th of March, after a fit of coughing, a soft pulsating tumor, about the size of a walnut, suddenly made its appearance behind, and extending a little above the right sterno-clavicular articulation, and covered, externally, by the sternal portion of the sterno-mastoid muscle. The tumor was greatly diminished by firm pressure, but could not be made to disappear entirely.

The pulsation of the tumor, which was synchronous with that of the heart, was increased in force by pressure upon the right subclavian artery, and was diminished, and sometimes completely arrested, by pressure upon the right carotid, above the tumor. The pulsations of the right carotid and subclavian arteries, were stronger than those of the left; but there was no apparent difference in the pulsations of the radial arteries.

As soon as the tumor made its appearance, the cough and dyspnoea ceased to be troublesome, and his health was soon reestablished. His chest sounded well upon percussion, and the respiratory murmur was distinctly heard all over it. No unnatural pulsa-

tion could be detected, by the use of the stethoscope, between the tumor and the heart. A loud and powerful pulsation was heard over the tumor, unattended with any unusual sound.

In taking into consideration the situation of the tumor,—its sudden appearance, after a violent paroxysm of coughing, and its soft pulsating character, together with the symptoms above enumerated,—little doubt could be entertained of its nature, and I concluded that the root of the carotid artery was the seat of the disease.

Considering this a favorable case for the operation lately revived, and so ably advocated by Mr. Wardrop, I was induced to obtain the opinion of two eminent surgeons in London respecting its propriety. Both, however, disapproving of the operation, it was, therefore, determined, with the approbation of my friends, Mr. Bennet, and Mr. Brown, of Derby, that a fair trial should be made of Valsalva's plan of treating aneurisms.

The nature of the disease was fully explained to the patient, who, fortunately, was a man of strong sense and most determined resolution, and, from his employment leading him to study the diseases of horses, there was no difficulty in making him comprehend the dangerous tendency of the disease. He therefore submitted, with perfect confidence, to the proposed plan of treatment; and I cannot sufficiently admire the fortitude and cheerfulness with which he bore the long privation which it was necessary to enforce, and the implicit faith which he placed in all the remedies adopted for his relief.

April 3. He was accordingly

ordered to bed, to be bled, to the extent of eight ounces, every third day; his diet to consist of small quantities of gruel, broth, and tea. Small doses of digitalis were likewise administered. This plan of treatment was continued until the 13th of July. During the first month, there appeared some little improvement; his pulse was frequently as low as 47 in the minute, the tumor became harder, its pulsation less forcible, and more remote; from which it was supposed that coagula might be forming. The blood hitherto had seemed perfectly healthy, and it was noticed that, if the bleeding were delayed beyond the usual time, the symptoms were aggravated.

In the beginning of May, a great alteration, for the worse, took place, which was supposed to be owing to his taking a small quantity of animal food. The blood, after each bleeding, became buffed; pulse 80 in the minute; the tumor rapidly increasing in the course of a few days, and becoming very painful upon pressure. Twenty leeches were applied, without any relief. A few days afterwards a diarrhoea supervened, the inflammatory state of the tumor abated, the pain ceased, and the swelling, in some degree, subsided. After this attack, his pulse was never less than 80 in the minute, although the same plan of treatment was rigidly adhered to.

From this time until the 1st of July, the tumor remained stationary; but, from the latter date, until the 20th, he gradually got worse; the tumor increased, and now reached as high as the cricoid cartilage, and, by its pressure upon the trachea and œso-

phagus, partially impeded respiration and deglutition. His shirt-collar, which, prior to his illness, would button comfortably, could not now be made to meet by more than three inches; his countenance became bleached; pulse more feeble; and it was evident that the lowering system had been carried as far as it could with safety.

Under these circumstances the operation was recommended, as the only remaining chance. Its advantages and disadvantages were fairly stated, and the chance of success, although small, made him anxious that it should be performed. Dr. Bent, of Derby, saw the patient on the 17th, and concurred in the propriety of the operation, as a last hope.

On the morning of the 22d of July, the day proposed for the operation, the patient became so agitated, that the pulsation of the tumor of the heart, and the large arteries, especially the abdominal aorta, was perceptible to the eye. The operation was performed in the presence of Messrs. Bennet and Brown, of Derby; Mr. Ingle, of Ashby-de-la-Zouch; and Mr. Walne, of Chancery Lane,—Surgeons. In consequence of the tumor extending so high up the neck, there was some difficulty in getting down to the sheath of the artery, which was opened to the extent of half an inch. The artery appeared healthy, and was easily secured by a single ligature of strong silk. Immediately after tightening the ligature, the pulsation in the different branches of the external carotid artery ceased, except a slight fluttering in the extreme branches of the temporal. The pulsation of the tumor continued without diminution.

23 and 24. He went on well. The pulsation in the tumor was stronger than it was before the operation, and the pulsation of the right radial artery was observed to be more forcible than that of the left.

25. He became feverish; pulse 120 and full; the right lip of the wound swollen and painful. Six ounces of blood were taken away from the arm, and some saline medicine administered. The blood was much buffed.

26. Morning.—Much better; pulse 92; stronger in the right radial artery than in the left; pulsation in the tumor still very forcible.

Evening.—The fever and pain in the tumor returned. He was again bled. Blood still buffed.

27. Better again this morning. He was taken worse at nine o'clock in the evening. Pulse 100; delirious; anxious countenance, and sickness. No diminution in the size of the tumor.

28. Much better, and continued so all day.

29. At seven, A.M. he was taken suddenly worse, and appeared to be dying; his countenance ghastly, and covered with perspiration; tracheal rattle, and inability to swallow. He appeared conscious, but could only speak in a whisper; pulsation in the tumor still forcible; the pulse in the right radial artery scarcely perceptible, whilst the left pulsated as strongly as it did the previous day. These symptoms were accompanied by a profuse pyalism. He remained in this state for several hours, at the expiration of which time he rallied, and by the evening (with the exception of the salivation, which continued,) he appeared quite as well as on the preceding day.

As he continued to improve from this period, it will not be necessary to enter into a daily report of the case; I shall therefore content myself with noticing the most prominent symptoms which occurred. One of the most remarkable was the obliteration of the arteries of the right arm and forearm, which was first observed in the arteries of the forearm on the 29th of July, the eighth day after the operation, for until that day the arteries of the right arm pulsated with greater force than those of the left. The process of obliteration was attended with severe intermittent paroxysms of pain, chiefly felt in the course of the brachial and axillary arteries. The brachial artery, after its obliteration, was hard and painful to the touch, and felt very like an inflamed absorbent vessel. The right arm wasted, and became partially paralysed, and continued to diminish for three weeks, at the expiration of which time several arterial anastomosing branches were observed pulsating on the back part of the arm. As these vessels enlarged, the limb improved very slowly, not having yet (Oct. 19) perfectly acquired sensation, nor its muscles the power of obeying volition.

On the 11th day after the operation, he was attacked with intermitting paroxysms of pain in the right side of the head and face, of the same character as the pain in the right arm, though not so violent: this pain ceased within a fortnight. The right side of the head and face became emaciated, and any one looking at him would immediately discover that the right half of the face was much smaller than the left. The

blood having since found its way into the temporal and facial arteries, the right side of the face is now nearly as plump as the left.

The ptyalism, which began on the 29th of July, continued until the middle of September, during which time he spit daily about a pint of saliva; a more generous diet, and a small quantity of ale, were then allowed, and the salivation subsided.

Three weeks after the operation he was able to sit up to his meals. The first time that he got out of bed, he perceived that the whole of the right side was numbed, and weaker than the left. The pulsation in the tumor, which had hitherto been more powerful than it was before the artery was tied, now (Aug. 15) began to diminish rapidly, and by the 23d of August, the thirty-third day after the operation, had so much subsided, that it was doubtful whether it arose from the passage of blood into the tumor, or from the impulse given to it by the subclavian artery beneath.

In five weeks after the operation, he was sufficiently recovered to be able to take daily exercise in a gig, or on horseback, and from this time he has continued to improve in health without interruption.

The obliteration of the right brachial artery is now complete, and above the insertion of the latissimus dorsi, the pulsation of the axillary artery can be easily felt. The pulse in the radial artery is scarcely perceptible in the right arm, increases daily, but is yet far from being of the size of the left. Sensation and susceptibility of the influence of volition are more perfect on the whole of the right side of the body, but still

that side is more feeble than the left. The tumor is hard and firm, and has diminished about one-third since the operation. By pressing it from above downwards, a feeble, deep-seated pulsation is felt, but in grasping the tumor and using lateral pressure, no pulsation can be perceived.

On the 13th of October the wound was nearly healed; the ligature had not come away, and as it acted as a source of irritation to the small wound, it was cut off level with the skin.

The most peculiar features which this interesting case presented, were—1st, the obliteration of the arteries of the right arm; 2d, the profuse salivation; 3d, the disposition to paralysis of the whole of the right side of the body.

The two first symptoms commenced on the 8th day after the operation; and I think there can be little doubt that the obliteration of the arteries of the arm was accomplished by inflammation extending from the aneurismal sac to the internal membrane of the subclavian artery, and thence to the brachial artery. Might not the active obliteration of such large arteries as those of the arm and forearm, be the cause of the unpleasant train of symptoms which occurred on the 8th day after the operation? The salivation appeared to be connected with the state of the digestive apparatus; for, as soon as ale, and a generous diet, were allowed, it gradually subsided. I am at a loss to assign the cause of the numbness and debility of the whole of the right side of the body, (which were only observed when he first left the bed,) unless they originated in a greater quantity of

blood circulating in the left hemisphere of the brain than in the right, which undoubtedly would be the case after the application of a ligature to the common carotid. What tends to confirm this opinion is, that now, thirteen weeks after the operation, the balance of circulation in the brain being reëstablished, the numbness and debility of the right side of the body have nearly disappeared.

In conclusion, it is worthy of notice, that, since the operation, he has become more irritable in temper, and his memory is evidently weaker.

So far as this case has yet proceeded, it amply justifies the operation; and the man probably owes his life to Mr. Wardrop's fortunate suggestion. Should any untoward circumstance occur, leading to any other conclusion, it shall be communicated.

It is now five weeks since he resumed his usual avocations, and he regularly attends the markets and fairs of Derby, a distance of seven miles.

BOSTON, TUESDAY, MARCH 24, 1829.

At the last session of the Legislature of Massachusetts, a gentleman of talents and education, of his own free motion, laid before that honorable body a proposition for legalizing the dissection of dead bodies for the benefit of the living. The Act which he proposed was not well understood; nor was the subject discussed with sufficient freedom to bring the merits of the case fully into view. An unfavorable turn was given to it, by the representation that it would be a hardship on the poor, and render their last days very unhappy.

The House appeared to receive a disagreeable impression on the subject, and the principal clause was at once struck out; while that increasing the penalties for exhuming dead bodies was retained. On a subsequent day, however, the subject having been more fully explained, the House almost unanimously agreed to reject the bill imposing additional penalties; and thus the affair rests.

So far as the poor are concerned, it is of great importance to them that physicians in general should have an opportunity of dissection. If they are not permitted to do so, a few physicians whose circumstances allow them to visit foreign countries will be employed by the wealthy; while the poor must be made the unhappy victims of the ignorant and unskilful.

To give our medical friends at a distance an opportunity of enjoying the enlightened views of a Boston Editor, we insert the following sketch of the debate:—

A bill was reported by the Committee on the Judiciary, in the state legislature, which was ordered to make inquiry into what alterations were required in the laws to prevent the violation of the sepulchres of the dead, which contained two important provisions:

1st. That any person or persons detected in stealing a body, or in receiving or disposing of a stolen body, should be sentenced, on conviction, to imprisonment not exceeding three years, or to pay a fine not exceeding a thousand dollars.

2d. That when any pauper, who had been supported at the town or state charge, shall die, it shall be the duty of the selectmen to give notice to any kindred or friends, within a reasonable distance, and if no person

shall apply within forty-eight hours, to take the body and engage to give it christian burial, it shall be lawful for the selectmen, if they see proper, to give such body to any professor of surgery, to be used for the advantage of anatomical science, provided such professor shall engage to give the remains christian burial, after they shall have been so used.

A general revulsion was observed in the House, when the latter proposition was read, and a motion was immediatly made to strike it from the bill. One gentleman only rose in its favor, and such a shrinking was felt by every one on approaching the subject, that even he stammered and hesitated, and could not say anything with a firm heart and a stout tongue. Half a dozen persons were in favor of increasing the penalties for robbing the grave; others thought that the penalties were already heavy enough. One person wished, that any person who would steal a body, might be imprisoned, ruined, and made an outcast from society. Another thought the crime should be punished with death, and a third spoke of moving an amendment, that any person detected in stealing a body should himself be given up for dissection. It seemed to be conceded on all hands, that no mercy should be shown to those, who desire to benefit living bodies by an examination of dead ones; and it was manifest, that every one had rather be disposed of by worms unceremoniously, than by their fellow men with all due form and solemnity for a useful end. The association of surgeons in Dublin, who agreed to give up their bodies for dissection, were sneered at, and it seemed to be considered, that a deficiency of usefulness in life, should not be made up by a beneficial disposition after death. One gentleman had the boldness to say, that surgeons must have opportunities for dissection, and that the march of improvement was going on, so that provision would ere long

be made for their information; but even he did not defend the bill, and his sideway remarks caused the fleshy parts of the honorable members to crawl horribly.

For ourselves we should be opposed to the bill, most devotedly, but not for any reason thus assigned. If a body can be given to the surgeons, when there are no friends to the dead to regret it, very well; but to make a law, like this, which would be sure to make the paupers themselves miserable, even though it be on account of silly prejudices; which would render their latter days horrible from visions of the surgeon's knife, busy with their brains, would be an act of barbarous cruelty, unworthy a humane and christian people. Let the surgeons set the example and pass a law in the Medical Association, that every member shall surrender his body for the good of mankind, after death, and the prejudices of the world will in time wear away, so that the college may be graced with a fresh subject every day in the year, all contending for the honor of being useful.—*Bulletin.*

The concluding proposition exhibits a wonderful degree of sagacity on the part of the writer; for it will stand as an unquestionable answer to all that the faculty can urge in favor of dissection, so long as they do not grant their own bodies for the purpose. But why, let us ask this ingenious author, should the bodies of the faculty be devoted to dissection? Is it intended as a peculiar honor and privilege to that profession? If so, the objections to anatomy have ceased to exist. If it is intended as a call on them to make peculiar sacrifices, why should they be thus called on? The medical profession get no advantage from dissection independent of that of the

community; on the contrary, the study of anatomy is a heavy tax on their time, health, and money. If the community are willing to discharge them from this part of their duty, their labors will be prodigiously lightened; access to the profession comparatively easy; and if the knowledge of chemistry can also be dispensed with, the burden of attending medical schools and lectures may be got rid of, and the student will require nothing more than to read and ride his three years with the nearest and most accommodating doctor. The practice of physic might be much simplified in this way; for the physician, being ignorant of the variety and delicacy of the human organs, would pour in his drugs as into a cauldron; and the surgeon would amputate his patient with an axe, leaving the bloodvessels to secure themselves, or searing the bleeding limb with hot pitch, as is the practice among some savage nations. Such being the happy results of giving up the study of anatomy, the medical profession would have much reason to congratulate themselves on the simplification of their art, and but little inducement to bequeath their bodies for dissection.

For ourselves we are free to say, that instead of being food for worms, we should prefer to have our bodies anatomized, and our bones handsomely prepared and hung up in the room of some respectable anatomist. But we shall never admit that the community have any claim to dissect us as professional persons; nor shall we on this ground allow any such dissection. The public should feel obliged to us for cultivating the prac-

tice of dissection, under circumstances dangerous, disgusting, and expensive, while we are alive, without claiming the use of our bodies when deserted by their spiritual tenant.

The community it is that are benefited by dissection. It is the community that call for a cultivation of anatomy. Whoever is affected with a dangerous sickness, being naturally desirous of prolonging his life, is apt to apply to such physicians as he thinks best acquainted with the means of preserving his physical frame from destruction. Whoever is so unfortunate as to have a dangerous cancer or wen, will naturally resort to such surgeon as he thinks will most certainly free him of it, and at the least risque of killing him in so doing. Thus an enlightened community pay and always will pay for dissection; and the premium they pay will be in proportion to the difficulty and expense of acquiring the requisite medical skill.

Hence it has happened that the enlightened community of the Scotch metropolis must be considered responsible for those horrid, barbarous, and unparalleled events, which have lately occurred in the midst of all its light and literature,—events, which, if we had not the fullest evidence of, we should scarcely credit of any existing nation, but the cannibal New Zealanders. Twelve, or as it is reported, even twenty or thirty murders, have been committed in Edinburgh, for the sole purpose of selling the inanimate bodies of the dead to surgeons for dissection! What punishment would be too great for these surgeons? True, they had no suspicion that the bodies had been mur-

dered; yet it is certain that without this practice of dissection, the murders would not have been committed. What penalty, then, would be too heavy for them? Would it not be justifiable to inflict the human and benevolent punishment proposed in the legislature of Massachusetts, by one of its members, that the persons guilty of dissection should themselves be EXECUTED and DISSECTED!!

The crime, however, lay not with the surgeons, who were the wretched victims of this imposition, but with the community,—with that community which first compelled them to learn anatomy, and then, by every law which human ingenuity could devise, attempted to *deprive them of the possibility of doing it.*

We shall resume the subject of these murders, and give an authentic account of them hereafter.

THE operation for carotid aneurism was performed a few days since by Dr. LEWIS, at the House of Industry, in South Boston. The patient is doing well.

MARCH 18th, three operations were performed at the Massachusetts General Hospital; and in the course of the preceding week there were five admissions of surgical cases, viz.: cancer of tongue; fistula in ano; disease of the bones of the hand; hip disease; stricture of the urethra. Among the operations was the removal of one half the tongue for cancer. Of this we shall give some further account.

BOSTON is remarkably healthy. The weather for the last seven weeks has been steadily cold, and the ground covered with snow, which it still is.

The cold weather continues later than common. The approaching fluctuations of the weather, the dissolving of the snow, and the more mild and moist state of the atmosphere, will produce affections of the throat, larynx, and lungs. Varicella, the chickenpox, prevails. Some of the cases present precisely the aspect of the vaccine vesicle.—We have in Boston abundant opportunity of proving that the chickenpox and smallpox are not the same disease, as supposed by a number of British writers; since, while the former is and has been quite prevalent, there is no instance of the latter.

Now is the best season for vaccination. Those who have hitherto neglected it, will do well to have it done immediately, while the smallpox, which is in the State of N. Hampshire, half a day's journey from town, is still at a distance. If they defer it, as is usually done, until they are alarmed by rumors of smallpox, they may expect to have it done not so satisfactorily, as when it is employed, as it always should be, with every possible precaution.

THE recent alarm of smallpox in New-Hampshire has brought into Boston abundance of applications for vaccine fluid. Physicians ought to know that it is impossible, under ordinary circumstances, to procure a great supply of this fluid suddenly, and that they may save themselves and others the trouble of seeking it, by preserving the vaccine scab in a close vessel and cool place. This, when they wish to vaccinate, is to be slightly moistened at the under surface, and the vaccinating lancet dipped in it.

ADVERTISEMENTS.

DENTAL SURGERY.

THIS day received by Benjamin Perkins & Co., No. 135, Washington Street,—A SYSTEM OF DENTAL SURGERY. In three parts.

1. Dental Surgery as a Science.
2. Operative Dental Surgery.
3. Pharmacy connected with Dental Surgery.

By SAMUEL SHELDON FITCH, M.D., Surgeon Dentist. Denticum curam habeto ut bene digeras et diu vivas; laxatis dentibus laxantur et chylaceos officinæ; hinc mille malorum occasiones.—Baglivi XIII.

March 17.

ep6w

NEW MEDICAL WORK.

JUST published and for sale by Benjamin Perkins & Co.—THE FRENCH PRACTICE OF MEDICINE; being a translation of L. F. Begin's treatise on Therapeutics; with occasional notes and observations, illustrative of the treatment of diseases in the climate of North America. By XAVIER TESSIER.

ep3w

March 17.

CASEY'S APPARATUS FOR THE CURE OF DISTORTED SPINE.

THE Proprietor of the Dormant Balance for the cure of Distorted Spine, gives notice, that he has established an agency in this city, for the convenience of those who may wish to avail themselves of this invention. Physicians having under their care the subjects of this disease, or patients themselves, may have an opportunity of inspecting the apparatus, and examining the testimonials of its efficacy, at Mr. Charles White's, corner of Winter Street. It is recommended, however, that all patients availing themselves of this invention, should do it by the advice, and under the superintendence, of their own physicians, as it is only by medical opinion that the proper subjects of the machine can be determined, or the other proper measures to be made use of in conjunction with it, can be pointed out. The Proprietor expressly disclaims the idea that a cure is to be effected, in any case, by mechanical means alone. This machine has received

the approbation of many of the most eminent medical men in this city and New-York. Upon application to the agent, references will be given, and written testimonials exhibited.

All letters, post-paid, addressed to J. Lincoln, No. 27, Fayette Street, will be attended to.

Boston, Feb. 6, 1829.

EUROPEAN LEECHES.

RICHARD A. NEWELL, Druggist, 91, Summer Street, has on hand a small lot of EUROPEAN LEECHES, in excellent order, and of very large size, which he will sell at a fair price.

N. B. Leeches applied as usual, or sent to any part of the city. 4t.

SURGICAL INSTRUMENTS.

DAVID & JOHN HENSHAW & Co. No. 33, India Street, near the head of Central Wharf, have for sale a very extensive assortment of Surgical Instruments. Gentlemen wishing to purchase will find it to their advantage to call and examine them. Oct. 14.

NATHAN JARVIS,

Druggist and Apothecary,

HAS taken the Apothecaries' Hall, No. 183, Washington Street (lately kept by Messrs. Wm. B. & Henry White.) His stock of Drugs and Medicines is complete and genuine. Physicians and others are assured that their orders, prescriptions, &c. will meet with prompt and strict personal attention.

The old friends of this establishment are requested to continue their patronage.

MANUAL FOR THE USE OF THE STETHOSCOPE.

JUST published by Benjamin Perkins & Co.,—MANUAL FOR THE USE OF THE STETHOSCOPE, being a short Treatise on investigating Diseases of the Chest. From the French of M. Collin, with an Introduction and Plates. By a Fellow of the Mass. Med. Soc.

The Stethoscope may also be obtained as above in the most approved form.

ep3w

Jan. 20.

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

I.

Cases of Neuralgia, or painful Affections of Nerves.

By JOHN C. WARREN, M.D.

IN a former number of this Journal I began the consideration of this subject, and have deferred prosecuting it till this time in order to observe the result of cases then in progress, and the influence of particular remedies on them. The delay has enabled me to obtain useful additions to the information I had before, and has shown that there is a large field for the observation of these diseases which has not been explored, and into which I have barely entered.

Painful affections of the nerves were divided into those of the head, extremities and trunk; and the first paper was occupied with those belonging to the head. I shall next take up those of the extremities, as more frequent than those of the trunk. First, those of the upper extremities; second, of the lower extremities; afterwards, those of the trunk; and, lastly, shall add some general remarks.

NEURALGIA OF THE UPPER EXTREMITIES.

Painful Affection of the Arm, caused by a Fit of Coughing.

A young lady affected with a se-

vere cough, but otherwise in perfect health, during a fit of coughing, was seized with a severe pain, like that from an electric shock, in the upper part of the arm, extending down the arm to the elbow, where it ultimately became most severe. From this time she was subject to paroxysms of this pain, occurring suddenly; sometimes daily, sometimes at periods of a few days, and continuing with great violence for an hour or more. The sensation of the hand was altered. Everything she touched appeared warm. If the arm was plunged into *warm* or *cold* water, it felt equally warm to her. Blisters, caustics, electricity, frictions of all kinds, the internal use of hemlock, stramonium, belladonna, iron, were all ineffectual. For a time the affusion of warm water seemed useful, but it soon lost its effect. The sulphate of quinine was tried a number of months. No sensible benefit was derived from any one remedy. The health, however, continues good after a number of years of this suffering. The paroxysms are now less frequent and less painful, but at present there is no prospect of their disappearing.

Quere—Is this disease seated in the nervè cutaneus externus,

which perforates the coraco-brachialis muscle, produced by a spasmodic contraction of that muscle on the nerve? The locality of the pain would lead us to believe it. Or is it an affection of the brachial plexus and all the nerves of the arm, communicated to them by the phrenic, in consequence of the spasmodic action of the diaphragm in that violent fit of coughing which brought on the disease?

Injury of the Ulnar Nerve, followed by muscular Contraction.

A lady of about 30, in good health, fell, and received the force of the fall in the right elbow. The ulnar nerve was contused, and a most acute nervous pain produced, which lasted about a week, and was accompanied with some degree of swelling. After this the pain subsided. In a few months she began to experience pains in the middle of the hand, accompanied by a contraction of the interosseous muscles between the ring and middle finger, and a sensible indentation at the time of the paroxysm. The paroxysms occur nearly every day, and are accompanied with a temporary paralysis of the fingers. I advised the affusion of hot water, and internal use of iron; but have not learnt the result.

Why the contraction should occur between the ring and middle finger, rather than between the ring and little finger, where the volar branch of the ulnar nerve passes, I know not. I state the fact.

Painful Affection of the Ulnar Nerve, cured by tepid Affusion.

A young lady, of delicate constitution, struck the elbow, and the ulnar nerve, where it passes over

the internal condyle of the os humeri. Severe paroxysms of pain followed in the elbow, along the inner edge of the forearm and hand, and gave her but little respite for the space of two years. They frequently alternated with indigestion. She became emaciated, lost her appetite, and her life seemed to be seriously threatened. At length she was cured of the neuralgia by affusion of seawater, at the hospital, of the temperature of 100 deg., poured on through a small tube, from twenty to thirty minutes. Her health is now good, though she has been always subject and still is to dyspeptic attacks. The pain in the nerve has not returned for two years.

Neuralgia of the Ulnar Nerve from striking it.

James Wilson, aged 19. While at sea, fell, and struck the left elbow,—was at the same time exposed to cold and wet. Had an attack of pain in the injured part, sometimes extending to the hand, particularly its inner edge and fingers, occurring in paroxysms of darting pain of great severity, two or three times a day. Elbow swelled; general health good. Ordered large doses of carbonate of iron. Two moxas, three quarters of an inch in diameter, were applied behind and near the internal condyles of the os humeri. He bore the moxas well, but was not relieved by them, and left the Hospital before other remedies could be employed.

Distressing Affection of the Arm from Injury of the Ulnar Nerve.

The following case is one in which the effect of the Carbonate of Iron

was long tried, with but little advantage.

Margaret Twiss, about 24 years old, was admitted into the Massachusetts General Hospital in May, 1827. About four years ago, fell, and struck her elbow. The accident was followed by swelling of the elbow, and when this subsided, she felt a pain in the elbow, extending to the wrist, little finger and ring finger. These pains have continued, with short remission, to this time. The hand and arm are useless from pain and debility. Her health is much impaired, and she has no hope of relief but from amputation of the limb.

This patient remained in the Hospital from May, 1827, to April, 1828, under the use of various remedies. At first, leeches and blistering were used; next, hot fomentations of sea-water; then, various caustics; afterwards, frictions with tartrate of antimony, electricity, occasionally cupping, affusions of hot sea-water, tight bandaging from the fingers to the shoulders, patient frictions, and many other remedies, each producing a temporary relief only. She had general salt waterbathing; underwent a course of mercury; took in succession, hemlock, stramonium and belladonna; finally, the Carbonate of Iron. This she began to take in the dose of a scruple, and increased it gradually to a drachm, when her stomach wholly rejected it. Then it was omitted; resumed, and given in doses accommodated to her stomach for three months, without any good effect. All medicines were then omitted, excepting bark and wine. The pains, however, continued, affecting sometimes the elbow, some-

times the wrist, and extending to the two smaller fingers. Her appetite fluctuated; she had frequent derangements of the stomach and much headach.

In the autumn, the operation for division of the ulnar nerve was performed. The nerve was exposed behind the internal condyle of the os humeri; a piece an inch long was removed. This for a time gave her relief; but the pains returned, and at length, in February, 1828, amputation of the arm was executed above the elbow. This produced an amelioration in her sufferings, without perfect relief. She continued in the hospital until she had wholly recovered from the operation, and was then advised to return to her native woods, where, it seems probable, her cure will be completed.

The dissection of the amputated limb presented no visible derangement in the nerves or other organs.

The above are not all the cases of affection of the ulnar nerve which I could relate. This, of all the nerves of the upper extremity, seems to be most frequently disordered. This happens, probably, from its more superficial and exposed situation. The peroneal nerve in the lower extremity presents an analogous case.

Severe Affection of the Wrist and Hand, from a slight Injury, suddenly suppressed by another Disease.

A young lady, in good health, but of weak constitution, aged 18, about two years ago began to experience a pain in the hand. In the spring of 1827, she had a slight fall from the step of a car-

riage, and hurt her lame hand in attempting to save her body. After this the pains increased, and in the autumn of 1827 began to assume a severe and alarming character. The pains became incessant, and were rendered spasmodic, by the slightest touch of any part of the hand or fingers to any other body; or we might rather call them *electric*. When sitting up, she was obliged to recline the arm in such a manner that nothing touched the hand, and in the night was frequently kept from her bed; but when, overcome with fatigue, she was obliged to lie down, it was with the hand out of bed, hanging over its edge. In this state, she was brought to me for advice. Perceiving the hand considerably swelled, I wished to examine it, in order to ascertain the condition of the bones and the soft parts. Finding this proceeding indispensable, she called up all her resolution to enable her to withstand the pain; but when I made a moderate pressure on the affected part, the agony she experienced was nearly insupportable. I found a thickening of the periosteum of the carpal bones, with enlargement of the end of the radius, apparently its cartilaginous extremity. I advised the use of large doses of the Carbonate of Iron,—two drachms, three times a day,—and the external application of a wash of extract of Belladonna. The stomach did not bear the Iron well, but it appeared to give relief at one time. The course of events after this, is detailed in the following letter from her physician, Dr. Bartlett, of Concord.

Concord, March 16th, 1829.

DEAR SIR,—My patient, from

the time you saw her, in January, 1828, continued in many respects the same, until November. The paroxysms of excruciating pain were not, on the whole, so frequent or so long-continued, and she could bear the motion of riding with less suffering in the summer than in the previous winter; but the hand was as much swollen, and the fingers as painful to the touch, as when you saw her; and from that time, and for months before, the arm had never been kept in bed for an hour. Early in November, she was attacked with lung fever, which yielded in eight days to V. S., emetics, and the Dover's powder, with calomel. On the fourth morning of the fever, after a night of delirium and restlessness, I found her with her arm lying in bed, which surprised me. On taking off the bandage, the swelling had entirely subsided, and from that moment the diseased hand and arm became as well as the other, and during convalescence she used it with the same freedom, and could bear her weight upon it on getting out of bed.

I was unable to satisfy myself at the time, whether the subsidence of the disease in the hand was owing to affection of the whole system, produced by the fever, upon the principle that no two diseases can act with violence in the system at the same time,—the one overpowering or absorbing the other,—or whether it was owing to the mercurial action. To whichever cause it was to be attributed was of little moment to me at the time, as the painful disease was overcome.

The pleasing prospect of recovery was soon overclouded; for as soon as the general health was

reëstablished, and the mouth well, the hand began to swell and to be painful ; and within a week from the time she left her chamber, the pain in the wrist and the swelling, and inability in the motion of the hand, became as bad as ever, with only this difference,—the nerves supplying the fingers had lost in a great measure that morbid sensibility, and the hand and fingers could be bent and handled without pain, which never before could be touched without producing torture.

She continued in this state till the second week in March, when I determined to satisfy myself whether the fever, or the mercurial action, had been the means of overcoming the disease so entirely in November. I commenced with the Submur. Hydr. in small doses, every four hours; and on the fourth night the mouth became sore, and she was fully under the influence of mercury. The same effect was produced ; the pain and swelling subsided entirely during the fifth day. I have no doubt she could have used the hand as well as before ; but supposing her constant use of it, when well before, had contributed to make it swell sooner than it would have done, I immediately, on its subsiding, applied strips of adhesive plaster around each of the fingers, the wrist, and almost the whole arm, and placed it in a splint and bandage. I kept it confined in this state till yesterday, and on taking off the dressings, I found it almost as free from swelling as when I applied them, although it is seventeen days since her mouth has recovered from the effect of the calomel. What will be the result of this course, I know not ; but I have my fears.

Will you be kind enough to give me your opinion in regard to her case? The interest I have felt in the patient must be my excuse for being so prolix ; I hope you will excuse it.

Your obedient servant,
 JOSIAH BARTLETT.

My opinion is, that the sudden remission of pain is to be attributed to the existence of inflammation in the lungs at that time ; of course, that there is much reason to apprehend a return of the pain, although it may be temporarily diminished by mercurial action.

Pain in the Nerves of the Thumb, cured by Incision.

Winter Street, Feb. 2d, 1828.

DEAR SIR,—The following is a brief account of the case of the young lady on whom you operated for a painful affection of the nerves of the thumb.

In the winter of A. D. 1824–5, after sewing on some hard cloth, she felt a tenderness in the thumb, and a sensation as if there were a splinter or the point of a needle near the bone. The thumb was wrapped with cotton and laudanum, and in a few weeks was well again. The same difficulty was repeatedly produced by much sewing, and as often yielded to the above treatment, till about the 1st of March, 1827, when it was brought on in a similar manner, and did not appear to be benefited by any application which was made to it. On every attempt to use the thumb, the instant it came in contact with any body, the pain she suffered was very distressing.

You divided the nerves by an incision on each side, about half way between the first joint and

the end of the nail. Previous to the operation, various modes of treatment were adopted for six months, during which time, there were applied for several days or weeks in succession,—Laudanum, —Tinct. Saponis et Opii,—Solut. Mur. Amm.,—Alcohol,—Ol. Terebinth.,—Cold shower bath,—Friction,—Electricity,—Blister over the whole thumb,—and, last, by your advice, leeches and tepid bath alternated.

After the operation of dividing the nerves, which was done, I think, in the early part of September, the thumb remained very sore or tender for several weeks, in consequence of the incisions, though they united without supuration. It was soon found, however, that the seat of the long-continued difficulty was the least sensitive part of the thumb. It continued to improve, and is now well. There is, indeed, a very slight numbness and weakness discovered when it is much used.

Your kindness and attention in the case is felt and acknowledged, not only by the patient and her friends, but by

Your obedient servant,
J. F. FLAGG.

In this case the nerve was divided on both sides, because it was impossible to determine which nerve was the principal seat of the disease. A simple division, without cutting out the nerve, was successful.

*Painful Affection of the Thumb,
caused by an Accident.*

A lady, in shutting a door suddenly, sprained her thumb, and had a very acute pain at the moment. The first joint swelled for a few days, and then the swelling sub-

sided. But a pain continued to affect it with great severity, at different intervals of time, and was invariably brought on by attempts to use the thumb, especially in sewing. Leeches and blisters were used without relief. Finally, she was relieved by going to the hospital, and pouring on hot sea-water at 110 deg., for about fifteen to twenty minutes at a time. Hot applications always relieved, and cold distressed her.

II.

Atrocious Murders in Edinburgh.

WE now present to our readers a full and authentic account, so far as is known, of the late murders in Edinburgh, and the trial thereon. These events are unparalleled in the course of human affairs, and seem to us to merit the attention of reflecting persons, not as matters to be wondered at for their atrocity, but to be viewed in connexion with the causes that led to them, and the means that might have prevented them. Edinburgh, formerly the first medical school in Europe, is now sinking into disrepute, for the want of means for the study of the human structure. Severe laws and bigoted prejudices have been repelling the science of medicine from that city, and have led to the use of these unhallowed means to preserve what little there is remaining.

The trial of *William Burke* and *Helen M'Dougal* for the commission of several murders, in order to sell the bodies, commenced in the High Court of Justiciary, Edinburgh, on Wednesday week. The evidence disclosed a scene of cold-blooded depravity happily

unparalleled in this country ; and the horrid narrative of the approver Hare, heightened as it is by the subsequent admissions of his fellow murderer, presents a series of crime so revolting to our nature, that it partakes more of the nature of romance than reality. The following account of these extraordinary trials, taken from the Scotch papers, gives a succinct and comprehensive view of the whole proceedings.

On the morning of the trial, all the avenues to the Court were besieged before day-light. At nine o'clock the court-room was completely filled. Lord Macdonald and another noble lord were seated on the bench. A few minutes before ten, the prisoners were brought to the bar. Burke is of a short and rather stout figure, and was dressed in a shabby blue surtout. There was nothing in his physiognomy, except, perhaps, a dark lowering of the brow, to indicate any peculiar harshness or cruelty of disposition. His features outwardly appeared to be firm and determined ; yet in his haggard and wandering eye there was at times a deep expression of trouble, as he unconsciously surveyed the preparations which were going forward. The female prisoner appeared to be more disturbed ; every now and then her breast heaved with a deep-drawn sigh, and her looks were desponding. She was dressed in a dark gown, checked apron, cotton shawl, and a much-worn brown silk bonnet.

The Judges present were, the Lord Justice Clerk, Lord Pitmilny, Lord Meadowbank, and Lord Mackenzie. The counsel for the Crown were, the Lord Advocate, Robert Dundas, Esq. ; A. Anson

and A. Wood, Esqrs. ; James Tytler, Esq., Crown Agent. Under the impression that the excitement in the public mind against the prisoners might interfere with the administration of strict justice, a splendid array of counsel, including the brightest ornaments of the Scotch bar, volunteered to defend the prisoners. The prisoners' counsel were—For Burke, the Dean of Faculty, Patrick Robertson, David Milne, George Patton, Esqrs. For M'Dougal, Henry Cockburn, Duncan M'Niel, Hugh Bruce, Mark Napier, Esqrs. ; James Beverige, Esq., one of the agents of the poor, agent.

The counsel for the prisoners objected to the whole of the indictment being read, as it tended to create a prejudice against them. Lord Chief-Justice Clerk overruled the objection, and the trial proceeded.

The indictment charged three several murders, in the first and third of which M'Dougal was alleged to be implicated. The first stated, that, "on one or other of the days between the 7th and the 16th days of April, 1828, or on one or other of the days of that month, or of March immediately preceding, or of May immediately following, within the house in Gibb's Close, Canongate, Edinburgh, then and now or lately in the occupation of Constantine Burke, then and now or lately scavenger in the employment of the Edinburgh Police Establishment ; you, the said William Burke, did wickedly and feloniously place or lay your body or person, or part thereof, over or upon the breast or person and face of Mary Paterson or Mitchell, then or recently before that time, or formerly, residing with Isabella

Burnett or Worthington, then and now or lately residing in Leith-street, in or near Edinburgh, when she, the said Mary Paterson or Mitchell, was lying in the said house in a state of intoxication, and did, by the pressure thereof, and by covering her mouth and nose with your body or person, and forcibly compressing her throat with your hands, and forcibly keeping her down, notwithstanding her resistance, or in some other way to the prosecutor unknown, preventing her from breathing, suffocate or strangle her; and the said Mary Paterson or Mitchell was thus, by said means, or part thereof, or by some other means or violence, the particulars of which are to the prosecutor unknown, wickedly bereaved of life, and murdered by you, the said William Burke; and this you did with the wicked aforethought intent of disposing of, or selling the body of the said Mary Paterson or Mitchell, when so murdered, to a physician or surgeon, or person in the employment of a physician or surgeon, as a subject for dissection, or with some other wicked and felonious intent or purpose, to the prosecutor unknown." The second charged Burke with the murder of James Wilson, commonly called Daft Jamie, a porter in Edinburgh, by precisely similar means, between the 5th and 26th days of October, 1828, at a house in West Port or Portsburgh, Edinburgh, in the occupation of William Hare; with intent to dispose of the body, &c. A third count charged the prisoners with the murder of Madgy, or Margery, or Mary M'Gonegal, or Duffie, or Campbell, or Docherty, then or lately residing in the house of

Roderick Stewart or Stuart, then and now or lately laborer, and then and now or lately residing in the Pleasance, in or near Edinburgh. This crime was also charged to be perpetrated in October, by the same means, and with intent to sell the body.

Each of the panels submitted that they were not bound to plead to a libel which charged them individually with three unconnected murders, committed at different times, and in two of which only one of them was charged with being concerned. They also asserted their innocence. Mr. P. Robertson, for the defence, urged these objections with considerable force. The Lord Advocate consented to put off the trial of the woman for the present, if her counsel thought it would be beneficial to her. The Court expressed their opinion that the indictment was legal, and that the public prosecutor should select out of the three acts of murder, the one on which he should go to trial. The Lord Advocate—"I shall proceed upon the last, and therefore the woman must be detained, and put upon her trial along with the man."

The prisoners were then severally arraigned on the third count, and each pleaded Not Guilty.

Two witnesses detailed the circumstances of the arrival at Edinburgh of the old woman, Margery Campbell, in search of her son. One of them had known her at Donegal, in Ireland. On Friday, the 31st of October, she left her lodgings to return to Ireland; and the witnesses did not hear of her again until they saw her dead body at the police-office on the 2d of November.

William Noble, shopman to Mr.

Rymer, of Portsburgh, said, that on the 31st of October, a woman, similar in appearance to Margery Campbell, and who said her name was Docherty, came to the shop asking charity; Burke was in the shop, and hearing her name, he said she was some relation of his mother's, and he took the woman away with him, saying he would give her breakfast; on the next day Burke purchased some groceries and an old tea-b at the shop.

Ann Black said that Burke and M'Dougal resided in the same house as herself; on the 31st of October she saw Burke enter his house with a woman following him; in the afternoon she went into Burke's apartments, and saw the same woman sitting by the fire supping porridge and milk; she had scarcely any clothes on, and they said they had been washing; M'Dougal said that she was a Highland woman, a friend of her husband's; some time after dark, the woman appeared very intoxicated; Mr. and Mrs. Hare came in with a bottle of spirits before supper, and Hare insisted on drinking; they all tasted, and were merry; and Hare, Campbell, and M'Dougal danced; between ten and eleven o'clock, Burke came home, and a disturbance soon afterwards took place, as if Burke and Hare were fighting. In the morning, witness asked M'Dougal what had become of the old woman; and she replied that Burke and her had been too friendly together, and she had kicked her out of the house, adding, at the same time, "Did you hear it?"

Another witness corroborated this statement.

Hugh Alston, who lived in the same house with Burke, heard a noise on the night of the 31st of October, and a woman called out

"murder!" He also heard a noise of two men, as if wrangling and struggling, and the woman crying "murder!" that continued for about a minute, and then he heard a cry as if a person had been strangled; he heard no noise of struggling; he was often alarmed by cries, and was afraid of fire, but never thought of murder; he returned a second time, and heard the sound of the men's voices, who were speaking in a lower tone, and the woman had ceased crying; he then went into his own residence.

David Paterson, keeper of the museum belonging to Dr. Knox, went home on the 31st of October, about twelve o'clock, and found Burke knocking at the door. He said to witness that he wished to see him at his house, and he accordingly went there with him. He found in it two men, including Burke: Hare and his wife were present, as also M'Dougal. After he went in, Burke said he had procured something for the doctor, and pointed to the head of a bed, where some straw was lying. The observation was made in an under voice, but not in a whisper. No observation was made by any of the other persons. Nothing was shown to witness; but he understood, when Burke said he had procured something for the doctor, that he alluded to a dead body. He used the expression "to-morrow." There was a sufficiency of straw in the corner to have concealed a dead body. Witness sent his sister next morning for Burke. Burke came about nine o'clock, and witness said if he had any thing to give Dr. Knox, to take it to him, and settle with himself. Saw Burke again, in one of Dr. Knox's rooms, in Surgeon's-square, along with Hare, Mr. Jones, Dr. Knox's assistant,

and the doctor. Heard either Burke or Hare say they had a dead body or subject, which they were to bring at night, and witness was instructed by Dr. Knox to receive any package which they might bring. Witness and Mr. Jones were in the way about seven o'clock, when Burke, Hare, and a porter named M^cCulloch, came with an old tea-chest. It was put into a cellar, the door locked, and witness and Mr. Jones went to Dr. Knox's house and informed him the men had brought what was expected. Dr. Knox gave witness five pounds, which, to prevent disputes, he was to divide; and having gone to a house and obtained change, he laid the money on a table, and each took his share. Five pounds was not the whole price; the balance was to be paid on Monday, when Dr. Knox saw what had been brought. The price he believed generally was to be eight pounds, but no bargain was made. On the Sunday morning, Lieutenant Paterson, of the police, and Sergeant-Major Fisher, called on him, and he gave the package to them which had been left the night before. He assisted in opening the box, which was found to contain the body of an elderly female, who did not appear to have been interred. The extremities were doubled up on the chest and thorax. The head was pressed down as if for want of room. Examined the body externally, stretched on a table. The face was very livid, and blood flowing from the mouth. In his opinion, the appearance of the countenance indicated strangulation or suffocation, by being overlaid. He found no other external marks upon the body that would be supposed to cause death; he was not present at the dissection of the body; the eyes

were not started, nor did the tongue hang out; the head was a good deal pressed down for the want of room; observed no mark about the throat; the lips and nose were dark colored, and a little stained with blood.

By the Dean of Faculty.—His reason for saying death had been caused by suffocation was, that the blood in a strangled or suffocated person rises in the head, and gives the face a livid appearance; he had seen the man Hare before, and knew that Dr. Knox had dealings with him for the procuring of dead bodies; he also had had dealings with Burke; they seemed to act jointly; had seen both assume the principal part: they frequently brought subjects which he supposed had not been interred; they frequently brought subjects to the lecture rooms; had heard of a class of persons who provided bodies which never had been interred; had known of young men attending poor patients who did give information of that fact to Dr. Knox, who handed over the direction to such persons to endeavor to make a purchase; in one instance a note was given to himself, and he handed it to these men, but the purchase was not then made. Both the men were the worse for liquor when he went to Burke's, but they knew what they were doing.

John Broggan was in Burke's house in the afternoon of Halloween; Burke and his wife, and Hare and his wife, were there, and an old woman, a stranger. Went again next morning; Mr. and Mrs. Gray were there then. Heard M^cDougal say, in answer to a question from some one, that she had kicked the old woman out of the house. Saw Burke flinging whiskey about the house in the forenoon.

James Gray and his wife were

next examined.—They said they were acquainted with the prisoners, and had lodged about five nights in their house. They recollected the old woman coming there on the night of the 31st of October; the old woman was the worse for liquor; Mrs. Hare forced the liquor on her. On the following morning, M'Dougal said she had been impudent, and they had turned her out of doors. Observed Burke throwing spirits about the house, saying he wanted the bottle empty to get more. They suspected that all was not right. Burke and M'Dougal left the room; they examined the straw, and found the body under it; there was blood on the face and about the mouth. They immediately took up their bundles, and were quitting the house, when they met Mrs. Burke, to whom they mentioned what they had seen. She told them to hold their tongue, and she would give them two or three shillings, and it might be worth ten pounds per week. Gray replied, "God forbid they should make money by dead people," and immediately gave information to the police.

John M'Culloch proved having been employed by Burke to convey the body to Dr. Knox's house. It was taken out from among the straw, tied in a sheet, and put into the box. They had great difficulty in getting the body into the box. They had to rack it to get it forced down. When he arrived at Surgeons'-square with his load, he was joined by Burke and M'Dougal, and Hare and his wife.

The police-officers proved having apprehended the prisoners, and finding the dead body at Dr. Knox's house.

William Hare was next examined. He was cautioned by Lord Meadowbank to speak truth. He

said he understood he was called only as a witness in the case of the woman Campbell (he emphatically said "the old woman.") Having been sworn in the common form, he said he was a native of Ireland, and had resided in this country about ten years. He was asked if he was a Catholic? He answered he was. He was then asked if he wished to be sworn in any other way? He said he did not know; he never had taken an oath before, and the form was all one he supposed.

(To be continued.)

III.

Death of Dr. Gorham.

THE medical profession and the public have to deplore the loss of one of the most valuable members of society, in the death of Dr. JOHN GORHAM. After a very sudden and violent attack, he died of a pleurisy on the 27th day of March.

Dr. GORHAM graduated at Cambridge in the year 1801; soon after he began the study of medicine as a pupil of the late Dr. WARREN, and received the degree of Doctor of Medicine at the usual period. He then went to Europe to complete his education, remained there about two years, and, on his return, became connected in marriage with the daughter of his former instructor. Through the intervention of this gentleman, he obtained the friendship and confidence of the late excellent Dr. DEXTER, then Professor of Chemistry; and was by him associated in the duties of that office, as Adjunct Professor of Chemistry. The same friendly hand opened for him the door to an extensive and respectable

practice ; in obtaining which, he was materially aided by a number of private courses of Chemistry to the citizens of Boston. In the year 1811, his colleague having resigned his office, Dr. Gorham was chosen Professor of Chemistry and Mineralogy in the University of Cambridge, and continued to give lectures in Boston and Cambridge till 1827, when the great increase of his business led him to resign this post, and devote himself wholly to private practice. During the time of his professorship, he published a valuable System of Chemistry, in two octavo volumes. He wrote many papers in the New-England Journal of Medicine and Surgery, of which he was a joint Editor for about fifteen years, and contributed also to the Boston Medical and Surgical Journal. He lent his aid to the improvement of medical science, by serving as Recording Secretary of the Massachusetts Medical Society, and held various other offices, which demanded labor and ability. He was to have delivered the next annual discourse of the Massachusetts Medical Society. His practice regularly increased till it became so great as to require efforts and exposures which predisposed him to disease, and threw him in the way of its exciting causes.

On Sunday, March 22, when in his usual state of health, which was firm and robust, independent of the circumstances just alluded to, he attended to his business in an open sleigh, in a stormy and snowy atmosphere. On that night, he was seized with a violent chill, followed by pain in the head and back, with some degree of fever. By the aid of powerful remedies

employed immediately, he got some relief in the course of the day ; but on the following morning was sensible of a pain in the left side, with some check in respiration. This pain was lessened by a large bleeding, by blistering and purgatives ; but in the evening of that day, like a shock of electricity, the pain in the side came on with indescribable violence and suffering. Bloodletting to faintness and other remedies gave but partial relief, and he was compelled to resort to large doses of Tincture of Opium, to alleviate a distress he could no longer support. On the day following he was more easy, though a bad pulse and respiration led to the opinion that his danger was great and urgent. On the fourth day the respiration became easy, but not free ; he had scarcely any cough ; was able to converse, and expressed a strong conviction that he should recover ; but, on the night of that day, he suddenly fell into a state of insensibility, and expired on the next day, after remaining for twelve hours in this condition.

On examination of the body on the day following, it was found that the pleura of the left side was extensively inflamed and covered with lymph, which glued it to the lung. The lower lobe of the left lung was so entirely solidified as to be wholly impervious to air, and the upper lobe in the same state, though not so wholly filled up with blood. Thus, the seat of the disease corresponded with that of the pain. The absence of cough is remarkable, and must be attributed to want of inflammation in the mucous membrane, or to a suffocation of the sensibility of the lung from pressure of blood.

Dr. Gorham had arrived at the period of life when a good physician is most valuable to the community; at the period, when to learning is added personal experience, when the judgment is mature, and when the confidence, not of a few individuals only, but of the public at large, is secured and settled. He was a good physician indeed, and the community realized his worth. He was in the midst of a full business, and ardent in the prosecution of it. He obtained not only the confidence, but the love of his patients, and enjoyed at the same time the respect and sincere good will of his professional brethren.

Justice may call on us to say so much, and would permit the use of stronger terms. For the benefit of survivors, it may be proper to inquire how he obtained so much respect, confidence, and good will. It was by diligence and fidelity in seeking for knowledge and in using it; by rectitude in principle and urbanity of manners. But he had a charm, which these words do not describe, and which was felt by all who knew him. This charm arose from the simplicity, if it may be so termed, which marked his character. Frank and open-hearted, free from selfish propensities, he sought to make others happy, without thinking of the merit of it; and he succeeded; for his face, truly beaming with benevolence, cast a bright light on those around him, while his kind feelings begat a sympathetic good will among his friends and companions.

The public mourn, and they may well mourn his loss. May they derive the proper benefit from a contemplation of his character.

IV.

REPORTS OF CASES IN PRIVATE PRACTICE.

THE case which follows is worthy of attention, because of common occurrence; and because the morbid appearances are not so remarkable as might be expected in a fatal case. We could support this case with two similar, with dissections.—ED.

February 5, 1829.— Osborne, a little girl two years old, has had a severe cough for a fortnight, without medical treatment. She is now considerably reduced; coughs often and expectorates with difficulty; respiration laborious, but not remarkably quick. The chest resounds well on percussion, except that just below the right clavicle the sound is a little flattened. The breathing as observed by the stethoscope is also more *tracheal* at this part. The bowels are disordered, the discharges being made up chiefly of a greenish mucus; and this state of them continued in a greater or less degree through the disease. The treatment was begun with an emetic, of ipecac. and calomel, and a blister upon the chest on the upper right side; and followed up with occasional cathartics of calomel in small doses and castor oil, and expectorants of squills, antimony, &c. and a mucilaginous diet. Under this treatment two or three weeks she nearly recovered, but as often relapsed. The parents were miserably poor. The room was cold, and in consequence of the mother being obliged to pursue her business as a washerwoman, damp. Every thing about it appeared comfortless and thriftless, and there was a remarkable want of skill in preparing a proper diet. The disease of the lungs however did not appear to return, in the relapses, so much as the disorder of the bowels; for although the cough continued, the respiration became in every respect natural, ex-

cept that the mucous rattle was observable in the upper part of the chest. On the 16th of February, the child was in every respect convalescent. The following day I was prevented by illness from visiting it; and on the 18th I found it dead.

Examination, twenty-four hours after death.—The child was much emaciated. The chest resounded fully in every part. The surface of the right lung was of a whitish color, but without any adhesions, and this lung was more filled with blood than the left. The left lung adhered very slightly at its lower edge to the pleura of the ribs. Both lungs crepitated well, and exhibited no other marks of disease that I could discover. The liver was large and healthy. The stomach and intestines were filled with flatus; and the latter contained some slight portions of greenish mucus, but showed no signs of inflammation. The mesenteric glands were enlarged and red.

Remarks.—Whatever interest this case may possess, arises not from its being either uncommon or remarkable; but from the opposite fact, that it is in this climate, and at this season of the year, extremely common; so common, that we are perhaps liable to prescribe for it, almost from habit, without bestowing much thought upon its pathological character. The affection of the throat and chest, which in common language is called a *cold*, and in its severe forms *lung fever*, is of such every day occurrence, that it is often considered a mere family concern, to which the attention of a physician is not called until the disease has made much more progress than would be allowed before he were called if the disease were less common. In children, either because the matter expectorated from the trachea is swallowed into the stomach, or because in them the system is more liable to be affected by sympathetic actions, or perhaps partly from both causes, the stomach and bowels very early become disordered; and it is this com-

plication of the disease, which in a great majority of cases constitutes the chief difficulty in managing it. There are, it is true, some cases, in which the inflammation is so violent as of itself to destroy life, as with adults. But such cases are, I believe, very rare. Indeed the disease is not often fatal in any form, especially considering its great frequency. When it is so, it is generally from the exhaustion produced by the complication of suffering, rather than from any peculiar violence of disease. In the case related above, it is, I think, obvious, that the child might have recovered, with but a moderate share of the judicious attentions which a state of sickness requires. When I opened the chest, I was for the instant surprised to see no more marks of disease. But a moment's reflection convinced me that I ought not to have expected to find any organic change so great as to have become of itself the cause of death. H.

NEW BRITISH PUBLICATIONS.

ON Aneurism and its Cure, by a new Operation. Dedicated, by permission, to the king. By James Wardrop, Surgeon to his Majesty. London, Printed for Longman and Co. Paternoster Row.

Just published in 8vo. price 7s. 6d. A Treatise on the Nature and Cure of Intestinal Worms of the Human Body, arranged according to the classification of Rudolphi and Brewster, and containing the most approved methods of treatment as practised in this country and on the continent: By William Rhind, Surgeon, Member of the Royal Medical Society of Edinburgh. Printed for S. Highly, 174 Fleet St. London, and Oliver and Boyd, Edinburgh. Also, a Stethoscopic Chart, in which may be seen at one view, the application of Auscultation and Percussion to the Diagnosis of Thoracic Diseases, comprising their chief Pathognomic Symptoms, and the use of the

Stethoscope in other Diseases, arranged by S. E. Haskins, Member of the Royal College of Surgeons.

In one volume, 8vo., price 12s. boards, Pathological and Practical Researches on Diseases of the Stomach, the Intestinal Canal, the Liver, and other Visceræ of the Abdomen. By John Abercrombie, M.D. Edinburgh: James Duncan, 37 Paternoster Row, and J. & J. Underwood, 32 Fleet St. London. Of whom may be had, by the same author, Pathological and Practical Researches on Diseases of the Brain and Spinal Cord. In one vol. 8vo. Price 12s.

A Practical Treatise on the Symptoms, Causes, Discrimination, and Treatment of some of the most important Complaints that affect the Secretion and Excretion of the Urine. Illustrated by numerous Cases and Engravings. By John Howship, Member of the Royal College of Surgeons in London.

Books received for review:—A Letter to the Secretary of State for the Home Department on the Report of the Select Committee of the House of Commons on Anatomy, &c. By G. Guthrie, F.R.S.—Comments on Corpulency, Lineaments of Leanness, &c. By W. Wadd, Esq., F.L.S.—A Synopsis of Modern Medical Jurisprudence. By J. S. Forsyth, Surgeon.

On the 1st of January was published by S. Highly, 174 Fleet St., in 160 columns of closely printed letter press, price 1s. (for the Medico-Chirurgical Review,) The Age of Libel: containing a full account of the trial, Cooper versus Wakley: and a critical examination of the Evidence, the Arguments, the Verdict, and the moral consequences of the Trial.

Bell's Surgery, new Edition in 4 large vols. 8vo. embellished with 20 copperplates and 60 woodcuts, price 3£. 3s. in boards.

The principles of Surgery as they relate to Wounds, Ulcers, Fistulæ, Aneurisms, Wounded Arteries, Frac-

tures of the Limbs, Tumors, the operation of Trepan and Lithotomy, also, of the Duties of the Military and Hospital Surgeons, by John Bell.

NEW AMERICAN WORK.

FIRST Lines of Surgery, by Samuel Cooke; with Notes by Alexander H. Stevens, M.D., and additional Notes by a Physician of Philadelphia. Published by T. Drilver and H. Cowperthwait, Philadelphia. This is the best edition of this very useful and popular work, and will be found very convenient to practitioners in the country.

TO CORRESPONDENTS.

THE Communications of Drs. Thompson and Perkins have been received and shall appear.

NOTICE.

THE unpaid bills for the last year accompany the present number of the Medical Journal. Such of our friends as pay Six Dollars and Fifty Cents, previous to May 10th, will be considered as paying in full for the last as well as the present year. In future the terms will be strictly adhered to.

WEEKLY REPORT OF DEATHS IN BOSTON,

Ending March 20, at noon.

<i>March</i> 13.	Charles Levin,	35 yrs.
14.	William Cummings,	66
	Ellen Kearns,	32
	Ann Hicks,	52
	Catharine F. Smith,	10 w.
15.	Ellen Alcer,	50 yrs.
	Lucy A. Montgomery,	2
	Richard Emerson,	3
16.	Bridget Doyle,	3
17.	Ann Hayden,	21
	Jeptha Cowdin, jr.	3 mo.
	Mary Elizabeth Campbell,	3
	Michael McHugh, jr.	4
	William Johnson,	31 yrs.
	Elizabeth Cordis,	77
19.	Mary T. Smith,	8 mo.
	Daniel Haskins,	4 yrs.
20.	Mary Braconcer,	8 mo.

Consumption, 1—convulsions, 1—dropsy on the brain, 2—drowned, 1—infantile, 1—insane, 1—lung fever, 5—lethargy, 1—old age, 1—putrid fever, 1—scrofula, 1—unknown, 2. Males, 7—females, 11. Stillborn, 2. Total, 20.

ADVERTISEMENTS.

DENTAL SURGERY.

THIS day received by Benjamin Perkins & Co., No. 135, Washington Street,—A SYSTEM OF DENTAL SURGERY. In three parts.

1. Dental Surgery as a Science.
2. Operative Dental Surgery.
3. Pharmacy connected with Dental Surgery.

By SAMUEL SHELDON FITCH, M.D., Surgeon Dentist. *Denticum curam habeto ut bene digeras et diu vivas; laxatis dentibus laxantur et chylaceos officinæ; hinc mille malorum occasiones.*—Baglivi XIII. March 17.

ep6w

NEW MEDICAL WORK.

JUST published and for sale by Benjamin Perkins & Co.—THE FRENCH PRACTICE OF MEDICINE; being a translation of L. F. Begin's treatise on Therapeutics; with occasional notes and observations, illustrative of the treatment of diseases in the climate of North America. By XAVIER TESSIER.

ep3w

March 17.

CASEY'S APPARATUS FOR THE CURE OF DISTORTED SPINE.

THE Proprietor of the Dormant Balance for the cure of Distorted Spine, gives notice, that he has established an agency in this city, for the convenience of those who may wish to avail themselves of this invention. Physicians having under their care the subjects of this disease, or patients themselves, may have an opportunity of inspecting the apparatus, and examining the testimonials of its efficacy, at Mr. Charles White's, corner of Winter Street. It is recommended, however, that all patients availing themselves of this invention, should do it by the advice, and under the superintendence, of their own physicians, as it is only by medical opinion that the proper subjects of the machine can be determined, or the other proper measures to be made use of in conjunction with it, can be pointed out. The Proprietor expressly disclaims the idea that a cure is to be effected, in any case, by mechanical means alone. This machine has received

the approbation of many of the most eminent medical men in this city and New-York. Upon application to the agent, references will be given, and written testimonials exhibited.

All letters, post-paid, addressed to J. Lincoln, No. 27, Fayette Street, will be attended to.

Boston, Feb. 6, 1829.

EUROPEAN LEECHES.

RICHARD A. NEWELL, Druggist, 91, Summer Street, has on hand a small lot of EUROPEAN LEECHES, in excellent order, and of very large size, which he will sell at a fair price.

N. B. Leeches applied as usual, or sent to any part of the city. 4t.

SURGICAL INSTRUMENTS.

DAVID & JOHN HENSHAW & Co. No. 33, India Street, near the head of Central Wharf, have for sale a very extensive assortment of Surgical Instruments. Gentlemen wishing to purchase will find it to their advantage to call and examine them. Oct. 14.

NATHAN JARVIS,

Druggist and Apothecary,

HAS taken the Apothecaries' Hall, No. 183, Washington Street (lately kept by Messrs. Wm. B. & Henry White.) His stock of Drugs and Medicines is complete and genuine. Physicians and others are assured that their orders, prescriptions, &c. will meet with prompt and strict personal attention.

The old friends of this establishment are requested to continue their patronage.

MANUAL FOR THE USE OF THE STETHOSCOPE.

JUST published by Benjamin Perkins, & Co.,—MANUAL FOR THE USE OF THE STETHOSCOPE, being a short Treatise on investigating Diseases of the Chest. From the French of M. Collin, with an Introduction and Plates. By a Fellow of the Mass. Med. Soc.

The Stethoscope may also be obtained as above in the most approved form.

ep3w

Jan. 20.

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

I.

Cases of Neuralgia, or painful Affections of Nerves.

By JOHN C. WARREN, M.D.

NEURALGIA OF THE LOWER EXTREMITIES.

Painful Affection of the Sciatic Nerve from Cold and Moisture.

CAPT. E., aged 40, being exposed to the wet during a long continuance of bad weather at sea, became affected with a severe pain in the back, and in the upper and back part of the thigh. These pains occurred in paroxysms, were of a darting character, and extended down the limb to the *outer ankle*, where the pain was peculiarly severe, and often accompanied with swelling. He had suffered greatly from it about six months, when I saw him first.

Having blistered him without advantage, I put him on a mercurial course, and kept him under the mercurial influence six weeks without any good effect. Then he took Hemlock, to the amount of twenty grains a day, for some weeks, and afterwards the Carbonate of Iron, freely. During all these remedies, external applications were constantly preserved, especially a very liberal use of leeches. He was,

however, not relieved by them, was wholly confined to the house, and could not walk the room without producing a paroxysm,—sometimes in the hip, sometimes in the knee and in the outside of the foot, where the pains were peculiarly severe.

He had been about four months under my care, when the following course was adopted:—

1. Caustic potass was applied, so as to make a deep issue, three inches long, and an inch and a half wide, over the *peroneal nerve*, just in front of where it turns round the neck of the fibula to pass downwards; in the situation recommended by Cotunnio. At the same time, a permanent blister was established on the outside of the foot and outer ankle.

2. He took a pill of three grains of extract of Stramonium, three times a day, and a pill of three grains of extract of Belladonna, with two of Opium, at night. This course, with a proper regimen and a due use of purgatives, was continued eight weeks, with slight intermissions whenever the head and stomach were disturbed. At the end of this time, the pain left him; he slowly recovered his strength, resumed his business, and he had been well for five years when I last saw him.

Pain in the Sciatic Nerve, cured by Nature.

A gentleman, having occasion to change his ordinary dress for a thinner, was obliged to walk some distance at the time, when a sudden change of weather occurred, and he was exposed to the chill of a brisk north-east wind. In the night, he was attacked with violent darting pains in the left thigh, extending to the knee. These pains occurring at intervals, at length reached the outside of the foot; and after this they usually began in the thigh, and passed through the knee, to the outer ankle. For the space of a year he was dreadfully tormented,—a part of the time confined to the house, and generally incapacitated from walking. I recommended to him the application of a cauterium over the sciatic nerve, and another over the peroneal nerve. He assented; but delaying the operation a short time for convenience, the pain disappeared, and has never returned.

He had employed various frictions, fomentations, and tight bandage, when I saw him. The bandages aggravated the pain at the time, and rendered it more frequent. The credit of this cure must be wholly attributed to nature.

Obstinate Affection of the Sciatic Nerve, relieved by hot Fomentation of Narcotic Plants.

To a young lady, affected with pain in the course of the right sciatic nerve, without any obvious cause, I gave the Sulphate of Iron, in doses of three grains, three or four times a day, for twelve weeks. This, with rest, purgatives, and a restricted regi-

men, relieved her. The occurrence of domestic misfortunes compelling her to extraordinary efforts, a relapse was produced. For six months she was affected, especially in the night, with distressing pain through the whole length of the limb, principally on the outside, and especially near the outer ankle. The disease resisted all the narcotics externally applied,—and internally, a long course of Arsenic; the Sulphate of Quinine; Cinchona in powder; and great quantities of Carbonate of Iron. Blisters affected her severely, but were continued through the whole course, with mitigation of the neuralgia, though at times she begged she might be permitted to die without further torment from them. At last, when I was at a loss to devise new medicines suited to her case, I proposed a hot fomentation of stramonium leaves, with a portion of Tincture of Opium. This hot application gave distinct relief. She continued it for six weeks, taking at the same time an infusion of Gentian, and was then so much relieved that I advised her to omit all remedies and go into the country. With much apprehension, on account of her disabled state, she followed this advice, and after remaining in the country a month, came home quite well. Whether she continue so is very uncertain; for a chill from the air, or sitting on a cold seat, causes uneasiness in the sciatic nerve.

In this, and some other cases, the powder and watery solution of opium, applied to open blisters, disappointed my expectations entirely. I do not recollect any case where this form of application was successful.

Painful Affection of the Crural Nerve from an Abscess.

About ten years ago, in consequence of a fever, a married lady, of full habit, had a swelling of the inguinal glands, terminating in abscess, which discharged very great quantities of matter. From this disease she recovered, after three years' confinement, and enjoyed good health for a number of years. In consequence of domestic calamities, her health became impaired, and she was again confined for a long time. On her recovery she became fleshy, and soon after was attacked with a pain in the groin, the former seat of disease. It occurred first at the catamenial period, and lasted through that period only; but gradually became so constant as to incapacitate her for all the enjoyments and duties of life. The pain was in the groin, exactly on the crural nerve, and shot down the thigh in the direction of the branches of this nerve. There was often swelling of the groin, and sometimes of the foot; though the limb, on the whole, was emaciated and flaccid. Leeches, bathings, blisters, etc., afforded some relief, but nothing permanent. Nor were bleeding, the warm bath, change of air, preparations of iron, and other remedies, more effectual. At length she obtained great relief by long perseverance in a most abstemious diet.

Fatal Neuralgia of the Peroneal Nerve.

A lady, of delicate constitution, received an injury of the ankle, which terminated in a painful affection of the peroneal nerve. The pain extended through the whole limb, but was most severe from the knee to the outside

of the foot, and especially so in the latter situation. The pain was in paroxysms, and of a darting kind. It occurred frequently during the day. The patient gradually lost her appetite, flesh, and strength. The foot became drawn up by permanent muscular contraction; the knee also was contracted. In this state of things I was consulted, and finding that all remedies had failed,—that even very large doses of opium had but little effect, I recommended the excision of the peroneal nerve at the knee, and in case this operation failed, amputation; at the same time expressing my apprehensions that the habit of pain was so confirmed as to be incurable. A portion of the peroneal nerve was removed, without any permanent alleviation, and the patient soon after fell a victim to sufferings of three years' duration.

Painful Affection and Convulsions from the Wound of a Needle.

In the year 1819, a young lady, patient of Dr. Gorham, was wounded by a needle in the sole of the foot, near its outer edge. She was of an irritable or nervous constitution; health not very good. She had a sharp pain at the moment; this disappearing, she walked about as usual. In a week after, she began to experience a pain in the part, shooting to the toes. This recurred daily, with increasing violence, till the limb above became affected with these shooting pains. Dr. Gorham made various applications to the part, and cut it open; still the paroxysms increased, and at length produced an occasional spasm of the muscles. He now requested my advice. I found the young lady in a feeble, emaciated state; ex-

tremely excitable, and apparently very unhappy. I advised Dr. G. to cut across the flesh, which had been the seat of the wound; allow it to bleed freely, and to produce a suppuration by preventing the uniting process. This was done; but no permanent relief having resulted, I then advised him to use a cauter, and produce an eschar of all the wounded part. Neither this, nor any other remedy, gave relief. The pains continued; the spasms increased till they resulted in convulsions,—as in the case related by Dr. Pierson,—and wasting away, she expired about three years after the accident.

Painful and fatal Affection of the Nerve in one side of a Toe, from the Pressure of a Corn.

Some time since, Dr. ——— requested me to visit with him a gentleman who was affected with paroxysms of excruciating pain in one of the toes, arising apparently from pressure on the nerve of one side by a *corn*. He had suffered so much in the night as to deprive him of sleep for some time, and when the paroxysms occurred in the day, he was unfitted for business. I advised Dr. ——— to remove the corn. This was done; but no relief being obtained, he was directed to dress the wound with an ointment containing a quarter part extract of Belladonna, and to take this medicine internally. A decided constitutional effect was produced, but no relief from his pain. I then advised him to have his toe cut off, but before this was done, he had an intermission of pain, which, having since relaxed at times, has encouraged him to keep the toe. Probably the habit of pain is so formed, that the re-

moval of the toe would not cure him now. His paroxysms frequently alternate with a disordered state of the digestive organs.

I have been informed lately that this patient, after having long suffered very excruciating pain, determined to have his toe amputated. It was accordingly removed. A few days after, he was affected with sudden prostration of strength, and in a short time expired in a very unexpected manner.

Had the toe been removed when this was first proposed, I have no doubt it would have relieved the pain. When the habit of pain has been long formed, it extends much beyond the first seat of pain, and gets out of the reach of amputation or any other remedy.

Neuralgia of a Branch of the Plantar Nerve, followed by Convulsions, and cured by Operation.

The following severe case, cured by operation, is full of interest and instruction. Were the writer a person of ordinary stamp, I should not have availed myself of his permission to publish this letter; although I do not consider it any discredit to a young surgeon to include a small nerve with an artery in a deep wound in the foot; and yet, at the same time, concur with him in the suggestion that there is too great an apprehension from hemorrhage subsequent to operations. Such an accident as this can have no influence on the reputation of a practitioner, whose claims to reputation are founded on solid merit, and in whose skill I cannot better express my confidence, than by saying that there is no surgeon in this vicinity to whose hands I would

more readily submit my own case, if I had occasion for surgical aid.

Salem, Feb. 4, 1828.

MY DEAR SIR,—The minutes of the following case you are at liberty to make any use of which you please, and to connect with it my name,—although it is obvious the symptoms could only arise from including a nerve in the ligature of a small vessel, which I was led to tie from the officious caution into which a dread of hemorrhage betrays an inexperienced operator. I have copied from my case-book as much as would put you in possession of the important facts, and you are perfectly at liberty to curtail or abridge.

June 6th, 1821, I operated on the foot of a girl, 16 years of age. She had an ulcer on the sole of the left foot, over the metatarsal bone of the left toe. There was originally in this place a hard, painful tumor, which was attempted to be destroyed eleven months since, by enoratic dressings, which have been applied every few weeks since, and give great pain. The general health has become somewhat impaired by confinement and anxiety. The ulcer has a hard margin, no appearance of pus or granulations, and a thin, ichorous discharge. With a free incision I removed the skin for half an inch round the margin, together with the cellular membrane down to the plantar fascia, some fibres of which were probably divided. About four ounces of blood were lost, and ligatures were applied to two small bleeding arteries. Immediately upon the operation, the patient complained of great pain and distress in the left *hypochondrium* and *epigastrium*, and in less than half an

hour there came on severe spasms of the trunk and inferior extremities. Dressings and ligatures were removed, and the arteries bled about an ounce. This was the commencement of the severe neuralgia with which this young woman has since been afflicted. The first attack lasted nine days; then an interval of ease, of a week's duration, ensued; then a recurrence, for about the same period; then a longer interval of ease. The intervals between the paroxysms continued to grow longer, till at the end of about three years the disposition to return seemed extinguished, and there followed a period of fifteen months, during which time there was no return of spasms. Eighteen months since the spasms returned as severely as ever, in consequence of being thrown from a chaise and receiving a severe blow upon the head. These paroxysms returned at irregular intervals until you saw her last summer. After the operation which you performed, she remained tolerably quiet for a fortnight; she then had an attack of the spasms, which were as violent as ever, and lasted several days; since that time she has been free from spasmodic disease, and her general health has improved. The foot healed kindly, and, on the whole, there is every reason to expect that the nervous affection will no more return.

During the paroxysms, the pain usually commenced in the foot, and rapidly extended to other parts, as the head, stomach, neck, and jaws,—which parts would then be affected with rigidity and spasms,—and *invariably* fixed itself in the left hypochondrium, until after the operation of last

summer, after which time the pain never attacked this part. There has always been, and now exists, a tenderness of the sole of the foot and inside of the leg and thigh. As to the mode in which the paroxysms came on, they were generally to be apprehended when the system was disturbed by any functional disorder, but sometimes came on during sleep and without warning. There were occasionally some symptoms of hysteria, but the mind was always uncommonly resolute and free from anxiety or foreboding. The remedies used in the case were administered principally under the care of Drs. HOLYOKE, Jr. and OLIVER, and the entire class of antispasmodics had, in the course of the various paroxysms, a fair trial. Camphor, musk, valerian, assafœtida, castor, even in very large dose, and administered in a variety of ways, had no decided effects. Cicuta, hyoscyamus, belladonna, and stramonium, produced faintness, without much benefit. Bleeding was always useful as a palliative, but was sometimes abstained from on account of the intense pain produced by the puncture of the lancet, and which lasted for some time, although she was bled and had teeth extracted without any extraordinary pain, at times when the spasms were not present. Carbonate of Iron and Fowler's Solution, continued in full doses for a long time, produced no benefit. The only two articles which would sensibly diminish the violence of the muscular contraction and remove pain, were Alcohol and Opium, and whenever these were given in doses to produce drowsiness or intoxication, decided relief was invariably obtained.

These remedies were sometimes abstained from and the disease left to exhaust itself, on account of the excessive irritability of the stomach, which followed their use. There was commonly poor appetite, and headach, and at one period a dimness of sight, which required convex glasses.

Faithfully and affectionately
yours,
A. L. PEIRSON.

Dr. Peirson having sent for me to examine this case, I went to Salem, and in company with him immediately visited the patient. An opportunity was presented of witnessing a paroxysm of the disease. The patient, a fine young woman, was seized with the spasmodic affection about the time of our arrival. The convulsions were truly horrible, and presented the aspect of the most terrible case of tetanus. When the violence of the convulsions had subsided, I made an incision in the sole of the foot, behind the interstice of the fourth and fifth toe, and by dissection exposed the branch of the internal plantar nerve, going to the fourth and fifth toe. An inch of this nerve was laid bare, and the sensation of the patient showed it to be the true seat of the disease. This portion was cut out. After the operation she had one, and only one, spasmodic period, and is now, at the distance of eighteen months from the operation, in perfect health.

II.

Atrocious Murders in Edinburgh.

(Continued from p. 102.)

THE examination proceeded.—He had been acquainted with Burke about a twelvemonth; M'Dougal had lived with Burke then as his

wife ; witness lived in the West Port, not far from Burke ; was in a public house in the West Port on the forenoon of the 31st of October, when they had a gill ; he asked witness to go down to his house, to see the *shot* he had got to take to the doctor's ; he said he had taken an old woman off the street, and wished witness to go down and see her, and see what they were doing ; understood by the word *shot*, that he was going to murder the woman ; he went to Burke's house, and found there was a strange man and woman (their name was Gray), the old woman, and Helen M'Dougal ; the old woman was washing her short gown ; it was white and red striped. [Identified the bed-gown.] Witness remained in the house for about five minutes, and then went home ; was in Connaway's between eight and nine o'clock on Hallowe'en night. There were Connaway and his wife, William Burke, John Broggan, and another lad, whom he did not know, the old woman, Helen M'Dougal, and witness's wife : they had some drink there ; Burke, Broggan, and the lad, went out ; but witness remained later and went into Burke's, leaving the old woman in Connaway's ; was not long there till Burke himself and the old woman came in ; she was so much the worse for drink as hardly to be able to keep her feet ; there was some dancing in Connaway's ; at this time he did not think that any harm was to happen to the old woman that night ; when in Burke's, some words took place between him and witness, and blows ensued ; he asked what had brought him there, and he replied that he had been invited by M'Dougal ; while they were struggling, the old woman ran twice into the passage, and called out either murder or po-

lice ; Helen M'Dougal brought her back both times ; while witness and Burke were struggling, he (Hare) pushed her over a stool ; she got up so as to rest upon her elbow, but was so drunk as not to be able to regain her feet ; she was always calling on Burke to quit fighting, and he did so ; having stood for some minutes on the floor, Burke stood stride legs over her, and laid himself down above her—his breast being on her head ; she gave a cry, and then moaned a little ; he put one hand on her nose and mouth, and the other under her chin, and stopped her breathing ; this was continued for ten or fifteen minutes ; he never spoke while this was going on ; after he had risen from above her, he put his arm upon her mouth for some minutes ; she appeared quite dead ; witness was sitting all the while on a chair ; he stripped the body of the clothes, put it into a corner, doubling it up, and covering it with straw ; witness's wife and M'Dougal, when they heard the first screech of the old woman, ran into the passage, and did not come in again until the body was covered with the straw ; before this, they were lying in the bed, and witness sat at the head of the bed ; did not observe blood on the floor, or on the woman's face, at the time ; did not observe the woman in the passage cry—but nobody came to the door during the time. Burke had not been above the woman a minute or two, when the women started out of bed and ran to the door ; none of them attempted to save or assist the old woman, and such could not have happened without his seeing it ; saw them come again, and Burke go out, when he was absent a few minutes ; the women asked no questions, and he made no remark ;

the women went to their beds again; neither asked for the woman Docherty; when Burke returned, he brought the doctor's man with him—a person who lived a little down the West Port. Burke wished the doctor's man to look at the body, but he said it would do well enough; to get a box and put it into it; the women were in the bed while the man was in the house, but he could not tell whether they were awake or not; witness fell asleep himself; he was rather the worse of liquor, but he knew well enough what he was about; he awoke about seven o'clock in the morning; he found himself on a chair, with his head on the bed; the women were in the bed, and a lad named John Broggan, who was lying beyond his aunt; Burke was at the fire-side; he and his wife got up and went home, when they found Gray and his wife there; Burke called witness into Rymer's shop, and wished him to go with him to Surgeons'-square, which witness agreed to do after he fed the swine; they went to Surgeons' square, where Burke inquired for a box, but they did not get one; he said he bespoke one from Mr. Rymer's shop-boy; this box was brought into the passage by the porter (M'Culloch), but there was nobody in the house when they went in; they took the box in, and waited at the door till Burke came, who said, "You are worth little that have not put it into the box;" witness assisted to put the body into the box; the porter pressed it down, and observing some of the hair over the side of the box put it down inside, saying it was "a bad thing to have it hanging out." The box was roped, and the porter in-

structed to carry it to Surgeons' square; witness and Burke accompanied him; and met the women in the High Schoolyards; could not say whether Burke or the porter went in first; witness accompanied them; the body was put into a cellar, and witness and Burke proceeded to Dr. Knox's, at Newington, but did not go into his house; Mr. Paterson, who was to pay the money, took them into a public-house, where he got change, and paid the porter 5s., Burke 2l. 7s. 6d., and witness 2l. 7s. 6d.; understood that 5l. more was to be paid on Monday; saw the women both in going to and returning from Newington, but neither of them went into the public-house.

Cross-examined by Mr. Cockburn.—Had been a boatman on the canal; had also had a horse and cart and sold fish; had been concerned in furnishing medical lecturers with subjects; was never concerned in carrying any other bodies to surgeons than that of the old woman, but had seen it done; had never been concerned in raising bodies; was asked how often he had seen it done?—Declined answering the question. Was this of the old woman the only one in which he was concerned?—Declined to answer. Was murder committed in his house last October?—Declined answering the question. Understood that the use of the term *shot* was used by Burke as meaning a person for a subject, in order to murder them; heard him use it when he did not mean to murder; but understood that to be his meaning at that time. First thought that there would be mischief when he saw Burke stand over the old woman. They had quarrelled, and

therefore had no thought till he saw Burke in that situation; saw the body of the old woman in the police-office; he then said he had never seen the body of the old woman before, and denied that he had seen the woman alive; it was on the Sunday when he saw it, and denied it then. "Have you had several transactions with Dr. Knox or his assistant?"—Declines to answer the question. Burke had received money from Dr. Knox, but witness never did, nor from any of his assistants. Burke received 5*l.* for the body from Dr. Knox, and they were to receive more on Monday; Dr. Knox's man said they were to get 5*l.* more; thinks it was Burke who paid the porter, but is not sure whether it was Burke or Mr. Paterson; Burke threw two notes across the table along with the change; is certain that Mr. Paterson did not pay the money to him, though he folded up the two notes and divided the silver; had never any quarrels with Burke about the payments, nor no quarrel with him about money matters; witness pushed the woman over a stool, and she was so drunk she could not rise; before that, she had gone to the door, and called "police;" when Burke got on the old woman, she gave a shriek, which could be heard some short distance; at that time did not hear any one call for the police; Burke and he were fighting before the woman shrieked; Broggan and the two women were in bed; he was sitting at the side of the bed, and Burke was at the fire; thinks that it was ten minutes before Burke had murdered the old woman; never attempted to prevent him; but remained in the house all the time; sat by and looked at the

transaction; did not go next day to the police and inform them of it; but, when examined by the police, he denied all knowledge of it. [Hare was removed in the custody of the police.]

(To be continued.)

III.

REPORTS OF CASES IN PRIVATE PRACTICE.

A Case of Croup.

Communicated for the Boston Medical and Surgical Journal,

By ABRAHAM R. THOMPSON, M.D.

J. S., a very sprightly boy, aged four years, had a cold during the middle of February, with some cough and running at the nose; his general health good. On Saturday, February 21st, he sat up in a wet sink, looking out of the window to see his father shovel snow,* till he got chilled, and his mother observed him to look blue and shiver. In the evening he became hoarse and was restless, with dry nostrils. On Sabbath morning complained of headach and heat, and got a dose of senna, followed with castor oil, which purged freely in the afternoon. Towards midnight he breathed so bad, that a medical gentleman was called, who administered an emetic, with some relief. On Monday his mother tried to get down squills and liquorice, and at evening he took goose oil and garlic tea, and had a liniment of goose oil and garlic rubbed over the windpipe, &c. On Tuesday morning a blister was applied to the breast. The above report was made to me by the mother when for the first time I saw him, Tuesday, Feb. 24, at 12 o'clock. His nose was dry, and his whole countenance illuminated with that preternatural light which

* I think that state of atmosphere which snow produces, is frequently the cause of croup.

is so striking in true croup. His pulse had the genuine hammer stroke. I had no doubt of very active inflammation of the internal coat of the windpipe, and rather thought that effusion had already taken place, and of course that the membrane had begun to form. I opened the external jugular vein, and drew from a large orifice twelve ounces of blood. Slight faintness followed, with decided remission of the symptoms. After waiting nearly an hour, (till reaction took place, and with it a recurrence of symptoms of obstructed windpipe,) I gave four grains of Sub. Sulph. Hyd. Flav., which vomited freely, with great relief during its action, which continued till evening, when restlessness, heat and hard breathing returned, and in tossing himself about he lost about four ounces more of blood, from the same orifice in the jugular. At 9 he took three grains of Calomel, and at 11 quarter of a grain of Tart. Antimony, dissolved in water; and from this time until the following Sabbath evening he continued to take the same quantity of Cal. and Tart. alternately, every two hours, drinking freely of water, and nothing else. During Wednesday and Thursday the disease went on, constantly increasing, so that at 10 o'clock, on Thursday evening, the symptoms had reached the most aggravated degree: great difficulty of breathing; "the act of coughing without the sound"; the head thrown back; frequent changing of the position of the body; pulse rapid and tumultuous, and great distress of countenance. At 12 o'clock a terrible suffocative struggle came on, and a fit of convulsive coughing terminated in the expectoration of a considerable piece of broken membrane; and from this time shreds of membrane, with frothy and bloody mucus, continued to be expectorated more or less for seven or eight days. The bowels kept open sufficiently; but notwithstanding the quantity of

calomel, besides antimony, given from Tuesday evening till the following Sabbath evening—and not less than 120 grains of calomel had been given during that time—yet neither purging nor sore mouth came on. A slight oedema of the face and feet was noticed. A few doses of cold pressed castor oil, and ipecacuanha, alternately, completed the medical treatment, and the little patient is now rapidly recovering, on a mild nourishing diet.

On this case I submit a few reflections.

First. On Tuesday noon, when I first saw this patient, the disease had been going on for three days, and I was strongly impressed with the belief that effusion had taken place into the windpipe. Yet I bled freely from the jugular, and followed bleeding with other means most likely to combat inflammation, and to promote healthy secretion. The doctrine I wish to inculcate is, that even when we think effusion may have taken place, we are justified in using vigorous means against further inflammation,—such as bleeding, emetics, antimonials, &c. &c.

Secondly. On Thursday evening, when I thought the disease would prove fatal to my little patient, I had a conversation with his father about opening the windpipe. With my views I could not advise the operation. My reading and experience were both against it, nor was my mind changed by reading the recent report of the Auburn case. For a careful examination of that report satisfied me that the recovery of the patient at Auburn was not to be credited to the operation. If, however, the parent had been very anxious to have the operation done, I think I might have done it; and if it had been done, and the child had recovered, then an undeserved importance would have been attached to

the operation, and a false rule of practice encouraged. But it was not done, and the child recovered; and the doctrine I wish to inculcate under this reflection is, that in croup the operation of opening the windpipe is not a good rule of practice.

Thirdly. The operation of tracheotomy is very valuable in its proper place. I have seen it performed successfully by Dr. Walker, of this town, for the removal of a foreign body from the windpipe; and that same gentleman has also performed the same operation unsuccessfully for croup,—so have I, and so have other gentlemen in Europe and America. The different result of these operations arises from the difference of cutting into a healthy windpipe and a diseased one; and this is the practical doctrine to be inculcated by this third reflection.

Fourthly. Croup is generally a fatal disease. It kills the patient either at once, by terrible inflammatory, spasmodic violence, or more commonly by effusion of lymph, forming a membrane along the windpipe, and extending down into the ramifications of the windpipe, into the lungs. But now and then an escape is effected, in the first instance by resolution, or in the second by the breaking up of the adherent membrane, and throwing it out by expectoration. In the course of twenty years' practice, I have seen a great many cases of croup, and I have seen several cases of the first class and two of the last; and the best practical advice I can give, is to bleed freely from the jugular, or leech freely, and give calomel and antimony—watchfully, indeed, but liberally and steadily. This practice will be most likely to break up the disease at its onset, by resolution, or aid the recuperative efforts of the system to throw it off in its protracted form by expectoration.

Charlestown, March 24, 1829.

*Sulphuric Acid in Psoriasis Invet-
terata.*

Communicated for the Boston Medical and
Surgical Journal,

By JAMES W. PERKINS.

HAVING noticed in No. 1, Vol. 2, Boston Medical and Surgical Journal, a case of Psoriasis Invetterata successfully treated by Arsenical Solution, I am induced to communicate a case of the same disease cured by the internal use of strong Sulphuric Acid, after the disease had resisted a thorough trial of the Arsenical Solution.

Miss A., of a good constitution, enjoyed good health up to her 22d year, when she was attacked with a cutaneous disease, which commenced upon the inferior extremities, in separate irregular patches, which became confluent and gradually extended over the body in defiance of the various external applications to which she resorted for relief.

The Arsenical Solution was at length prescribed, and she persevered in its use, gradually increasing the dose for many weeks without any apparent benefit.

I visited the patient in company with the family physician. A fair trial having been made of the Solution, it was concluded to try the efficacy of Sulph. Acid in large doses.

She began with four drops three times a day in sweetened water, and increased two drops every day, until the dose was augmented to 50 drops; when the disease began rapidly to give way. The acid was continued in doses of 40 drops five weeks longer, at the end of which period the cutaneous disease was completely removed, and the integuments soon regained their natural color and appearance.

The patient's bowels were kept open during the exhibition of the acid, by pills composed of G. Gamboge and Tart. Antimony, and the scales moistened daily by a solution of Slippery Elm.

Windham, N.H. March 18, 1829.

BOSTON, TUESDAY, APRIL 7, 1829.

DEATH OF DR. GORHAM.

THE following is a more particular account of the morbid appearances discovered in the examination of Dr. Gorham.

Post-mortem Examination, twenty-seven hours after Death, made by Dr. Hayward, in presence of Drs. Jackson, Channing, Bigelow, Ware, and Stevenson.

The thorax only was examined. The body retained its plumpness, and the adipose matter under the skin was unusually thick. The sternum, with the cartilages of the ribs, being removed, the left side of the thorax seemed occupied in front principally by the heart. This arose not from the magnitude of the heart, but from the diminished size of the lungs on that side, and from a quantity of adipose matter covering the pericardium, and connected with a similar matter spread over the mediastinum. The lungs on this side adhered to the surrounding parts, to the ribs, diaphragm, and pericardium. The adhesion was formed by coagulable lymph recently effused. This adhesion was quite strong in the posterior and inferior parts. It was wanting at the side over a small space, where a reddish serum was effused to the quantity of an ounce or more. The pleura pulmonalis in most parts, when the lymph was removed, was found to have retained its polish, and seemed to have partaken less in the inflammatory action than the pleura costalis. The portion of the cellular, or rather adipose covering of the pericardium, to which the pleura costalis adhered, had a very slight and superficial blush, having partaken of the inflammation in the slightest degree.

Both lobes of the left lung were diseased throughout, but most at the posterior and inferior parts. At the apex there was a small, distinct por-

tion, in size equal to a large English walnut, which was quite solid and of a red color; properly hepatized and containing no air. The parts surrounding this were similarly changed, but in a less degree, and some frothy and bloody serum flowed from them. Lower down in the superior lobe and in the anterior half, the lung was less diseased, crepitated very slightly, and poured out upon incision more frothy fluid. The posterior part of this lobe and all the inferior lobe were different in their appearance. These parts resembled the spleen as much as diseased lung ever resembles liver; that is, they did not crepitate, they were destitute of frothy fluid when divided by the knife, and they were not indurated. Likewise their color was dark, like that of the spleen. The very lowest part had a *leathery* feel when handled. If the pleura had been detached from it, and it had been presented to an anatomist, he would not easily have detected, by its texture, from what part of the body it had been taken. It may, perhaps, be compared, except as to color, to a piece of lung half boiled and then gently pressed. The part thus described could not be said to be inflamed. It seemed to have been compressed, and the air to be so excluded.

On the right side the lung adhered very generally by cellular bands, evidently not of recent formation. The lung itself was quite healthy.

The pericardium contained less than an ounce of water, and was healthy; as also was the heart.

To the foregoing account, furnished by Dr. Jackson, we add the following note by Dr. Hayward.

The account of the morbid appearances seems to me to be perfectly accurate, and the comparison of the aspect of the lower lobe of the lung to boiled lung I think quite a happy one. There was only one thing which has occurred to me in addition, and that was the thickness of this lobe, which was not greater,

I should say, than the thick part of common tripe. It was in a collapsed state; the vessels and cells had lost their elasticity to such a degree, as to be nearly, if not quite obliterated. The lobe was not engorged with blood, and the disease in it seemed, as it struck me, to have arisen from the morbid state of the pleura.

This circumstance may not appear to others to be of any consequence, and it may not be; but I thought it very unusual, at the same time that it showed, to my mind at least, that the pleura was the primary seat of disease.

The precise situation and extent of the inflammation was ascertained by the stethoscope, as appears by the note which here follows. It may be proper to state, that on the first day of his indisposition he sent for Dr. Warren, almost immediately after he was seized. At that time he had pain in the head, back, and limbs; symptoms of fever; a disposition to drowsiness; and constant vomiting. The most effectual mode of interrupting the course of the disease seemed to be by an emetic; and he was directly ordered a drachm of ipecacuanha, thirty grains of submuriate of quicksilver, with three of the tartrate of antimony, divided into three powders,—one of which vomited him powerfully. Soon after this prescription, Dr. W. meeting Dr. Jackson, informed him that Dr. Gorham was ill, and that unless relieved by the emetic, he feared his symptoms might become alarming. Immediately after the emetic, the stomach being still unsettled, he began to take purgative pills of submur. of quicksilver, aloes, and colocynth, and took in the whole fifteen grains of each. At the second visit, which was within a few hours of the first, it was proposed to

bleed him. The grounds on which this remedy was suggested were, that there appeared a tendency to inflammation; and although at that time there were not present the signs of inflammation of any organ, such symptoms might arise. To this he decidedly objected; saying that he had such a cold as this in the autumn, and then recovered without venesection, and even kept abroad. Dr. W. did not assent to this remark, and assured him it would have been impossible for him to have left the house in the state he actually was. He consented to use the warm bath, followed directly by pills of three grains of calomel and one grain of opium, and a large number of leeches to the head, the part in which he most suffered at that time. It was on the next morning that he had some pleuritic symptoms, and was directly bled to fainting. It seems remarkable that he had not the least suspicion of a pleuritic affection till informed of it. Dr. Jackson saw him on the second day of the pleuritic attack, with Dr. W., and called again in a few hours in the absence of the latter, to whom he addressed this note.

In Dr. Gorham's study.

Perhaps you have not received a note from me which will explain my being here. I have been examining him as fully as I could without annoying very much. I infer that the pleura costalis and pulmonalis of the lower lobe is inflamed, and that it has spread into the lung more than I thought in the morning; and that even the upper lobe partakes, in a slight degree, of the inflammation, or at least has its vessels much filled. In breathing, he endeavors to avoid disturbing the lower part of the left thorax, and when he does disturb it

he has the acute pain. He seems to move the ribs up and down, but to resist the expansion of them.

Half past 11.—His pulse have been rather less than 120, and less feeble all the time I have been with him.

The physicians who attended Dr. Gorham have a melancholy satisfaction from the reflection that the nature of his disease was understood almost the moment it had formed, and that active remedies were immediately administered, and in every case with sensible relief from suffering; although the disease proved too powerful to be overcome by the medical art.

Besides the physicians above named, he had almost constantly with him some other. Dr. Brown attended him on the first night of the pleuritic attack, Dr. Stevenson on the second, and Dr. Ware on the third. The two latter were his pupils.

Funeral of Dr. Gorham.

THE funeral of Dr. Gorham was attended on Monday, March 30th. A meeting of the Boston Medical Association was called on Sunday evening previous, which was more fully attended than any other meeting we have ever seen, at which the following preamble and resolutions, offered by Dr. Ware, were unanimously adopted.

The Members of the Boston Medical Association, solemnly impressed by that dispensation of Providence by which their greatly beloved and respected associate, JOHN GORHAM, M.D., has been so suddenly removed from this life, feel it to be their duty to offer to the family of the deceased some testimony of sympathy with them on their loss, and to the public some proof of respect for his character; therefore,

Resolved, That his professional brethren, in common with his bereaved family, his numerous friends, and the community at large, deeply deplore the loss which has been sustained in the death of Dr. Gorham, and are desirous of testifying their affectionate regard for his many virtues, and their respect for his professional worth.

Resolved, That the Secretary be directed to express to the family of the deceased, the sympathy of the Profession with them in their irreparable loss; and to request permission to pay the last tribute of respect to his memory by a public attendance on his funeral, and by the delivery of an address on that occasion by one of his professional brethren.

A committee was appointed to communicate to the family of Dr. Gorham the wishes of the Association, who soon after reported that they were ready to comply with the request of the Association; and Dr. Jackson was chosen to deliver the proposed address. At 4 o'clock on Monday afternoon, after prayers by Rev. Mr. Emerson, a procession was formed at the house of Dr. G. and proceeded to Brattle Street Church, his usual place of worship. The hearse was followed, after the immediate relations, by the members of the Boston Medical Association; then by other Fellows of the Massachusetts Medical Society; Dr. Gorham's classmates in College; Officers of Harvard University, and a great number of his patients and friends. The Church was already crowded, except the pews reserved for those in the procession. Rev. Mr. Palfrey, the Pastor of Brattle Street Church, being absent, the devotional services at the Church were performed by Rev. Dr. Channing. After a dirge

had been sung by the choir, a prayer was offered by Dr. Channing, and Dr. Jackson delivered a very interesting address, in which he noticed the leading circumstances of the life and character of Dr. G. in a simplicity and elegance of style, admirably suited both to its subject and its author. The services at the Church were closed with a prayer and a hymn, after which the procession followed the body to St. Paul's Church, in the cemetery of which it was deposited.

It was the first design of his friends to have only a private funeral; but the spontaneous expression of a desire to exhibit an affectionate regard for his memory, by a participation in these last mournful services, was so general and so strong, that his family were induced to forego their own feelings to gratify those of his numerous friends.

THE week before last, we intimated the probability of an increase of pulmonary affections from the humid atmosphere of the dissolving snows. This has been verified. Catarrhal inflammation of the lungs, and peripneumony, commonly called lung fever here, have been of frequent occurrence. Many severe cases of pleurisy have also presented themselves. Sore throat, or cynanche tonsillaris, is prevalent; and the whole community appear to be affected with cough. So far as we can judge there has been a considerable increase of disease, the last fourteen days. An intelligent gentleman, travelling homewards from the South, where he had passed the winter, stated, that landing about three weeks since on the shores of New-

England, he immediately experienced the chilling influence of the region of snows, and became affected with a catarrh which has continued from that time. The snows of the middle states had of course disappeared. Those of this section of the country have now in a great measure dissolved from the influence of the milder atmosphere and the rains of last week. Our climate changed on the 28th of March. On that day the previously invariable frost did not occur as usual in the night. The pulmonary cases alluded to above have not been very fatal: but the present is the season of danger, particularly for children; and we must prepare for the worst. Bleeding has not, so far as we have seen, been distinctly beneficial in these cases. From emetics and blisters, we have seen valuable effects.

WEEKLY REPORT OF DEATHS IN BOSTON,

Ending March 25, at noon.

<i>March</i> 20.	Mary Jane Trowbridge,	22 yrs.
	Susan Haskins,	31
21.	Edwin T. Starr,	8 mo.
	Martha J. L. Vialle,	2 1-4 y.
	Lucy Fenno,	65
	Sarah Sewall,	28
22.	Jerusha Alley,	37
	Joseph Davis,	82
	Louisa Frye,	23
	Sarah Jane Duffee,	4
	William C. Bancroft,	16
	Benjamin White,	62
23.	Charles Davies Cotton,	18
	James Richardson,	28
24.	John F. Truman,	43
	John Jacobs,	51
	Samuel B. Thacher,	12 mo.
	Andrew McDonald,	33 yrs.
	Benjamin Sylvester,	33
	Ann Horton,	88
	Mary Jones,	45
25.	William Sprague Keen,	4 mo.
	Caroline Abbot,	21 yrs.
	Lemuel Lincoln,	5 w.

Childbed, 1—consumption, 6—croup, 2—debility, 1—inflammation, 1—inflammation in the bowels, 1—inflammation in the brain, 1—infantile, 2—intemperance, 2—lung fever, 2—old age, 2—unknown, 3. Males, 13—females, 11. Stillborn, 2. Total, 26.

ADVERTISEMENTS.

DENTAL SURGERY.

THIS day received by Benjamin Perkins & Co., No. 135, Washington Street.—A SYSTEM OF DENTAL SURGERY. In three parts.

1. Dental Surgery as a Science.
2. Operative Dental Surgery.
3. Pharmacy connected with Dental Surgery.

By SAMUEL SHELDON FITCH, M.D., Surgeon Dentist. Denticum curam habeto ut bene digeras et diu vivas; laxatis dentibus laxantur et chylaceos officinæ; hinc mille malorum occasiones.—Baglivi XIII.

March 17.

ep6w

NEW MEDICAL WORK.

JUST published and for sale by Benjamin Perkins & Co.—THE FRENCH PRACTICE OF MEDICINE; being a translation of L. F. Begin's treatise on Therapeutics; with occasional notes and observations, illustrative of the treatment of diseases in the climate of North America. By XAVIER TESSIER.

ep3w

March 17.

CASEY'S APPARATUS FOR THE CURE OF DISTORTED SPINE.

THE Proprietor of the Dormant Balance for the cure of Distorted Spine, gives notice, that he has established an agency in this city, for the convenience of those who may wish to avail themselves of this invention. Physicians having under their care the subjects of this disease, or patients themselves, may have an opportunity of inspecting the apparatus, and examining the testimonials of its efficacy, at Mr. Charles White's, corner of Winter Street. It is recommended, however, that all patients availing themselves of this invention, should do it by the advice, and under the superintendence, of their own physicians, as it is only by medical opinion that the proper subjects of the machine can be determined, or the other proper measures to be made use of in conjunction with it, can be pointed out. The Proprietor expressly disclaims the idea that a cure is to be effected, in any case, by mechanical means alone. This machine has received

the approbation of many of the most eminent medical men in this city and New-York. Upon application to the agent, references will be given, and written testimonials exhibited.

All letters, post-paid, addressed to J. Lincoln, No. 27, Fayette Street, will be attended to.

Boston, Feb. 6, 1829.

EUROPEAN LEECHES.

RICHARD A. NEWELL, Druggist, 91, Summer Street, has on hand a small lot of EUROPEAN LEECHES, in excellent order, and of very large size, which he will sell at a fair price.

N. B. Leeches applied as usual, or sent to any part of the city. 4t.

SURGICAL INSTRUMENTS.

DAVID & JOHN HENSHAW & Co. No. 33; India Street, near the head of Central Wharf, have for sale a very extensive assortment of Surgical Instruments. Gentlemen wishing to purchase will find it to their advantage to call and examine them. Oct. 14.

NATHAN JARVIS,

Druggist and Apothecary,

HAS taken the Apothecaries' Hall, No. 183, Washington Street (lately kept by Messrs. Wm. B. & Henry White.) His stock of Drugs and Medicines is complete and genuine. Physicians and others are assured that their orders, prescriptions, &c. will meet with prompt and strict personal attention.

The old friends of this establishment are requested to continue their patronage.

MANUAL FOR THE USE OF THE STETHOSCOPE.

JUST published by Benjamin Perkins, & Co.,—MANUAL FOR THE USE OF THE STETHOSCOPE, being a short Treatise on investigating Diseases of the Chest. From the French of M. Collin, with an Introduction and Plates. By a Fellow of the Mass. Med. Soc.

The Stethoscope may also be obtained as above in the most approved form.

ep3w

Jan. 20.

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

I.

Cases of Neuralgia, or painful Affections of Nerves.

By JOHN C. WARREN, M.D.

NEURALGIA OF THE TRUNK.

Painful Affection of the Side.

THIS complaint was called Pleurodyne by Cullen and Sauvages; Pleuralgia by Good. Considered as to the organs diseased, it is of two kinds,—painful affection of the muscles, and painful affection of the nerves of the side. The former only appear to have been contemplated by the writers above named. They considered all these complaints to reside in the muscles; and Cullen set them down under the genus Rheumatism; while Good more properly viewed them as forming a separate genus, which he called Pleuralgia, and divided into acute and chronic.

Painful affection of the nerves of the side is distinguished from that of the muscles, in its wanting the tenderness or sensibility on pressure, which is generally found in the former,—in not being attended by pain on motions of the ribs or of the arm,—and in its permanency or greater duration.

The complaint may arise spontaneously; or from an injury; or from distortion of the ribs.

1. *Painful Affection of the Side, arising without evident Cause.*

Mrs. R. has been married two years without children; aged about 30; has had good health. About six months after marriage, began to be affected with a pain in the left side, about the fifth rib; extending from the angle of the rib forwards, towards the sternum. The pain gradually increased till it became severe, especially at night, when it deprived her of sleep sometimes. It has now destroyed her appetite, which was generally good. She is free from fever and derangement of the digestive organs. The pain keeps her in an unhappy state; prevents her employing herself actively in any way, and has caused a considerable degree of emaciation.

She was advised to apply eight leeches to the part affected, every other day, for three weeks; then to keep the side irritated with the ointment of Tartrite of Antimony, for two months; in the mean while, to take two drachms of the Carbonate of Iron in a day, and once in three days a purgative pill.

Four months after this prescription, I saw her again. She was free from pain; had recovered her strength, flesh, and spirits; and was able to use the arm without producing pain.

2. *From Injury.*

S. H., a young lady, 21 years of age. Four months ago, fell out of a chaise and struck the left side. For a week after the accident her side was sore, and tender to the touch. These feelings subsided, and she became affected with a pain in the injured part, occurring in irregular paroxysms, darting into the shoulder and arm. Her appetite and general health were not impaired, but her sufferings were such as to induce her to enter the Hospital Feb. 14, 1828.

After the warm bath, she was bled twice, cupped and leeches. The bleedings caused a remission of the pain for twenty-four hours; the local bloodletting gave no relief. The cataplasm of rice, and other hot applications, were employed; but no material alleviation was produced, excepting by blistering. This being pursued for about six weeks, she was entirely cured. She took the Carbonate of Iron at various intervals, as her stomach could bear it, during the treatment. I could not, however, feel satisfied of its having the least influence on the complaint.

3. *From Distortion of the Ribs.*

Mary Brown, a maid-servant, 25 years old, living in a family where I attended, requested my advice for a distressing difficulty in her side. She had had it four years, and often suffered so much as to be compelled to give over her work and lose her places. The pain was on the left side, about the fifth and sixth ribs; thence it darted forwards to the sternum. The periods of its occurrence va-

riable. She had no fever nor cough, but often lost her appetite from the pain. On examining the part, I found a deep indentation in the lowest true ribs, in which I could place my hand. The part was not tender to the touch. She had employed many remedies without relief. I advised her to go into the Hospital. She did not do this, and quitting the place where I saw her, I lost sight of her, and know nothing of what followed.

At what period of life the distortion in this girl occurred, I was unable to ascertain. I was led to suspect it to be brought on by girding her chest, with the intention of improving her shape. It is well known that this practice is a frequent cause of Pleuralgia in young ladies.* The pain thus caused is generally in the muscles.

Neuralgia of the Spinal Cord.

Some years ago, a lady who had been a few months married, and had enjoyed perfect health before, applied to me for a painful affection in the back, of recent occurrence. The pain began in the upper part of the os sacrum, darted into the nates, and thence down the lower extremities. It occurred in paroxysms, frequently repeated, every day, and especially

* I cannot omit the present opportunity of stating, that the same practice frequently causes a deep-seated, obstinate pain in the head, which no bleedings relieve for any length of time. The cause of this pain is the interruption of the blood through the descending aorta; in consequence of which it is thrown with unnatural force on the brain, and brings on a permanent derangement of the organ. The pain in the head, thus produced, has terminated in insanity, in three cases within my knowledge,—two of which have proved fatal.

at night. The pain was of the electric character.

Circumstances did not permit me to advise a full treatment of the case; all I could do was to direct a large application of leeches to the seat of pain, and the use of ice to the part twice a day. What was the effect of these applications I know not, as the patient resided at a distance. Subsequently she was so situated as to undergo a very powerful treatment,—various bleedings, cuppings, leechings, and many internal medicines. None of them were productive of any permanent change in the disease. She continues to suffer to this day, though the pain diminishes. She has had no children. Her general health is not essentially impaired.

This is a case not very uncommon, though rarely so obstinate as in this instance.

Neuralgia of the Cauda Equina from Injury.

Mrs. C., a patient of mine, informed me that a year previous to her application to me, she slipped on the ice, and received the weight of the shock in falling on the extremity of the os sacrum. The pain was severe at the time, but subsided, and in two or three weeks she felt little of it. Then, having sat for a considerable time on a hard seat, she was seized with a pain in the injured part, which ran down the limbs, occurring frequently in the course of the day. She had suffered much, but had been unwilling to apply for advice through delicacy.

A frequent application of cold to the part, with occasional leeches, relieved her entirely in about three months, with the exception of a twinge of pain now and then.

Neuralgia caused by Pressure on the Ischiatic Plexus.

Mrs. G., pregnant with her first child, in the eighth month, was seized with a pain in the upper part of the os sacrum, shooting into the thighs. She had been affected in this way ten days when I saw her, and with severity enough to keep her in bed. Supposing the pain to arise from pressure, I consoled her with the expectation of relief on her confinement; advised abstraction of blood, and some local applications, which relieved her for the time.

About three weeks after her confinement, she sent for me to visit her again. She had been confined, she informed me, without any extraordinary difficulty; had been well afterwards, till within two days. She was attacked with a severe crinkling pain in the os sacrum, darting round the pelvis and into the thighs. She had also numbness in the lower extremities, and an inability of using them. Her appetite was gone. She had no fever.

She was cured in a short time by the application of blisters, successively to the region of the os sacrum and each thigh, with diligent frictions of Ammoniated Alcohol to the limbs. Six months have elapsed without the recurrence of the pain.

Neuralgia of the Spinal Cord, cured by extensive Irritation of the Skin.

Mrs. R., after a severe attack of rheumatism in the muscles of the right scapula, of about three weeks' duration, had a sudden transfer of the pain to the middle of the lumbar region. The pain now became spasmodic,—that is, occurring in paroxysms,—and shot down both the lower extremities,

with a burning sensation; and by its repeated attacks, disabled these limbs in such manner, as to confine her in bed for three or four weeks. Having made active applications, I had begun to be discouraged as to the result of this case. The remedies soon after seemed to make an impression. The first relief was obtained from leeches. By a steady perseverance in the use of this application, with very extensive blistering, and irritation of a great surface of skin by stimulating frictions; with the internal use of Sulphate of Iron, she is relieved of the pain, and is recovering her strength.

Neuralgia of the Uterus, successfully treated.

Mrs. — is 32 years of age. She possesses naturally a strong constitution, and has had but little interruption of health at any time, previous to her present illness. She has been accustomed to great activity in domestic affairs, and occasionally has exerted strength beyond the bounds of prudence. She was married in 18—, and has since become the mother of four children, who are all distinguished for sound, vigorous health. Her confinements have been short, and in all respects such as females of the best health, and of the most regular habits have been favored with. In January of the present year, she miscarried at the period of eleven weeks. The cause of this misfortune was attributed at the time to over-exertion. More than a year before, she had strained herself by lifting a person in sickness. In October or November previous to the accident referred to, she exerted herself unusually twice or three times, lift-

ing weights which occasioned sensible weakness. From the commencement of her pregnancy, she had complained more or less of pains in the back and bowels, and in other respects was subject to unpleasant sensations, such as she had not before experienced under similar circumstances. These pains increased, and in the early part of —, 18—, she miscarried. The usual symptoms attending such an event were very favorable, and she had the prospect of recovery; but the pain and weakness of her back and other parts were not subdued. As soon as it was thought expedient by the attending physician, she rode out, and in one instance evidently took cold. Immediately following this was a severe attack of pain throughout the region of the uterus and the parts adjacent, which lasted for several days, and was ultimately reduced only by the application of the most powerful remedies. After she had recovered from this attack, she was better a short time, but she had another relapse, which was treated in the same manner as before, except that she was not bled. Warm fomentations, poultices, blisters, and opiates of various kinds, with occasional cathartics, were the remedies applied. Thus, she continued suffering frequent relapses, as the weather was more or less favorable to health and exercise in the open air through the winter and spring months. Through the whole time since her miscarriage, her periodical discharges have been regular, and such as are usual in time of health. Every part of her frame has seemed to convalesce, except her back, which remains weak and subject

to frequent pains, attended sometimes with a slight burning sensation, and a glow of heat shooting into the extremities.

A pain in the left side and breast has troubled her frequently, in addition to what is stated above.

Such was the condition of the patient when I saw her. Her appearance was not that of an invalid, yet she suffered very severe and constantly-repeated paroxysms of pain. Walking distressed her extremely, so that for months she had walked only a few steps at one time; riding she bore well. She was never wholly free from pain. It occurred in paroxysms, frequently repeated through the day, and was most severe about the catamenial period. The pain seemed to begin in the uterus. The lower part of the spine was almost equally affected. An eminent practitioner attributed the symptoms, as described to him, to prolapsus uteri. There was in fact no prolapsus.

The course I recommended was, first, repose; second, eight to ten leeches to the os sacrum, every other day, for fifteen days; then to omit fifteen days, and blister in the interval, avoiding the catamenial period; third, a sparing, vegetable regimen; fourth, three grains of Sulphate of Iron, three times a day.

Under this course, she regularly improved for two months, when the leeches and blistering were omitted. The Iron was continued for six months, when I had the satisfaction of hearing of her perfect health.

This disease was brought on principally by exposure to cold, soon after the miscarriage.

Obstinate Neuralgia of the Uterus, from Exposure to Cold and Moisture during Catamenia.

Mrs. R., aged 30, the wife of an intelligent clergyman, on a mission to the Sandwich Islands, is the subject of this case. While residing at the Sandwich Islands, in the year —, she, with her husband and others, crossing from one Island to another in an open boat, was exposed to a heavy rain, while laboring under the periodical indisposition. She, in consequence, had a smart attack of fever, lasting about three weeks, and was left by it with the peculiar affection to be described. This consisted in an acute darting pain, beginning within the cavity of the abdomen, at the lower and middle part, and extending and shooting into the os sacrum, and down the back part of the thighs; forwards, also, into the region of the os pubis and groins. This pain was attended with a violent straining and bearing down, like the pain of parturition. The suffering was most distressing. It deprived her of appetite, broke up her repose, caused derangement of the digestive organs, and great emaciation. She rarely sat up, but passed nearly the whole time in the horizontal posture, any other position being insupportable. At some times she could not bear the slightest movement without pain; and not only muscular motion, but also noise and light excited suffering. The paroxysms were most severe before and during the period of the monthly indisposition; for she continued to be regular in this particular, with an interruption at the first period of disease. When free from pain, she was cheerful, very conversible, and being extremely intelligent, was

a very agreeable person. Her sufferings had in no degree impaired her intellectual powers, although they had continued, at the time she fell under my examination, for more than two years. On the invasion of this complaint, she had various bleedings and other remedies administered; but when these proved ineffectual, her usefulness being found to be at an end, and that of her husband greatly embarrassed, by the attention which, in that remote region, she could receive from no other person, it was decided that they should return to England, their native country. A ship of the United States presenting at the time, they embarked in her, and arrived at New-Bedford, fifty miles from Boston.

After she reached Boston, and my advice was desired, having heard her history and considered her general aspect, I was led to suspect the existence of an organic disease of the uterus. To such an opinion, however, there presented some objections. On placing the hand on the abdomen, no tumor or induration could be discovered; there was no unnatural discharge; the monthly evacuation, though suppressed at first, was now as it should be. Being at a loss how I should regard and treat her disease, I requested an examination, which was assented to immediately. On executing this part of my duty, I ascertained that the os uteri, and all the organs in its vicinity, were perfectly free from any change of structure, and that they exhibited no morbid sensibility. My examination convinced me that no organic lesion existed in any part within reach of this investigation. More at a loss than ever to deter-

mine the true nature of this disease, I requested the advice of my friend and colleague, Dr. Jackson. He, after a careful observation of her symptoms, agreed with me that the case was an anomalous affection of a nervous character. We determined to recommend the frequent application of leeches, as near as possible to the seat of pain; to employ vesication of the abdomen, and the internal use of Hemlock. The leeches gave relief; the other remedies none. The pains were so severe as to require the almost daily use of opium, though I resisted the employment of this medicine as much as possible, and the patient herself was anxious to avoid contracting the habit of resorting constantly to it. I will not detail all the various remedies employed to remove or mitigate this affection. Mercury I did not use, because it had been previously administered with bad consequences. Local applications in the form of lotions, fomentations, and injections, gave no relief, excepting that the paroxysms were sometimes mitigated by injections of the rectum, with considerable doses of a watery solution of opium. Among other articles, she very freely, and for a long time, tried the Carbonate of Iron; though I did not, at the period I advised it, consider her case as a proper Neuralgia; and it was not till sometime after that I was led to adopt this opinion.

After she had remained in Boston four or five months, the prosecution of the voyage to Great Britain was thought of; and I assented to it, with the hope that the change of climate might be useful. It was arranged that she should embark at New-York, but whe-

ther she could bear the movement of a carriage was very doubtful, as she had not quitted her room for a number of months. The experiment was made, by conveying her about six miles on her journey, to the house of a benevolent gentleman, who invited her to his family; but on her reaching this house, she was unable to proceed further. Her disease became more alarming; she could no longer leave her bed; the slightest agitation of mind or body caused intense suffering; even when I visited her, she could with difficulty converse with me and answer my questions. She appeared on the verge of dissolution. Having occasion to visit Philadelphia, I left her, without the expectation of seeing her again. On my return through New-York, I met in the street her husband, the Rev. Mr. —, who informed me that Mrs. — had been able to reach this city, and was on the point of embarking for England. I immediately visited her; and the visit was as unexpected to the lady, as it was agreeable to me; for I found her much recruited, and able to prosecute her voyage with some hope of advantage.

They safely reached England; and some months after, I had the satisfaction of receiving a letter from the Rev. Mr. —, by which I learnt that my patient had much improved; that her complaint had been thought by eminent English physicians to be an affection of the spine, or spinal marrow; and that he believed they would soon be able to return to the Sandwich Islands, the land of their hopes and labors. This agreeable intelligence was soon clouded by information that she had relapsed into her former suffering condition,

and that there was no remaining expectation of her recovery; and this is the latest account I have received.

When the peculiar situation of the pain in this case is considered; its occurrence in paroxysms, like other neuralgias; its extension to the nerves of the vicinity; the bearing down through the centre of the pelvis; the circumstances of its first appearance,—that is, the condition of the uterus at the time, and the change afterwards; its obstinacy; the absence of any discharge, and of any organic derangement in the part affected, or its neighborhood, I think we may venture to consider this to be a genuine and severe neuralgia of the uterus. Cases of a milder character have occasionally presented themselves to my notice.

II.

Atrocious Murders in Edinburgh.

(Concluded from p. 118.)

HARE's wife was the next witness called. She was told by the Court, that she would be free from harm, if she spoke the truth. She detailed the circumstances of the quarrel (or pretended quarrel) between Burke and her husband, in which the old woman was pushed down. Saw Burke get upon the old woman's breast, and M'Dougal and witness then ran into the passage. Had some suspicion of what Burke was about, as she had seen some tricks of the same kind done; in the course of the afternoon M'Dougal came and said to witness there was a shot in the house; she did not say what she meant by a shot, but she said that her husband had fetched her from a shop; M'Dougal told her at the same

time she used the term shot, that it was a woman; she did not say expressly they were to murder the woman, but witness understood that to be her meaning, as she had heard such a meaning used to the term before; Burke had given the woman drink before, but he did not press liquor upon her; she seemed rather the worse for liquor; stopped in Burke's house till between four and five o'clock in the morning.

Mr. Black, surgeon to the Police establishment, and Professor Christison, had examined the body, and were of opinion that the woman had died from suffocation, but the appearances did not justify a positive medical opinion. There were only suspicions that the death had been caused by violence, though the appearance of the body would indicate it, and that death had been caused in the manner related by Hare and his wife, by throttling, by applying the pressure of the hand under the chin, throwing the head back, and preventing air getting access to the lungs.

The declarations which were emitted were then read. Burke described himself as a native of Ireland; that he has been ten years in Edinburgh; is a shoemaker; and lived with Elizabeth M'Dougal, but was not married to her. He pretended to account for the dead body being in his house, by saying it was brought there by a porter.

The Lord Advocate then addressed the Jury on the part of the Crown. He contended that the case against Burke was completely made out. With regard to M'Dougal, that she had a previous knowledge of the intended crime, which was evinced by the statement she made to Mrs. Hare, that they had a "shot in the house for the doc-

tors;" together with her offering a bribe to Mr. and Mrs. Hare, to conceal what they knew; and, in fine, she was so connected with the foul deed, that he was entitled to ask a verdict against her also.

The Dean of Faculty (Sir J. Moncrieff) made an ingenious defence on behalf of Burke. He would admit that the old woman had lost her life, and that the body was taken by Burke to Surgeons'-square; but he submitted that it was not made out that she had lost her life by violence. The medical gentlemen could only state their suspicions as to the probable cause of death. Having alluded to M'Dougal offering to bribe the Grays to silence, as not being evidence against Burke, he proceeded to remark, that concealment was a natural consequence from the trade he followed; and the fact of selling the body proved nothing but having got possession of a subject, which he applied to the purposes of the profession he was pursuing. The learned Baronet argued, that the evidence of Alston demolished the evidence of Hare and his wife, supposing any reliance could be placed upon so despicable a pair. It was true, he had heard a noise in Burke's house, and the sound as of a person strangling; but, according to Hare, that sound could not have proceeded from the woman. Would it not be hard to find a man guilty of murder upon such slight and contradictory evidence?

Mr. Cockburn made a powerful appeal in behalf of the female prisoner. Surely no reliance could be placed upon the character of such wretches as Hare and his wife. Their character was written in letters of blood, that never could be effaced from the recollection of all who heard their horrid and

heartlessly detailed narrative. Could the Jury conceive an accessory to murder worthy of credit?—and yet the law made him an admissible witness. Here was a monster made the chief evidence to prove a murder—who had told he sat on a chair, within a yard of the murder and murderer, and raised not an arm, uttered not a cry, to save the unhappy victim. Which, he would ask, was the most guilty—the cool, cold-blooded spectator of a foul murder, or the phrenzied actor in it? The learned advocate forcibly animadverted upon Hare having declined to answer the questions he had put to him. To the questions—whether he had been concerned in other murders? whether he had been connected with a murder committed in his house in October last? he had declined giving any answer. These detested beings had not merely been accessories to one murder, but the guilt of many murders hung upon them. The miserable wretches had been that very day brought from jail, to which they would be again consigned, if they failed to make the Jury believe their story. They had heard the evidence—they had seen the squalid wretch—who was the very picture of poverty and vice, state, his traffic was to deal in dead bodies—a traffic as revolting to correct feeling as his will was profligate. His learned friend had surely little skill in physiognomy, or he would never have put the woman into the box, on whose countenance every evil passion was imprinted. She stood there, a picture of hard-hearted insensibility, with a miserable child in her arms, and, instead of casting upon it a look of maternal kindness, seemed to eye it only in a manner that added to the malignity of her counte-

nance. He would say, without fear of contradiction, that he never had, in the course of his practice, seen such wretches placed in the witness-box. Their evidence had had no legal corroboration. Without these, there were doubts in the case, of which it was the duty of the Jury, fearless of clamor, to let the prisoner have the benefit.

The Lord Justice Clerk began his charge to the Jury at six o'clock on Thursday morning, and finished about half past eight. After reviewing the evidence generally, he proceeded to comment upon that of Hare and his wife. They had been told of the Hares being connected with other murders, for which they might be brought to trial. With what murders they might be chargeable he did not know; but it was unfounded in law to say, that these two persons were liable to be tried for the other two murders contained in the indictment. These individuals, who were under the protection of the Court, had been called as accomplices, and their evidence was admissible; but it was the duty of the Jury to sift that evidence. Slight contradictions in minute particulars, if they agreed in the main facts, only tended to confirm the accuracy of the whole. He admitted in one instance they would have rather a difficult task, to reconcile the distinct statement made by Alston as to what he heard, and the evidence of the Hares. Their statement as to the fighting was corroborated by a great number of the other witnesses; but they went on to state that the old woman cried out "murder," and went into the passage to call for the police, and was brought back by no one. With respect to M'Dougal, if the evi-

dence was to be believed, she had been an accessory before the commission of the crime, during its commission, and after it was committed; and, upon the whole, he seemed to consider the libel as made out upon both panels.

The Jury, after having been enclosed for fifty minutes, returned a verdict, finding William Burke guilty of the murder; in regard to Helen M'Dougal, they found the libel Not Proven; which implies that she is dismissed, not because she is innocent, but because her guilt is not satisfactorily established.

The Lord Justice Clerk, in thanking the Jury for their anxious and patient attention to the case during twenty-four hours, said he believed they must have had good grounds for the doubts of which they had given M'Dougal the benefit.

Lords Meadowbank and Mackenzie suggested that the prisoner should suffer death on the 28th of January, and his body be dissected; and expressed, in eloquent terms, the horror they felt at the monstrous exhibition of atrocity just disclosed.

He then addressed the prisoner M'Dougal, and warned her that the Jury had not pronounced a verdict of Not Guilty, but only a verdict of Not Proven, which did not clear her character. Whether she was guilty of the crimes of which she had been charged, was only known to God and her own conscience.

The scene was altogether awful and impressive. Burke stood up with unshaken firmness. Not a muscle of his features was decomposed during the solemn address of the Lord Justice Clerk consigning him to his doom. The

female prisoner was much agitated, and was drowned in tears during the whole course of this melancholy procedure.

ADDITIONAL PARTICULARS.

After the trial, Burke and M'Dougal were removed to the lock-up-house, whither Hare and his wife had been conveyed after giving their evidence. They were detained there until four o'clock on Friday morning, when Burke, Hare, and his wife, were taken to the gaol; M'Dougal was liberated that night, having been only detained in the lock-up-house for her personal protection. She immediately returned to her old den, the scene of so many murders. On Saturday evening, she incautiously ventured out to a neighboring shop for whiskey; and being recognized, a mob assembled, and she would certainly have fallen a sacrifice to their fury, had not the police, by great exertions, got her into the watch-house, whence she escaped in man's clothes, through a back window.

In the course of his trial, Burke asked when he would get dinner; and being informed it would be about six, he begged that he might have a biscuit or two, as he would lose his appetite before that time. Before the Jury retired, and during the time they were enclosed, he endeavored to prepare the mind of M'Dougal for her fate; as, from the address of the Lord Justice Clerk, he supposed she would be found guilty; in the view of which, he gave her directions how she should conduct herself, desiring her to look at and observe him while the Lord Justice Clerk was pronouncing sentence. When the Jury returned with their verdict, they mention-

ed first that they found the libel against M'Dougal not proven. He was immediately heard coolly to exclaim, "Nelly, you are out of the scrape." After the Lord Justice Clerk's address to him, he was very anxious that permission should be given to M'Dougal to remain a day or two in the lock-up-house, for her personal protection. On his way from the Court to the lock-up-house, on Wednesday evening, Hare was seized with a fit of fiendish merriment, exulting, jeering, and laughing, at his own fancied escape, while Burke was likely to be caught in the noose; but we have not heard whether he displayed the same jocularly on his way to the Calton-hill. His wife appeared to be in all respects worthy of her husband. While giving her evidence, she had in her arms a child, ill of hooping cough, and altogether the picture of abject misery and disease; but instead of treating it with that maternal tenderness which even the tigress shows for her whelps, she seemed to regard it with aversion and hatred, shaking and squeezing it, whenever the cough seized it, with the expression of fury in her countenance. Burke has manifested some compunction since his sentence, and it is hoped he will not die without making a full confession of his numerous crimes. Hare, he says, is the worst of the two, for he murdered the first woman, and persuaded him to join him; and Daft Jamie, the porter, he states to have been murdered by Hare and his wife, though he admits he received part of the money for the body. Hare and his wife are closely confined in separate cells, and it is expected will yet be brought to trial,

from the activity of the law officers and police. A servant girl of Hare's, who was cited as a witness, and had absconded, has been brought back to Edinburgh. M'Dougal has offered to give evidence against Hare.

It is thought that Hare, even while in the witness-box, would have confessed not merely a knowledge of, but to having had a principal share in, several murders, had it not been for the caution of the Court. In fact, he was disposed to be extremely communicative, and apparently had no idea that anything he had stated was at all remarkable or extraordinary. Daft Jamie was murdered in Hare's house, and he has mentioned some circumstances connected with the destruction of this poor man. Jamie was enticed into Hare's house by Burke, the usual decoy-duck in this traffic of blood (the appearance of Hare himself being so inexpressibly hideous that it would have scared even the poor idiot, Jamie,) and he was plied with liquor for a considerable time. At first he refused to imbibe a single drop; but by dint of coaxing and perseverance, they at last induced him to take a little; and, after he once took a little, they found almost no difficulty in inducing him to take more. At length, however, he became overpowered, and laying himself down on the floor, he fell asleep. Burke, who was anxiously watching his opportunity, then said to Hare, "Shall I do it now?" To which Hare replied, "He is too strong for you yet; you had better let him alone for a while." Both of the ruffians seem to have been afraid of the physical strength which they knew the poor creature possessed, and of the use he

would make of it if prematurely roused. Burke accordingly waited a little ; but getting impatient to accomplish his object, he suddenly threw himself upon Jamie, and attempted to strangle him. This roused the poor creature ; and, muddled as he was with liquor and sleep, he threw Burke off, and got on his feet, when a desperate struggle took place, and Jamie bit Burke so severely that a cancer ensued, which, in all probability, would hereafter have terminated his days. Burke was about to be overpowered, when he called out furiously to Hare to assist him. This Hare did by tripping up Jamie's heels ; after which both of the ruffians got upon him, and at length, though not even then without the greatest difficulty, succeeded in strangling him. The circumstances of the murder of the poor old woman Campbell appear on the trial. The other charge is that of the girl Paterson, who, with a companion, Janet Brown, had been discharged from the Canongate police-office on the 9th of April. They went to a spirit-shop, where they met Burke, who treated them, and invited them home to the house of Constantine Burke, a scavenger, in the Canongate. This Burke went out to his employment. After they had been drinking for some time, a quarrel, as usual, commenced between Burke and his wife, and Janet Brown, frightened, quitted the house, leaving Paterson asleep in one of the beds. In twenty minutes she returned for her companion, and was told she was gone. The horrid deed had by that time been effected, and the same afternoon the body was taken to the dissecting-room and disposed of

for 8l. The appearance of this body (says the Edinburgh Courant) which was quite fresh, which had not even begun to grow stiff, of which the face was settled and pleasant, without any expression of pain, awakened suspicions, and Burke was hardly questioned as to where he procured it. He easily framed some plausible excuse, that he had purchased it from the house where she died, which silenced all further suspicion. This gang of murderers found it necessary at times to deceive the anatomists into a belief that the subjects sold had come from a distance. It is reported that an elderly woman, belonging to the Grassmarket, who gained a livelihood by washing, and who was employed for that purpose by Burke, was murdered by him about fourteen days previous to the death of Mrs. Campbell, and that the body was packed up to represent a bale of goods coming from the country. Also, that in the course of the autumn a poor Irish mendicant and her son, a lad of fourteen or fifteen years of age, and of weak intellect, were murdered. The female was bereaved of life by Burke when lying asleep on the straw in the corner so often described ; she was stripped, and put into a herring-barrel among brine ; while Hare strangled the lad over his knees, by the fire-side, and thrust the corpse into the cask above his mother.

It is stated that Hare has confessed having been concerned in no less than twelve different acts of murder, in some of which he was the principal, and in others an accessory ; and that he knew of another, in which, however, he was not a party. The *Caledonian Mercury* says—" We have

learned from good authority that Burke admits having sold in all (we shall not say to whom) from 30 to 35 uninterred bodies during the last two years. The wretch has also admitted that he was not a resurrectionist—that neither Hare nor himself was ever by the side of a grave in a churchyard for the purpose of plundering it—and that the bodies they disposed of were bodies which had never been interred. If it be true, then, as Burke now states, that in the course of the last two years he sold to one individual from thirty to forty uninterred bodies, the conclusion is inevitable, that he and his associates must have committed as many murders! Nor are there wanting other circumstances tending to corroborate this terrific suspicion, to give it no stronger epithet. It has been remarked, that numbers of the unfortunate females upon the town have lately disappeared, no one knew how. Natural deaths have become rarer among that class; and for some time past the interment of one of them has scarcely been heard of. Abandoned by the relatives and friends whom they dishonored, and excluded from all notice or regard by the virtuous part of society, there was none to inquire what had become of them. Connecting this circumstance with the *exuvia* found in the den of murder occupied by Burke, the conviction has been strengthened that the greatest number of his victims were selected from this degraded class. In Burke's house, however, there are appearances visible which must impress every one with a persuasion that others besides Docherty have been sacrificed under the same roof.

Bloody straw in a corner, a heap of bloody clothes on the floor, and a pile of old boots and shoes, amounting to several dozens (for which the miscreant's pretended trade of a shoemaker can never account) seem to us strong indications that the den of the monster now so justly condemned to die, has been the scene of manifold murders.

The two houses inhabited by this gang were well chosen for the purposes to which they were intended. Burke's dwelling, in which he has only resided since about the month of June last, is at the end of a long passage, and is separated from every other house except one. After going through a close from the street, there is a descent by a stair to the passage, at the end of which is to be found this habitation of wickedness. It consists of one apartment, an oblong square, at the end of which is a miserable bed, under which is still to be seen the straw in which his murdered victims were concealed. The house of Hare is in a still more retired situation. The passage to it is by a dark and dirty close, in which there are no inhabitants except in the flat above. Both houses are on the ground floor."

III.

SELECTIONS.

Preservation of Leeches.

M. Hamgre has, by the following method, succeeded in preserving leeches for a considerable time:—They are kept in small barrels, the internal surface of which has been reduced to charcoal, the bottom being covered by sand, moss, and charcoal. In

summer-time the water must be changed every eight days; during winter it is sufficient to renew it every sixth week.

Journ. de Chim. Med.

Swiss Medical Societies.

There exists at Zurich a very active medical society, who publish an annual volume of transactions, of which that for 1828 has just appeared. It has invited the societies of the different Cantons of Switzerland to coöperate in the undertaking; the proposition was accepted with eagerness, and for the future the transactions will appear as does the present number, under the title of Transactions of the United Medical Societies of Switzerland.

Prize Question on the Advantages of Comparative Anatomy.

Among the subjects of prize essays proposed by the Dutch Society of Science, of Haarlem, (and which are all given in the last number of the Edinb. New Phil. Jour.) is the following:—What are in general the advantages and illustrations which, since Haller's time, physiology, or the physical history of man, has derived from zoology or comparative anatomy? What are, in particular, the organs of the human body that have been made better known since that period; and what are the functions on which zoology and comparative anatomy have thrown new light?

Dragon flies innocuous.

Nothing can be more absurd than the fear almost universally entertained of the larger sorts of dragon flies (*Libellulidæ*), which are branded with the erroneous name of horse-stingers, though the most superficial examination will demonstrate that these insects have not a shadow of a sting: but their jaws are large and strong; not stronger, however, than those of the *Staphylinus*, and not dangerous in the slightest degree, even to infants.

Degree conferred on a Female.

The medical faculty of Marienburg has conferred the degree of M.D. on the widow Boivin, head-nurse and directress of the hospital of the Faubourg St. Denis, at Paris, the authoress of a clever work on midwifery, and other writings.

Qualities of Glauber and Epsom Salts.

Glauber salts have been considered a more tonic aperient than Epsom salts. This is accounted for by the presence of a little iron in the one, and the absence of it in the other. According to the experiments of Dr. Davy, physician to the forces, out of six different specimens of Glauber salts, five were found to contain a small quantity of iron, (probably the sulphate,) and one only to be free from iron. The iron was detected by aqua ammonia, added to the salt in solution; it occasioned a yellowish brown precipitate. Epsom salts may, no doubt, be made a tonic, by the addition of a very minute portion of iron, and particularly of the sulphate.

New Fulminating Powder.

A German chemist has discovered, that by mixing two parts of nitrate of potash, two parts of neutral carbonate of potash, one part of sulphur, and six of sea salt, all finely pulverized, a fulminating powder of the greatest strength is obtained; and what is very remarkable, the force of the explosion is constantly directed below.

IV.

HOSPITAL REPORT.

Amputation of the Foot across the Metatarsal Bones.

ON the 3d of April the operation for amputation of the foot across the metatarsal bones was performed by Dr. OTIS. The patient had both feet frozen some weeks before. The toes

of the left foot died and were removed without incision. In the right foot the mortification had extended to the skin and muscles over the metatarsal bones. The consequence was, that the extremities of these bones were left in a projecting state, so that the skin could not form over them in their existing state. To shorten the cure and give the patient a comfortable foot, it was necessary that the foot should be partially amputated. The operation was performed as follows :

A semicircular incision, convex in the middle, was made on the upper surface of the foot, and the same on its lower surface. The skin was dissected back on the upper and under part, and the muscles and tendons divided to the bone. A narrow bladed knife was then passed through the interosseal spaces in succession ; and then the operator, taking a retractor with six heads, passed a head through each of the four spaces, and confided the retractor to his assistant, the attending surgeon of the Hospital, Dr. Warren. With the metatarsal saw the four smaller bones were removed, and the larger with an amputating saw. The flaps were then brought together and secured. There was but little hemorrhage. The patient has been comfortable since, and will have a useful foot.

In such a case it is very important to save as much bone as is consistent with the object of the operation. The surgeon acted judiciously in this case in cutting through the metatarsal, rather than the tarsal bones ; as he was thus able to give the patient a greater surface for support.

Examination of a Case of Scirrhus Mamma.

Mrs. —, affected with a considerable tumor of the breast, died on the 5th of April, and was examined on the 7th. The tumor was hard, very irregular, involving the pectoral

muscle and a portion of surrounding cellular membrane. On opening the cavity of the thorax, the right cavity corresponding with the diseased breast was quite full of water. The right lung had in a great measure shrunk up, or rather been compressed into a small and solid mass from the pressure of water. Its serous coat was very much thickened, and adhered by long and soft strings of lymph, extending through the waert to the sides of the cavity. There was a quantity of blood effused into the cavity ; whether from a wound in the incision of the breast, which had taken place the day before, or from erosion of the lung, could not be ascertained. The ribs were so fragile as to be readily snapped by the fingers. In the cavity of the abdomen the liver was found to be filled with white colored tubercles.

A Communication is acknowledged from Dr. J. B. Brown.

WEEKLY REPORT OF DEATHS IN BOSTON,

Ending April 3, at noon.

<i>March</i> 27.	Richard Mansfield,	3 yrs.
	Dr. John Gorham,	46
28.	William L. Codman,	17 mo.
29.	Elizabeth Rowland,	26 yrs.
	Daughter of Susan Haskins,	3 w.
30.	Martha Partridge,	21 yrs.
	Mary Daniels,	35
	James Gooch,	38
31.	Margaret Malony,	2
	Frederick Curtis,	36
	Abraham Thompson,	5
	Benjamin Tilden,	56
	Bradley Cummins,	45
<i>April</i> 1.	John P. Warner,	26
	Abigail Fielding,	35
2.	Julia Maria Spear,	13 mo.
	Charles Cain,	7 d.
	Betsey Cook,	33 yrs.
	Maria C. Reed,	23
3.	Catharine O'Conner,	34
	Sarah Holmes,	26
	James Hawkes,	4 w.

Apoplexy, 1—brain fever, 1—consumption, 3—childbed, 2—croup, 1—dysentery, 1—dropsy, 1—dropsy in the chest, 1—inflammation in the bowels, 1—lung fever, 2—marasmus, 1—pleurisy, 1—unknown, 6. Males, 11—females, 11. Stillborn, 2. Total, 24.

ADVERTISEMENTS.

DENTAL SURGERY.

THIS day received by Benjamin Perkins & Co., No. 135, Washington Street,—A SYSTEM OF DENTAL SURGERY. In three parts.

1. Dental Surgery as a Science.
2. Operative Dental Surgery.
3. Pharmacy connected with Dental Surgery.

By SAMUEL SHELDON FITCH, M.D., Surgeon Dentist. *Denticum curam habeto ut bene digeras et diu vivas; laxatis dentibus laxantur et chylaceos officinae; hinc mille malorum occasiones.*—Baglivi XIII.

March 17.

ep6w

NEW MEDICAL WORK.

JUST published and for sale by Benjamin Perkins & Co.—THE FRENCH PRACTICE OF MEDICINE; being a translation of L. F. Begin's treatise on Therapeutics; with occasional notes and observations, illustrative of the treatment of diseases in the climate of North America. By XAVIER TESSIER.

ep3w

March 17.

CASEY'S APPARATUS FOR THE CURE OF DISTORTED SPINE.

THE Proprietor of the Dormant Balance for the cure of Distorted Spine, gives notice, that he has established an agency in this city, for the convenience of those who may wish to avail themselves of this invention. Physicians having under their care the subjects of this disease, or patients themselves, may have an opportunity of inspecting the apparatus, and examining the testimonials of its efficacy, at Mr. Charles White's, corner of Winter Street. It is recommended, however, that all patients availing themselves of this invention, should do it by the advice, and under the superintendence, of their own physicians, as it is only by medical opinion that the proper subjects of the machine can be determined, or the other proper measures to be made use of in conjunction with it, can be pointed out. The Proprietor expressly disclaims the idea that a cure is to be effected, in any case, by mechanical means alone. This machine has received

the approbation of many of the most eminent medical men in this city and New-York. Upon application to the agent, references will be given, and written testimonials exhibited.

All letters, post-paid, addressed to J. Lincoln, No. 27, Fayette Street, will be attended to.

Boston, Feb. 6, 1829.

EUROPEAN LEECHES.

RICHARD A. NEWELL, Druggist, 91, Summer Street, has on hand a small lot of EUROPEAN LEECHES, in excellent order, and of very large size, which he will sell at a fair price.

N. B. Leeches applied as usual, or sent to any part of the city. 4t.

SURGICAL INSTRUMENTS.

DAVID & JOHN HENSHAW & Co. No. 33, India Street, near the head of Central Wharf, have for sale a very extensive assortment of Surgical Instruments. Gentlemen wishing to purchase will find it to their advantage to call and examine them. Oct. 14.

NATHAN JARVIS,

Druggist and Apothecary,

HAS taken the Apothecaries' Hall, No. 185, Washington Street (lately kept by Messrs. Wm. B. & Henry White.) His stock of Drugs and Medicines is complete and genuine. Physicians and others are assured that their orders, prescriptions, &c. will meet with prompt and strict personal attention.

The old friends of this establishment are requested to continue their patronage.

MANUAL FOR THE USE OF THE STETHOSCOPE.

JUST published by Benjamin Perkins, & Co.,—MANUAL FOR THE USE OF THE STETHOSCOPE, being a short Treatise on investigating Diseases of the Chest. From the French of M. Collin, with an Introduction and Plates. By a Fellow of the Mass. Med. Soc.

The Stethoscope may also be obtained as above in the most approved form.

ep3w

Jan. 20.

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

THE BOSTON
MEDICAL AND SURGICAL JOURNAL.

Vol. II.]

TUESDAY, APRIL 28, 1829.

[No. 11.]

I.

MEDICAL EXAMINATIONS.

[We have so frequently heard the sentiment expressed by intelligent members of the faculty, that the true test of the merits of a candidate for a medical degree, is, after all, his *examination*, that we are induced to copy the following spirited article from the Medico-Chirurgical Review, although some parts of it are better adapted to the stormy state of the profession in England, than to its more peaceable and dignified condition among ourselves.]

AMONG the speculations which are daily vomited forth by the medical press respecting radical changes—declamations which are eminently calculated to prevent all moderate and rational reform, by deterring influential members of the profession from joining in the cry—we shall here notice the project of *testing* all candidates for medical diplomas or license, by the EXAMINATIONS ALONE, without any production of documents respecting the time, place, or amount of previous medical education or study. A more wild, dangerous, and visionary plan was never engendered in the brain of the most fiery fanatic or levelling enthusiast. It argues a monstrous

lack of knowledge of the world. In the first place, we challenge the proposers to show any country in which it is acted on. Certainly not in those where the scrutiny is most rigorous—as, for example, in Paris. It is almost impossible that examinations can be carried on by tests more effectual for sifting the candidate's qualifications to the very bottom, than at Paris:—but does the Parisian Faculty dispense with the proofs of *how*, *when* and *where* the knowledge was obtained? By no means. These documents are rigidly demanded, and must be produced before the ordeal is commenced. The Parisian examiners are men who have studied their profession, and who know the difference between learning and knowledge. They are well aware that the *mode* of acquiring information is a circumstance of the highest importance—and that the mere capability of answering questions, however *ingeniously* devised, does not constitute the criterion of knowledge. They have wisely, therefore, enforced the production of preliminary proofs, *how*, *when*, and *where* the knowledge was acquired. We shall now descend to a few particulars—appealing, not to the *chamber practitioner*, who issues his Utopian speculations from a

heated imagination, but to those who, from actual observation and experience, are capable of judging on this point.

I. PHARMACY.—No one will accuse us of advocating the present system of indenture, which we believe to be double, if not triple, the duration it ought to be. But we maintain that no man can practise either physic or surgery (much less pharmacy) well, who does not possess some practical knowledge, not merely of the properties, chemical constituents, and doses of medicinal agents, but of the *manipulation and extemporaneous composition* of the same, whether these last be learnt behind the counter of the chemist, in the private surgery of the general practitioner, or in the pharmacy of the hospital or dispensary. Now it is utterly impossible that a court of examiners can ask any pharmaceutical questions that may not be answered from what is taught in lectures on *materia medica*, or what is printed in the Dispensatories—unless, indeed, they keep a shop on one side of the Hall, and compel the candidates to boil decoctions, filter tinctures, roll pills, and compound mixtures. The certificate or proof of “actual service,” in this department of the medical state, cannot, therefore, be dispensed with, unless we admit that pharmacy, learnt in books or lectures, is as good as that learnt by the actual practice of the same.

II. ANATOMY.—Of all the branches of medical or surgical science, anatomy is that which might be best ascertained by an examination. But we are convinced that, even here, the new or Utopian plan would break down. The whole of descriptive

anatomy—the whole science of pathology, may be more *peritly* learnt from books, or even grinders,* than by actual dissection. All *viva voce* questions, then, might be answered by means of the very worst species of study—*cramming*. But, says the reformer, we shall have skeletons, vascular and neurological subjects—dried muscular extremities on the table—and, by these, we shall find out the candidate’s anatomical knowledge. Vain expectation! On all *these subjects*, the grinder can descant, and the student can get crammed. “Then (says the projector of the new scheme) we shall have *brains* (if such can be found) in every court of examiners, and each candidate shall demonstrate the various parts of the encephalon.” Who shall find subjects—who shall find time for this species of manual anatomy? The thing is impracticable—and, if practicable, it ought not to supersede the proofs of the *quo modo* in which the anatomical knowledge is obtained.

* The trade of a *grinder* is fortunately unknown in this country. It is crowded in Great Britain. His business is to find out the general tenor of the questions put to young gentlemen at medical examinations, and all such as are most likely to be put from the knowledge, character, tastes, habits, or peculiarities of each examiner. For a small fee, candidates are taken in charge a few weeks immediately preceding their examinations, and so thoroughly plied with these questions, and saturated with the proper replies, that it requires absolutely very little professional attainment to appear well before the august assembly. It is very evident that knowledge thus cursorily and speedily and easily acquired, must be very soon lost, and hence the force of this part of Dr. Johnson’s argument. Although we have no grinders in this country, yet, if the same system which is proposed in England were adopted here, they would doubtless rise up among us in great profusion.—Ed.

III. SURGERY.—The plan under consideration would tend to abridge the study of surgical diseases, by the toilsome and expensive mode of actual observation in hospitals and dispensaries; while it would encourage the accumulation of technical descriptions from books and “GRINDERS,” in the former of which, the symptoms of surgical diseases, and the steps of surgical operations, are minutely laid down. This species of surgical erudition would make a better figure in the examination, than that which was acquired by ocular observation in hospitals, or by oral instructions from teachers. How much superior the *latter* is, we need not stop to prove.

IV. CLINICAL MEDICINE.—This, the most important of all the medical studies, cannot be conveyed by means of books, or even of *viva voce* lectures—nor can any species of examination ascertain the candidate’s proficiency in it—unless there was a ward of sick patients attached to the examination hall. The only security, then, for clinical study, is the written proof of hospital attendance, which proof the wild radical plan of reform would dispense with. This fact alone, which cannot be questioned, is sufficient to condemn the proposed test of medical and surgical qualifications—a test which, if fully acted on, would do all in its power to depress the regular teacher—patronize the grinder—and imbue the medical student with technical, instead of practical, knowledge!

We have noticed this chimerical proposal, not from an idea that it will ever be entertained by any faculty, between Terra del Fuego and Lapland, but to

show the medical student the grounds of discontent, by which he is excited into hostility against those who are, by law, entrusted with his examination. That there is ample field for beneficial reform in our systems of medical education, in this country, we have often shown; but the wild ravings of a few visionary reformers have driven the period for its investigation to an indefinite distance. This is already too plainly proved. No human power—no play on the human passions, could now aggregate a dozen of *respectable* reformers in the Freemasons’ Tavern—or draw half that number of petitions to Parliament from the united empire! Yet the same state of things now exists as in 1826. We are told, indeed, by the radical press, that peace and perfect unanimity obtain throughout all ranks of the profession; and that they only wait the return of Spring, to burst forth, in a storm of virtuous indignation, against their oppressors! This is a curious kind of tranquillity. The fact is, a few half-cracked agitators have made sensible men shrink from every kind of participation with them; and the agitators, being now left to themselves, they call it “PEACE!” “*Ubi solitudinem faciunt PACEM appellant.*” Under existing circumstances, there is not the remotest chance or hope of medical reform, except what may flow from the spontaneous concessions of the constituted authorities. Half a dozen medical Cobbetts have done more mischief than fifty medical Burdetts can repair! The corporate bodies now smile at their opponents, whose ranks are deserted, in consequence of leaders, with whom Falstaff’s

gang, with Bardolf at their head, would be ashamed to associate! Yet we think it would be wise in these corporate bodies, to seize this favorable opportunity for introducing liberal and enlightened measures, corresponding with the more extended views of modern times. It would be infinitely more graceful, that such measures should flow spontaneously from the constituted authorities, than that they should be exacted by popular clamor. A time may come, when the respectable members of the profession may think fit to form a strong and united phalanx, in favor of medical REFORM, after the ridicule and degradation attached to the word, and even to the measure, by the interference of the present advocates, shall have subsided. The voice of the profession must then be heard; and it must have a great moral force when divested of the "RIBALDRY" with which it is now associated.

II.

CONFESSIONS OF BURKE IN THE GAOL.

Edinburgh, Jan. 3d, 1829.

AN old pensioner, named Donald, lived in the house about Christmas, 1827; he was in bad health, and died a short time before his quarter's pension was due; that he owed Hare 4*l.*; and a day or two after the pensioner's death, Hare proposed that his body should be sold to the doctors, and that the declarant should get a share of the price. Declarant said it was impossible to do it, because the man would be coming in with the coffin immediately; but after the body was put into the coffin, and the lid was nailed

down, Hare started the lid with a chisel, and he and declarant took out the corpse and concealed it in the bed, and put tanner's bark, from behind the house, into the coffin, and covered it with a sheet, and nailed down the lid of the coffin, and the coffin was then carried away for interment. That Hare did not appear to have been concerned in anything of the kind before, and seemed to be at a loss how to get the body disposed of, and he and Hare went in the evening to the yard of the college, and saw a person like a student there, and the declarant asked him if there were any of Dr. Monro's men about, because he did not know there was any way of disposing of a dead body, nor did Hare. The young man asked what they wanted with Dr. Monro, and the declarant told him that he had a subject to dispose of, and the young man referred him to Dr. Knox, No. 10, Surgeon's Square, and they went there, and saw young gentlemen, whom he knows to be Jones, Miller, and Ferguson, and told them that they had a subject to dispose of, but they did not ask how they had obtained it; and they told the declarant and Hare to come back when it was dark, and that they themselves would find a porter to carry it. Declarant and Hare went home, and put the body into a sack, and carried it to Surgeon's Square, and not knowing how to dispose of it, laid it down at the door of the cellar, and went up to the room, where the three young men saw them, and told them to bring up the body to the room, which they did, and they took the body out of the sack, and laid it on the dissecting table; that the shirt was on the body,

but the young men asked no questions as to that, and the declarant and Hare, at their desire, took off the shirt, and got 7*l.* 10*s.* Dr. Knox came in after the shirt was taken off, and looked at the body, and proposed that they should get 7*l.* 10*s.*, and authorized Jones to settle with them; and he asked no questions as to how the body had been obtained. Hare got 4*l.* 5*s.*, and the declarant got 3*l.* 5*s.* Jones, &c., said, they would be glad to see them again when they had any other body to dispose of.

Early last spring, 1828, a woman from Gilmerton came to Hare's house as a nightly lodger, Hare keeping seven beds for lodgers: that she was a stranger, and she and Hare became merry, and drank together, and next morning she was very ill in consequence of what she had ate, and she sent for more drink, and she and Hare drank together; and she became very sick and vomited, and that time she had not risen from the bed, and Hare then said that they would try and smother her, in order to dispose of her body to the doctors. That she was lying on her back in the bed, and quite insensible from drink, and Hare clapped his hand on her mouth and nose, and the declarant laid himself across her body, in order to prevent her making any disturbance, and she never stirred, and they took her out of bed and undressed her, and put her into a chest.

The next was a man named Joseph, a miller, and lying badly in the house. That he got some drink from declarant and Hare, but was not tipsy; he was very ill, lying in bed, and could not speak sometimes, and there was a report on that account that

there was fever in the house, which made Hare and his wife uneasy, in case it should keep away lodgers, and they (declarant and Hare) agreed that they should suffocate him for the same purpose, and the declarant got a small pillow and laid it across Joseph's mouth, and Hare lay across the body to keep down the arms and legs, and he was disposed of in the same manner.

In May, 1828, as he thinks, an old woman came to the house as a lodger, and she was the worse for drink, and she got more drink of her own accord, and she became very drunk, and declarant suffocated her; and Hare was not in the house at the time; and she was disposed of in the same manner.

Soon after an Englishman lodged there for some nights, and he was ill of the jaundice; that he was in bed very unwell, and Hare and declarant got above and held him down, and, by holding him down, suffocated him, and disposed of him in the same manner.

Shortly afterwards, an old woman named Haldane (but he knows nothing farther of her) lodged in the house, and she had got some drink at the time, and got more to intoxicate her, and he and Hare suffocated her, and disposed of her in the same manner.

Soon afterwards, a cinder-woman came to the house as a lodger, as he believes, and she got drink from Hare and the declarant, and became tipsy, and she was half asleep, and he and Hare suffocated her, and disposed of her in the same manner.

About midsummer, 1828, a woman, with her son or grandson, about twelve years of age, and who seemed to be weak in his

mind, came to the house as lodgers; the woman got a dram, and when in bed asleep, he and Hare suffocated her; and the boy was sitting at the fire in the kitchen, and he and Hare took hold of him, and carried him into the room, and suffocated him.

That soon afterwards the declarant brought a woman to the house as a lodger, and after some days she got drunk, and was disposed of in the same manner. That declarant and Hare generally tried if lodgers would drink, and if they would drink they were disposed of in that manner.

The declarant then went for a few days to the house of Helen M'Dougal's father, and when he returned, he learned from Hare that he had disposed of a woman in the declarant's absence, in the same manner, in his own house; but the declarant does not know the woman's name, or any further particulars of the case, or whether any other person was present, or knew of it.

That about this time he went to live in Broggan's house, and a woman named Margaret Haldane, daughter of the woman Haldane before mentioned, and whose sister is married to Clark, a tin-smith in the High Street, came into the house, but the declarant does not remember for what purpose; and she was disposed of in the same manner. That Hare was not present, and neither Broggan nor his son knew the least thing about that, or any other case of the same kind.

That in April, 1828, he fell in with the girl Paterson and her companion, in Constantine Burke's house, and they had breakfast together, and he sent for Hare, and he and Hare disposed of her

in the same manner; and Mr. Ferguson and a tall lad, who seemed to have known the woman by sight, asked where they had got the body; and the declarant said he had purchased it from an old woman at the back of the Canongate. The body was disposed of five or six hours after the girl was killed.

One day in September or October, 1828, a washer-woman had been washing in the house for some time, and he and Hare suffocated her, and disposed of her in the same manner.

Soon afterwards a woman, named M'Dougal, who was a distant relation of Helen M'Dougal's first husband, came to Broggan's house to see M'Dougal; and after she had been coming and going to the house for a few days, she got drunk, and was served in the same way by the declarant and Hare.

That "Daft Jamie" was then disposed of in the manner mentioned in the indictment, except that Hare was concerned in it. That Hare was lying alongside of Jamie in the bed, and Hare suddenly turned on him, and put his hand on his mouth and nose; and Jamie, who had got drink, but was not drunk, made a terrible resistance, and he and Hare fell from the bed together, Hare still keeping hold of Jamie's mouth and nose; and as they lay on the floor together, declarant lay across Jamie, to prevent him from resisting, and they held him in that state till he was dead, and he was disposed of in the same manner; and Hare took a brass snuff-box and a spoon from Jamie's pocket, and kept the box to himself, and never gave it to the declarant, but he gave him the spoon.

And the last was the old woman Docherty, for whose murder he has been convicted. That she was not put to death in the manner deponed to by Hare on the trial. That during the scuffle between him and Hare, in the course of which he was nearly strangled by Hare, Docherty had crept among the straw, and after the scuffle was over, they had some drink, and after that they both went forward to where the woman was lying sleeping, and Hare went forward first, and seized her by the mouth and nose, as on former occasions; and at the same time the declarant lay across her, and she had no opportunity of making any noise; and before she was dead, one or other of them, he does not recollect which, took hold of her by the throat. That while he and Hare were struggling, which was a real scuffle, M'Dougal opened the door of the apartment, and went into the inner passage and knocked at the door, and called out police and murder, but soon came back; and at the same time Hare's wife called out, never to mind, because the declarant and Hare would not hurt one another. That whenever he and Hare rose and went towards the straw where Docherty was lying, M'Dougal and Hare's wife, who, he thinks, were lying in bed at the time, or, perhaps, were at the fire, immediately rose and left the house, but did not make any noise, so far as he heard, and he was surprised at their going out that time, because he did not see how they could have any suspicions of what they (the declarant and Hare) intended doing. That he cannot say whether he and Hare would have killed Docherty or not, if the women

had remained, because they were so determined to kill the woman, the drink being in their head.

III.

RE-VACCINATION IN FRANCE.

It will be recollected that the habit of re-vaccination was recommended by Dr. Robbins in an early number of our Journal. As it was recommended in the hope that if such a practice were general it might prove a preventive of the varioloid, and with a view to draw the attention of medical gentlemen to the suggestion, we think it an object to record every well authenticated case which appears to throw light on so important a subject. To such cases, whether they count in favor of, or against the practice, our pages will be open.

The following case, with the introductory remarks by the Editors of the *Révue Médicale*, was translated from the French, and communicated for this Journal, by Dr. WARREN, of Plymouth, who we shall be happy to number among the frequent contributors to our work.

From the *Revue Medicale* for August, 1828.

Reflections on Re-vaccination.—

THAT cases of smallpox after vaccination do occasionally occur, is a fact now well ascertained. The causes of these attacks, notwithstanding the animated discussions to which the subject has given rise, are not easily determined, and it would therefore seem more useful to ascertain whether such accidents can be prevented by a re-vaccination. Dr. Boffinet has instituted inquiries on this point, which will be read with interest. Without absolutely rejecting any of the opi-

nions hitherto advanced, he regards them all as very doubtful. Has the vaccine virus lost any of its efficacy? Does it, in some subjects, not entirely destroy the susceptibility of again contracting the vaccine, and consequently, the smallpox? Or is its prophylactic power limited to a certain period? These are important questions, which diversified experience will alone enable us satisfactorily to answer. We proceed to cite the facts stated by M. Boffinet.

"My wife, aged 28, was vaccinated in 1801, twenty-seven years since. Four cicatrices, now remaining on the upper part of both arms, and which, in the opinion of competent judges, are such as result from the vaccine vesicle, sufficiently prove the regular progress of the disease. She was among the first in this country who enjoyed the benefit of this preventive, and everything conduced to an attentive observation of the progress of a discovery which promised such advantages, and was then the subject of so much contradiction. This strict observation, I have learnt, left no doubt as to the nature of the vesicles in her case. May 6, 1828, after having vaccinated a number of children, I made, with a lancet, two insertions of the vaccine matter on the anterior part of her left forearm. In selecting this place, I did not calculate on the success of the experiment. The child from which I took the virus, and to which I had communicated it a week previous, was nine months old, robust, healthy, and presenting on each arm two fine vesicles, hollowed in the centre, encircled with a bright red areola, and full of a perfectly transpa-

rent liquid, which flowed in drops at the punctures made to collect it. I was certain that the progress of the vesicle in this child had been regular, the eruption commencing about the end of the third day.

"May 10.—The two punctures made in the forearm, which had hitherto scarcely excited any attention, now presented a small red pimple, and a slight hardness was distinctly perceptible to the touch.

"11.—This pimple had increased, become circular, and depressed in the centre,—the red circle enlarged,—slight itching.

"12 and 13.—The areola more distinct and brighter; the lenticular vesicle become more elevated, and central depression greater.

"14.—A red point in the centre of the vesicle, surrounded by a whitish, limpid fluid; the areola somewhat enlarged.

"15.—The vesicles are well filled, the areola more extended, and the subjacent cellular tissue inflamed; the fluid still clear.

"Having, from the progress of the disease, not the least doubt of its nature, I this day showed it to several persons, and particularly to three physicians, who have long practised vaccination in this city. They all recognized at once the developement of the vaccine vesicle. The crusts became greyish, fell off on the 30th day, and left two indented (*faveolées*) cicatrices, in every respect similar to those on the upper part of the arm.

"Wishing to give additional force to this conclusive experiment, I vaccinated three children the same day, May 15, with virus taken from my wife.

"1. The result in the first, aged

15 months, from four insertions, was very satisfactory. The vaccine went through its stages regularly, as I ascertained by personal observation.

"2. In the two others, one of 3 months, the other of 3 years, I made two punctures in the left arm with the same virus. Two other punctures were made on the right arm of each, with vaccine from another source. All the four vesicles were developed with equal regularity, and furnished the genuine matter.

"3. On the same day, I placed the same virus on plates of glass, and on the 19th, vaccinated with it two children, one of 8 months, the other of 2. In both, the disease showed itself in its usual form.

"4. The same day, I again re-vaccinated my wife,—two days after, however, there was no trace of the puncture.

"What are we to conclude from these facts?—that my wife was destined to have smallpox twice, or that the four vesicles developed in 1801 had not sufficiently neutralized the virus of smallpox,—or rather, that this was one of those rare cases, in which, according to Hufeland, the vaccine does not completely destroy the susceptibility of contracting smallpox? Whatever theory we may adopt, the experiment is not less valuable, by proving the possibility of the success of a repeated vaccination. Nor can there be a doubt that this second operation, when it succeeds, is of advantage,—to what extent, time and numerous experiments can alone determine.

"No objection, either as respects the disease itself or the person vaccinated, is opposed to

the repetition of this experiment. The pain of a slight puncture and of the eruption of a few vesicles is trifling, compared with the advantages of this new operation,—advantages, which, although still problematical, ought certainly to excite the attention of those who would properly appreciate the benefits of so valuable a discovery as that of vaccination.

"Everything, therefore, invites to a repetition of vaccination in the same individual, even more than once. I am of opinion, also, that it would be proper to subject to it persons who bear the marks of mild smallpox. Encouraged by the success I have obtained, and regardless of the ridicule which has been thrown on these attempts, I propose to extend and vary these experiments, for it is only by the aid of long experience and extended observation that we can arrive at the limits of possible attainment."

CLINICAL REPORTS.

MASSACHUSETTS GENERAL HOSPITAL.

Wound of Hand—Inflammation and Abscess of Vein—Abscesses in Liver.

THIS is a case remarkable for the fatal termination of a slight injury; probably from its being neglected in the first stage. The patient's constitution must have been in a bad state, though in appearance he exhibited no marks of such state.

March 17.—E. C., of M., about two months since cut the index finger of the left hand, near the first joint, though the wound was trifling at the time, and required no particular attention. In a few days the wound inflamed very much and became painful. Various emollient

applications were made, but were not sufficient to arrest the disease. Ulceration took place, and the bones of the second and third phalanges were denuded some distance from the joint.

He at this time had the finger amputated at the second joint. The wound did perfectly well the first week, after which time an abscess formed between the second and third joints, and immediately over the tendons of the digital flexors. The flap at this time had united over the end of the stump. In a day or two after this, two or more abscesses formed in the palm of the hand and over the metacarpal of the fore finger. These abscesses were laid open, and endeavors made to have them fill up by granulation, but to no purpose. They were attended with considerable pain and swelling, as consequents of an inflammation, which extended over most of the hand and up the arm. The abscess over the first phalanx of the finger extended to the bone. Cataplasms were ordered to the hand, and evaporating lotions to the arm.

General health has always been good, and is now so. Patient is a large, stout, and muscular man.

19.—Patient had his hand placed firmly upon a table, the palm looking upwards; a deep incision was then made, beginning about over the junction of the carpal and metacarpal bones, and carried downward through the abscesses to the end of the stump. The end of the bone belonging to the stump was naked, and removed by sawing, just below the third joint. Wound was dressed with lint and simple cerate; bleeding at the time of operation small.

20.—Hand not very painful last night; slept considerable; bandages are stiff from bleeding since operation, and *uncommonly fetid*. Ordered to be removed, and clean ones to be substituted. Appetite tolerable; bowels costive. May have cathartic.

21.—Hand bled very copiously last night, in consequence of keeping it too warm, to prevent taking cold. Hemorrhage was easily arrested by admitting cold air to wound. This morning, feels very well; has good appetite. May have house diet.

24.—Wound looks well, and filling up with healthy granulations; is washed twice a day, and dressed with lint and resinous ointment.

26.—Yesterday had a severe chill, followed by copious perspiration; countenance materially changed within a few days; now morbid; appetite wanting; pulse full; complains of burning and distress in epigastrium; pain in right shoulder. Ordered repeated doses of the solution of antimony, till vomiting be produced, and an alterative pill at night.

27.—Antimony did not produce much vomiting yesterday, but passed off by the bowels; in the evening had a recurrence of the chills, and rigors. This morning, tongue dry, and covered with a thick dark coat; pulse 120; strength somewhat diminished; appetite wanting.

28.—Yesterday, at the time a chill was apprehended, an attempt was made to vomit the patient, but it was not successful. Had a chill; suffered great distress about the epigastric region; took compound calomel pill at night; had no quiet sleep; tongue now as yesterday; teeth covered with sordes; lips dry; countenance sunken; conjunctiva of eye very yellow.

29.—Much yesterday as day before. Symptoms unfavorable; bowels costive. May have the compound infusion of senna, \mathfrak{z} iv., immediately.

30.—Cathartic did not operate. Repeat it to-day, and if no evacuation by evening, give enema.

31.—No operation from medicine, and enemata proved ineffectual. To-day give croton oil, calomel, and aloes. May have cider, or wine and water for drink.

April 1.—Had four dejections,

copious, dark, foetid; not attended with much debility; have afforded some relief to uneasiness felt at epigastrium. May have tonics to-day, unless contraindicated.

2.—Evacuations were frequent yesterday, and last night in other respects as before.

6.—Has been no important change during the few last days. Patient has gradually lost strength; has been inclined to a relax from the bowels; has taken wine, cider, brandy and water, barks, &c. Chills have recurred almost daily, attended with some delirium.

9.—On the 7th and 8th was much as before. To-day, is very low; comatose; aroused with great difficulty; pulse scarcely perceptible at the wrist; eyes half closed; breath short and quick; wound continued to heal rapidly, even after the system was much diseased and much reduced.

10.—Examination of the body by Dr. Warren, fifteen hours after death. *Thorax* presented nothing unnatural, except an old adhesion of the pleuras on the right side. Nothing found unnatural in the heart, except a slight induration of the veins of the semilunar valves.

Abdomen.—Here the liver was found somewhat enlarged, particularly the right lobe. Aspect of the organ changed; color various; in parts unnaturally light; near convex surface of right lobe was found an abscess, an inch or more in diameter, filled with a greenish pus. The organ now raised from its natural situation, on its under and concave surface was found another abscess, nearly as large as the first; a third was found in centre of right lobe, all similar in character; whole organ had lost its natural tenacity, and could be torn in any direction with a very slight degree of force. Gall bladder and its ducts natural.

Stomach found natural. Omentum unusually loaded with fat; in all respects healthy. This organ being turned upwards, the pancreas was

carefully noticed; found enlarged, by one quarter of its natural size; the whole gland much indurated, and lighter colored than usual.

Diseased hand and arm.—The wound on the hand had nearly healed; what remained unhealed a few days before the death of the patient, assumed a bad character, appearing gangrenous. Separate from the wound, there were no marks of disease in the hand or forearm. The cellular substance about the brachial nerve was found unnaturally dense, and adherent to the vessel; the coats of the vessel thickened, and containing purulent matter; between this point and the axillary vein, less marks of disease. In axilla, distinct marks of disease; coats of vein thickened; hard; cellular membrane surrounding it much changed; in the vessel was found pus and blood, amounting to half an ounce; beyond this point, no traces of disease could be discovered; glands not enlarged, nor changed from the proper appearance.

BOSTON, TUESDAY, APRIL 28, 1829.

PARAPLEGIA EPIDEMIC.

IN this age of novel epidemics, our readers will feel no surprise at the combination of words which appears at the head of this article. General paralysis has been of so frequent occurrence in Paris, for the last one or two years, that M. Bally, the Physician to La Pitié, considers it as exhibiting a kind of epidemic character. The distinguishing symptoms of the disease have been "a sense of numbness and tingling in the hands and feet, accompanied by a morbid sensibility in the surface, and an almost total loss of voluntary motion." This disease is attributed by M. Bally to some peculiarity in the atmosphere.

In some instances it has proved fatal, though the generality of those attacked have recovered. The mode of treatment appears to have been regulated by general principles. The single remedy which has proved most decidedly efficacious is Strychnine. This has been exhibited in doses of one-eighth of a grain *per diem*, gradually increased, in some cases, to three grains, and assisted by moxas to the spine.

Our Parisian friends are also favored by a visit from the Dengue, of which disease some notice has already appeared in this Journal. It seems to assume there a decidedly intermittent character, and has been considered by eminent men in the profession as of the neuralgic order, and a malarious origin.

Among ourselves, though exempted from any epidemic, there appears a degree of *periodical* tendency in the complaints of the season. In affections of the chest, attended by cough, the cough has appeared, during the past winter, to come on in severer paroxysms than usual, and to leave the patient more free from a sense of irritation in the intervals. As far as our own observation has gone, this has been very general; and after the recovery has so far advanced as to render professional attendance unnecessary, these paroxysms have continued, abating gradually in length and violence, till subdued at last by the curative power of nature. Antispasmodics have proved, in our hands, wholly insufficient to arrest this morbid *habit*. So, also, with painful affections of the head. Intermittent headaches have been frequent,

and have generally yielded to large doses of quinine or of bark, after active emetics, purgatives, leeches, and the lancet, had been tried to no purpose. We should like to be informed if the diseases throughout the country have partaken more than usual of an intermittent or periodical character, and whether the preparations of bark have been called for more than usual in their treatment.

CLIMATE OF BARBADOES FOR CONSUMPTIVE PERSONS.

INDIVIDUALS who have visited Italy, Madeira, and Barbadoes, for the purpose of recovery from incipient Phthisis, have given the decided preference to the latter resort. The climate of Barbadoes is particularly serene and delightful during the months of December, January, February, March, and April,—the period when consumptive persons in our latitude feel most the want of a mild and balmy atmosphere. The surface of the tropical island is more level than that of Madeira, and the facilities for exercise consequently greater. Dr. Johnson recommends this winter residence for “patients affected with tubercles in the lungs, not yet advanced to the softened state,—and to those who have had hæmoptysis, but who have not actually purulent expectoration.” Before and after the period above mentioned, the climate of this island is not such as to render it a desirable resort for valetudinarians,—hurricanes and heavy rains preceding, and excessive heat coming on after it.

POISONING BY CHEESE.

ALTHOUGH cases of poison from cheese are not uncommon, yet, as far as we have been able to learn, no chemical analysis has yet detected the substance to which such injury is to be attributed. It is hence concluded that the pernicious quality of the cheese must depend on some article eaten by the cow, which, in the process of lactification, has undergone such changes as to elude the tests of the chemist, without destroying its power of deranging the functions of system when received into the stomach.

The only objection which has appeared to invalidate this explanation is, that "we never meet with similar effects produced by drinking milk." This objection is sure to be brought up by the by-standers, when, in attending on a case such as we have alluded to, the physician offers the above explanation to quiet the inquiries of the curious, which come to him with so much earnestness from every direction;—the profession will thank us, therefore, for furnishing a wrinkle so exceedingly desirable on such occasions. Several cases of poisoning by *milk* are related in the French *Journal Général de Médecine*. The milk which proved so deleterious to all who drank it, was of a goat, and it is supposed to have been affected by some sour broth which she had taken,—the broth having been left to sour in a copper vessel.

PRESSURE IN ASCITES.

DR. SPERDUZA, an Italian physician, has successfully applied the principle

of pressure to a case of watery effusion into the cavity of the abdomen. The patient was a female, who had labored under the disease some months. It was originally caused by peritoneal inflammation succeeding accouchment. At the time the pressure was applied, the distention was very great, emaciation general, and the appearance of the patient cachectic. The strength was greatly reduced by a slow fever and protracted nursing; the digestive functions deranged; the urine scanty and turbid; thirst urgent; bowels constipated; and the usual course of diuretics, mercurials, &c., had been resorted to without benefit.

Pressure was applied to the abdomen by means of Monro's bandage; and under its influence, the quantity of urine increased, until at length it amounted to fifteen pints daily. At the expiration of the third week, the abdominal tumor had entirely subsided, and the cure was completed by sulphate of iron, squills, and a generous diet.

This is certainly a remarkably fortunate case. Could we point to twenty such, the practice might be recommended with confidence. As it is, the trial ought, perhaps, to be made in obstinate cases, though we can hardly suppress our fears that the cure of this lady must have been owing to some other influence than that of the bandage.

BLISTERS IN MEASLES.

SEVERAL cases have been related in recent foreign journals, in which the symptoms of measles were rendered lighter by the early use of blisters.

It is said this practice very considerably diminishes that pulmonary irritation, which, in itself and its consequences, is usually the greatest evil attendant on the disease. We can add nothing from personal experience, never having resorted to vesication *before the appearance of the eruption*. The authorities on which it is recommended are entitled to confidence, and we therefore present it to the view of the profession.

CHIRAYITA BARK.

THIS bark appears to be at present quite fashionable in England. It is supposed to be particularly suited to cases of indigestion; as a stomachic and tonic medicine, it is *said to be superior to the Cinchona*. We have not as yet sufficient practical evidence of this superiority to recommend the article in very distinct or strong terms. It is here noticed with a view only of referring to a case of Leucorrhœa, attended with indigestion, in which the extract of the Chirayita was successfully used by Dr. Blundell. He prescribed a drachm of the extract, with five grains of powdered cinnamon, to be taken several times a day.

TENIA.

THE essential oil of wormwood seeds has been used with success in cases of tenia. A case is related in one of the European Journals, in which 10 drops of this oil, in conjunction with 10 grains of calomel, brought away a tape worm, ten feet in length.

Vapor of Iodine for the Cure of Consumption.—A letter from Dr. Berton was lately read before the

Royal Society of Medicine, respecting the employment of the above-named medicinal agent in cases of tubercular consumption. This mode of using iodine appears to the author to have a double advantage—first, in not producing gastric irritation; and being also immediately applied to the diseased part, he produces the vapor by the application of sulphuric acid to the hydriodate of potash. Air loaded with this vapor does not excite the least irritation in the throat. M. Berton cites three cases in which this method was productive of good effects: in two of them the cough and expectoration were diminished, and the appetite improved; in the third, although the plan had not been long adopted, the relief was evident. M. Berton thinks that a greater number of facts are still required to enable us to pronounce an opinion as to the real value of this medicine.

Journal Hebdomadaire.

Inflammation of the Veins of the Uterus after Parturition.—M. Dance, in a memoir just published on Uterine Phlebitis, has related from his own observation, and from the works of Andral and Louis, eleven cases of fatal inflammation of the veins of the uterus, with the appearances which were witnessed on dissection. This most dangerous form of uterine inflammation was observed to commence most frequently a few days after delivery, with rigors, general uneasiness, suppression of the lochia, and pain and sense of weight in the hypogastrium. The size and sensibility of the uterus gradually increased, the expression of the countenance became greatly altered, and prostration of strength, with delirium, and other symptoms of typhoid fever, rapidly succeeded, and destroyed the patients. This disease was observed in several cases to be complicated with extensive disorganization in remote organs of the body. In three cases severe pulmonary symptoms occurred, and on dissection purulent

deposits were found in the substance of the lungs, with pleuritis and effusion into the sac of the pleura.

In another case an inflammatory swelling suddenly formed around one of the joints. The veins of the uterus were in most of these cases found inflamed, and in a state of suppuration, and the substance of the uterus had become preternaturally soft, and of a dark color. In two, the peritoneal surface of the uterus was covered with lymph.—*Archives Générales de Médecine, December, 1828.*

Unusual Length of the Umbilical Chord.—In the obstetrical observations of Dr. Schneider, of Fulda, a case is related, in which, during a very tedious labor, the contractions of the uterus having been almost instantaneously excited by a large dose of secale cornutum, a male child was born, apparently asphyxiated by the pressure of the umbilical chord, which was twisted *six times* round its neck; but having been immediately extricated, the child was restored to life; the umbilical chord was five feet five inches in length.

In another case related by the same author, the umbilical chord went twice round the neck, and once round the trunk, from whence it passed between the thighs to the placenta. Besides this unusual length, it exhibited a *real knot*, which, as appeared from the gelatinous substance of the chord, had existed a long time before birth.

Siebold. Journ. fur Geburtsch.

Fever of Gibraltar.—A letter from M. Louis was lately read at the sitting of the Royal Academy of Medicine in Paris. From this it appears that in his opinion the fever is really the true yellow fever of the Antilles. Ten subjects had been opened by the Commission; in none of them could the slightest trace of organic lesion be discovered; thus

making a most marked difference between this disease and the fatal cases of fever usually met with in France. The epidemic, after having been stationary for a time, or rather, perhaps, diminished, resumed its activity; a dozen or fifteen cases were daily admitted into the hospital, of whom from five to eight died: some perished very quickly, that is, on the third or fourth day of the disease. After this the frequency of the disease gradually diminished, till it entirely subsided.

NOTICES.

BOOKSELLERS, PUBLISHERS and AUTHORS, are informed, that by transmitting to the Editor, free of expense, a copy of such works as they may write or publish on subjects interesting to the medical profession, they will be entitled to a notice of such works in the pages of the Journal.

Dr. GILBERT's case of amputation is acknowledged, and will appear next week.

Dr. WARREN's remarks on his cases of Neuralgia will also appear in the next number.

Dr. JONES, of Georgia, having had the civility to forward us a copy of his *Essay versus Malaria*, it will receive early attention.

DIED,—In this city, April 13th, Hon. David Townsend, M.D. \ae t. 76.

In Salem, on the 31st of March, Edward Augustus Holyoke, M.D. L.L.D., \ae t. 100.

WEEKLY REPORT OF DEATHS IN BOSTON,

Ending April 17, at noon.

Of abscess, 1—apoplexy, 1—brain fever, 1—consumption, 6—convulsions, 1—inflammation in the bowels, 1—old age, 2—pleurisy, 1—worms, 1—unknown, 4. Males, 10—females, 9. Stillborn, 2. Total, 21.

ADVERTISEMENTS.

DENTAL SURGERY.

THIS day received by Benjamin Perkins & Co., No. 135, Washington Street,—A SYSTEM OF DENTAL SURGERY. - In three parts.

1. Dental Surgery as a Science.
2. Operative Dental Surgery.
3. Pharmacy connected with Dental Surgery.

By SAMUEL SHELDON FITCH, M.D., Surgeon Dentist. Denticum curam habeto ut bene digeras et diu vivas; laxatis dentibus laxantur et chylaceos officinæ; hinc mille malorum occasiones.—Baglivi XIII.

March 17.

ep6w

LONDON STATIONARY, &c.

JUST received by COTTONS & BARNARD, 184 Washington Street, Crown and Double Crown Tissue Paper, large thin Bath Letter Paper; Billet Paper, Demy and Royal Bristol Board, do. do. London Board, Newman's Carmine, Music Paper.

A COPY of Bloomfield's Critical Digest of Sacred Annotation on the Gospels, 3 vols. 8vo. "The most learned Commentary in the English language." For sale by COTTONS & BARNARD, 184 Washington Street.

CASEY'S APPARATUS FOR THE CURE OF DISTORTED SPINE.

THE Proprietor of the Dormant Balance for the cure of Distorted Spine, gives notice, that he has established an agency in this city, for the convenience of those who may wish to avail themselves of this invention. Physicians having under their care the subjects of this disease, or patients themselves, may have an opportunity of inspecting the apparatus, and examining the testimonials of its efficacy, at Mr. Charles White's, corner of Winter Street. It is recommended, however, that all patients availing themselves of this invention, should do it by the advice, and under the superintendence, of their own physicians, as it is only by medical opinion that the proper subjects of the machine can be deter-

mined, or the other proper measures to be made use of in conjunction with it, can be pointed out. The Proprietor expressly disclaims the idea that a cure is to be effected, in any case, by mechanical means alone. This machine has received the approbation of many of the most eminent medical men in this city and New-York. Upon application to the agent, references will be given, and written testimonials exhibited.

All letters, post-paid, addressed to J. Lincoln, No. 27, Fayette Street, will be attended to.

Boston, Feb. 6, 1829.

NEW BOOKS FOR CHILDREN.

JUST published by COTTONS & BARNARD, 184 Washington Street.

The Waning Moon, by the author of the Rising Sun; The White Palfrey, by the author of Thomas Mansfield; The Kind and Happy Child, by the author of the White Palfrey, &c.

FRENCH WATER COLORS.

COTTONS & BARNARD, 184 Washington Street, have for sale, the following Water Colors, of an excellent quality, manufactured by P. C. Lambertye, (France,) viz: Bistre, Raw Cassel, Burnt Umber, Raw Umber, Egyptian Brown, Vandyke Brown, Brown Pink, Seppia, Violet Lake, Carmine Lake, Sanders Blue, Prussian Blue, Mineral Blue, Indigo, Yellow Ochre, Yellow Mineral, Gamboge, Yellow Orpiment, Yellow Lake, Naples Yellow, Burnt Italian Earth, Burnt Sienna, Raw Sienna, Italian Earth, Crocus Martial, Green Lake, Sanders Green, Sap Green, Mineral Green, Prussian Green, Vermillion, Saturnine Red, Indian Red, Red Ochre, Red Orpiment, Flake White.

Also—a great variety of Newman's, Ackerman's, Reeves's and Osborne's Colors, in boxes and separate cakes.

SUNDAY SCHOOL CONVERSATIONS.

COTTONS & BARNARD, 184 Washington Street, have just published, Sunday School Conversations on some of the interesting subjects recorded in the New Testament. By the author of the Factory Girl, The Badge, James Talbot, &c.

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

THE BOSTON
MEDICAL AND SURGICAL JOURNAL.

VOL. II.]

TUESDAY, MAY 5, 1829.

[No. 12.

I.

Cases of Neuralgia, or painful Affections of Nerves.

Communicated for the Boston Medical and Surgical Journal,

By JOHN C. WARREN, M.D., Professor of Anatomy and Surgery in Harvard University.

REMARKS.

THE cases I have related are intended to serve only as contributions to the history of this curious affection. The term Neuralgia is of recent invention, and has been usually applied to a disease of the nerves of the face and head. It is not to be found in Cullen's Nosology. Dr. Good has introduced it, and makes it the second Genus in the order Cinetica and class Neurotica. He defines Neuralgia, "a contraction and distortion of a particular muscle, or group of muscles, with partial trepidations and acute lancinating pains in the course of the principal nerves,—paroxysms short, recurring at irregular periods." He has only two species,—1, *Faciei*; 2, *Pedis*. "The only species," he remarks, "which has hitherto been fully described, is that which attacks the face." This is the disease known by the name of "*Tic douloureux*." The second species, "*Pedis*," is described from a single case known to the author, of "racking pain in the heel," which he considered as residing "in the tibial branch of the ischiatic nerve, and perhaps the peroneal."

The authority of Dr. Good is worthy of the highest respect. We cannot believe, however, that the most powerful and penetrating mind should be able to view with equal accuracy the vast number of diseases comprehended in Nosology. His definition of Neuralgia appears to be essentially wrong, in making the disease consist of muscular contractions. Such contractions are indeed very often observed in that species which had particularly attracted his attention,—neuralgia of the face. Even in this, it is not found in the early stage of the complaint. In neuralgia of the extremities and trunk, muscular contraction is often wanting. If we notice the cases related above, it will appear to have existed in a very small portion of them; and only in those of the most severe kind,—as in the case attended by Dr. Gorham, and that by Dr. Pierson,—while in the greater number, however severe, there were no distinct muscular contractions. If these remarks are well founded, neuralgia should not have been placed in the order Cinetica, that is, of diseases affecting the muscles, but rather in the order *Æsthetica*, diseases affecting the sensations.

The seat of this disorder is the nervous substance, situated in the interior of the nervous fibrils, called Medulla. This substance is affected to a greater or less extent, proportioned, in some mea-

sure, to the duration of the disease. At first the pain is very limited, so that it should seem, if a small portion of the nerve were removed, the disease would be eradicated. Afterwards, a great part, or the whole, of the distal course of the nerve becomes disordered; but rarely does the affection proceed backwards towards the spinal marrow and head. In some instances, indeed, branches from the same stock fall into the disease,—as in the tic douloureux of the sub-orbital branch of the fifth pair, the pain, after some time, is found to exist in the frontal twig of the orbital branch, and in the dental twig of the sub-maxillary branch. That the disease never extends backwards I would by no means assert. I have seen cases of neuralgia of the face which led to the belief that the complaint had crept into the foramina and canals, through which the nerves issue. Generally, however, the disease is confined to the more superficial parts of the disordered nerves.

What is the nature of the change in the nervous medulla we are unable to say. According to our common notions, we should call it chronic inflammation of the nervous matter. There is, however, no trace of inflammation discoverable in the nerves thus affected. A careful examination of portions of neuralgic nerve which I had excised, has not exhibited any appearance differing from that of other nerves. Nor have we any satisfactory evidence that the medullary substance is susceptible of inflammation. Analogy would rather lead us to place the inflammatory action, if such an action there be in these cases, in the membrane lining the fibrils,—a part so minute, that we can scarcely expect to

support the opinion by observation. On the whole, it appears most probable that the disease consists in some peculiar change of the medulla itself, with the nature of which we are wholly unacquainted.

Records of diseases, published in the manner we have done these, are usually attended with the recommendation of some specific remedy; and some physicians seem to think it scarcely worth while to make known the results of their experience, unless they can be accompanied with the suggestion of an article of the materia medica calculated to cure them. The object of all medical research is, in fact, the cure of diseases; but this should be founded, if possible, on an exact knowledge of their nature. Few are the diseases that are cured specifically; by much the greater number are to be removed only by the application of remedies on established principles, and by sensible and distinct effects. We should not, therefore, hesitate to make known what has occurred in our observation of diseases, because we cannot at once with the disease exhibit the remedy. In regard to neuralgia, it is obvious that none of the articles hitherto suggested are to be considered as specific, or infallible, or of general application.

Remarks on some of the principal Remedies employed in this Affection.

Of the Operation.—The division of the nerve by the knife above the diseased part,—that is, between this part and the brain, or spinal marrow,—is an operation which would naturally present itself. The first trials of it encouraged the hope of its affording certain relief. This hope was soon exti-

guished by the return of the disease in a considerable number of instances. On its being ascertained that nerves were capable of reunion like other parts, and of carrying on their functions afterwards, it appeared proper to remove or excise a portion of nerve, instead of merely dividing it. This mode of operating has been attended with many favorable results in the course of my experience. Some cases of facial neuralgia have been cured, and others temporarily relieved, by it. The mode I have adopted is to lay bare the affected nerve as near as practicable to the place where it issues,—to pass a curved knife under the highest part, and having divided it, to raise half an inch of the nerve and to remove this portion. The wound may then be closed by the adhesive inflammation. In the remarkable case of affection of the nerve of the lower jaw, the instant the nerve was touched, the patient expressed the highest gratification at the discovery of the seat of the complaint. This has happened in other cases, and may be considered, when it appears, as a proof that the operation has been directed to the right point. In this part of the body, the operation would, I suspect, be successful generally, if performed within a few weeks of the origin of the disease. Nearly all the instances within my notice have been of long standing; the diseased habit has, of course, been confirmed, and the success of this mode of treatment has, therefore, been various.

The remarks applied to the head would, perhaps, be equally just in relation to the extremities and the trunk; though in the latter situation it would not always be possible to attain the diseased nerve. The operation on the extremities has

not been often performed, and the results have not generally been satisfactory. The want of success has probably arisen, in many instances, from the cause before named,—the very bad condition the patient has reached before any operation has been performed. Let it be done as soon as all other remedies have failed, and it will, perhaps, be done successfully. In the affection of the sciatic nerve, nothing would justify this mode of treatment,—since it would paralyze the limb,—but the prospect of inevitable death. In the disease of the ulnar nerve, below the elbow, and of the peroneal, below the knee, the excision, performed early, would no doubt often give relief. When the disease is of long standing, neither excision nor the amputation of the limb is to be relied on; for the whole course of the nerve becomes diseased. If the complaint has been brought on by accident, the probability of success is increased. The case of Dr. Pierson affords great encouragement to attempt the relief of the patient in the most severe and protracted cases. The recollection of this case suggests the occurrence of a fact which I have repeatedly noticed after these operations. In a number of instances, the paroxysms have not disappeared at once; they have presented themselves, sometimes, with a violence but little diminished for a time, and have afterwards suddenly disappeared; while in others they have diminished very gradually to their final disappearance. This shows the force of organic habit in maintaining the disease. The same is demonstrated by a fact of a different nature. After the paroxysms have been cured, the exposure to cold, or the occurrence of an injury, has

reproduced them in the same, or in neighboring nerves.

Carbonate of Iron.—This medicine has been of late years represented to be almost a specific for the cure of neuralgia. In most of the cases related in these papers, it was given for a long or short time, and the result has shown that it has no claim to be considered an infallible remedy. The doses in which I employed it in adults were from twenty grains to two drachms, or one hundred and twenty grains, given three times in twenty-four hours. Many persons were unable to bear a small dose without great disturbance in the stomach and intestines, the medicine being either rejected, or causing oppression, pain, and distressing feelings. Such were the effects on many delicate females. Strong and healthy men have borne the highest dose without difficulty; and in one of the cases related, a lady took the full dose for many successive weeks. The curative effect, on the whole, has been less than was expected. Of the great number of patients in which it was employed, the only confirmed one in which its influence was well marked, was the case of the lady just alluded to. In one or two very recent cases, the pain disappeared on the use of a few doses; and I have, at this time, a patient with neuralgia of the frontal nerve,—that is, of the frontal twig of the orbitar, or first branch of the fifth pair,—in whom this medicine, with the aid of leeches, appeared to make a strong impression on the disease for a time. I must remark, however, that while given alone it had no effect, and that even in combination with the abstraction

of blood the effect seems to be undecided. The patient has had recurrences of the paroxysms, with nearly their original force, and I am led to believe that after allowing a reasonable time for the fluctuations common to this complaint, they will return with their full severity, and eventually yield to nothing but the knife. The species of neuralgia in which it has shown some degree of efficacy, are those of the face and those from injury. In the case where much might have been expected from it,—that of the sciatic nerve,—it has not been successful in a single instance that I have discovered. My experience in the use of this medicine leads me to place little confidence on it in this and other complaints; yet, as it is usually harmless, I am willing to give it a trial, on the faith of others, in these protracted diseases, wherever it causes no inconvenience.

Sulphate of Iron.—This valuable and active salt has not been much employed in neuralgic cases. It merits a more extensive use. In a severe case of neuralgia of the uterus, I think the cure to have been effected principally by it. Let it be understood, however, that both leeches and blisters were employed for a part of the period of cure. The sulphate was used most constantly, and for the longest time. In a case of sciatica, where it was employed without any other remedies but rest and a regulated regimen, the patient recovered under its use; but after a considerable interval, relapsed from exposure to fresh exciting causes, and when it was again resorted to, no beneficial effect was perceived. No doubt it is a medicine of great efficacy,

and I can confidently recommend its use wherever iron is required. The best way of giving it is in pills of three grains, three times a day, made up with an equal quantity of Extract of *Juglans cinerea*, or American butternut.

Belladonna, Conium, Hyoscyamus, Stramonium.—While these powerful articles are not to be passed without notice, I can add nothing to what has been already published of them. They have been very freely employed in a considerable number of the cases recorded, yet without any other than their usual effects as narcotics. Capt. E. recovered of a very obstinate sciatic neuralgia under the full use of these articles. He had at the same time very deep and extensive caustics along the course of the peroneal nerve, and to the latter, rather than the former, did I attribute his cure.

Opium.—Wretched indeed would be the sufferers with this disease, had we not opium to relieve them. This is the only medicine that can be trusted to afford a sure, though perhaps transient, mitigation of pain. Some take it without much inconvenience, while others experience all its bad as well as beneficial effects, and in this case we must lessen these effects as well as we can, since its use cannot be relinquished. The dose must accord with the constitution of the patient, and gradually increase with the length of time it is used. In incipient cases, it sometimes crushes the disease.

Cinchona and Sulphate of Quinine.—These articles have not had any effect in diminishing or preventing the paroxysms, so far as I have had experience of them.

Emetics, Purgatives, Regulation of the digestive Organs.—A bad condition of the digestive apparatus, coinciding with a local cause, sometimes brings on neuralgia, and often excites it when it has previously existed. While these derangements thus produce and co-exist with neuralgic affection, they are sometimes seen to alternate with them.—Emetics are frequently required in the treatment of these cases, especially when narcotics are employed. Their effect is almost always beneficial. They interrupt the course of the paroxysms for some time.—Purgatives have the same effect in a degree less remarkable. I have, however, known a patient, laboring under a genuine tic douloureux of the sub-orbital nerve,—the most frequent seat of this species,—who, after suffering three or four weeks with pain, not mitigated by any remedies, was cured by a single full dose of calomel, and remains well at this time, after the lapse of a year.—A regulated regimen is necessary in all cases. If the patient is strong and full-blooded, a very strict system of abstinence will be found beneficial. When the subject is of a weak, scrofulous, irritable habit, so severe a system is productive of nothing but mischief.

General and Local Bloodletting.—The patients who have come under my care have rarely been in a state for bleeding from the arm, and so far as I have employed it, the advantages have not been remarkable. When the patient is strong and not old, abstraction of blood from the arm would seem to be called for in neuralgia of the trunk of the body.

Leeches and cupping are very

valuable remedies in the different species of this disease. Most cases of neuralgia of the face, of the side, and other parts of the trunk, and of the extremities, seem to obtain temporary relief from them. For the affection of the intercostal and sciatic nerves, cupping appears to be best suited; and for the other species, leeches. The use of a great number of leeches at once is not so beneficial in complaints of the nerves as in those of the bloodvessels. The application of six or eight at one time, repeated two or three times in a week, is usually better than if a greater number were applied; for if the patient gets much exhausted by them, the paroxysms are sure to be more violent.

Vesication by Cantharides.—Perhaps of all the remedies for this disease, blistering is the most frequently useful. In very recent attacks, a single blister will sometimes remove the pain without a return. In those of long standing, it often alleviates the patients' sufferings while its irritation lasts. It is better to apply fresh blisters from time to time, than to keep open old ones, as is done in diseased joints. Sometimes it happens that the pain from a blister is greater in this than in other cases, yet in such instances it seems to be more than usually efficacious. When the patient suffers a violent strangury, there is the greater reason to expect relief. I have at this time in treatment, a patient, who, three years since, was cured of a paroxysm in the sciatic nerve by a single blister, and the following year in the same manner. This season she has had a very severe attack of some weeks' duration,

resisting a great variety of remedies; but under the use of a series of blisters, applied successively to the thigh, knee, and outer ankle, producing most violent strangury, she is at length relieved from the pain, and suffers only from extreme weakness.

Moxa, Caustic Potass.—The cases related in these papers may seem to exhibit an unjust neglect of a remedy so powerful as Moxa. This application I have, however, freely employed in cases which I have not here introduced, both of the face and extremities. In a case of affection of the sub-orbital branch it was applied five or six times; and in one of the sciatic nerve much more freely, and in various parts of the limb. In none of the cases in which I used it has it been distinctly beneficial, whether applied so as to excite the skin, or to destroy it and make an eschar. This unfavorable result I attribute not to its inefficiency, but to the fixed nature of the cases in which it was used. In recent ones it would, I think, prove more successful.—Caustic potass, when I have employed it, has been used so as to produce a very large and deep slough. It has been repeatedly beneficial, Capt. E., with a bad sciatica, was cured under its use; and I thought the cure was principally owing to it, as the other remedies produced no distinct effect till after it was used. It was applied at the part recommended by Cuttonio for blistering in sciatica,—below and on the outside of the knee, over the peroneal nerve. The slough was three inches long, one and a half wide, and so deep as to remove everything on the outside of the fascia. This large cavity was filled with peas, which

were sometimes anointed with juniper cerate ; and this mode of dressing was continued till the pain disappeared. Such a mode of applying caustic potass requires caution and experience in the use of this article, otherwise parts may be affected which ought to be intact.*

Hot Fomentations, Affusion of hot Water, or Douche.—Hot fomentations are often to be employed in the neuralgia of the extremities. Their effects depending on the heat and moisture, it is not important what kind of fomentations are used, unless in very severe cases, when it may be justifiable to employ the leaves of powerful narcotics, as stramonium and hyoscyamus. I should not advise their application over an extensive surface, as the degree of absorption which may take place is wholly uncertain.

* I once saw a caustic so applied as to open one of the synovial sacs communicating with the knee joint ; and although the disease was a bad white swelling, that would of itself have required the amputation of the limb, the effect of this caustic was such as to demand an amputation of the limb to save the patient's life, had there been no white swelling. There is no danger in its use when properly directed.

The safest mode of applying it is to cut a hole in a piece of adhesive plaster, of the size of the eschar to be made. Then to rub the end of a stick of the caustic in the hole, until the skin is cauterized through, which may be effected in about twenty minutes. A more speedy and effectual way is to cut a hole in the adhesive plaster, two-thirds of the size of the eschar, to fill this hole with caustic potass in a powdered state, to the thickness of one-eighth of an inch, and cover the plaster with another, and confine it by a bandage. This may be removed in six hours, and dressed with a poultice, or with simple cerate. This plan should be resorted to only when there is a good thickness of cellular membrane under the skin. The caustic of potass and lime is more safe than the other,^b but it is difficult to prepare, and to preserve in a caustic state.

The fomentation of Conium and that of the white poppy are safe ; and I think I have seen advantages from them, and from the use of hops in the same manner. The hot douche has been very useful in many of these cases. The manner of employing it has been this :—A small hose, eight or ten feet long, is connected with a reservoir of hot water, and at the lower end is placed a stop-cock, with a quarter of an inch bore, which is to be directed to the affected limb. The temperature of the water should be about 110 deg. Fahrenheit. Some patients bear it even hotter than this. The sense of heat and cold varies in different individuals with neuralgia. To some, all liquids appear hot ; to others, cold. They have generally borne the affusion of water at a degree of heat not to be supported by a healthy limb. It should be continued as long as the patient can bear it, and this is about ten minutes in most cases, though in some it cannot be supported longer than five at one time. When practicable, it should be administered twice a day. The application is to be followed by gentle frictions of olive oil, continued a few minutes. The douche thus employed is an admirable remedy, and has proved completely curative in some cases, and alleviated the sufferings in many.

General View of the Treatment of this Disease.

The proper treatment will vary in some respects according to the nerve affected. The different cases which have been stated will show what treatment appeared to me most proper in each of the species ; but as I do not expect that those into whose hands these

papers may fall will take the trouble to read all I have written, I shall condense the most important parts of the treatment in a few words.

The first point to be settled is the seat of the disease, or the precise nerve affected. This can usually be done by the sensation of the patient, and a proper knowledge of the course of the nerves. Next, we must investigate the condition of the digestive organs, and administer proper remedies, if required; since it has appeared that the disease sometimes depends on, and is often aggravated by, a derangement in that part of the animal economy. Then, leeches are to be applied as nearly as possible to the affected part, and repeated two or three times a week; or if the patient is of a weak constitution, or in an exhausted state from disease, the best application would be blisters, employed in a series, for two or three weeks, and of as large size as the part affected will admit. When the patient is full of blood, venesection is very proper; but this is rarely the case. The disease not yielding to these remedies, I should put the patient on a course of Carbonate or Sulphate of Iron. The former, if the nerves of the head were the seat of the disease, in the dose of from one to two drachms, three times a day; the latter, if the trunk or extremities were affected, to the amount of three grains, four times in twenty-four hours, at the same time using the hot douche. After a proper use of such remedies for the space of six weeks, I should propose to excise a portion of the disordered nerve, whenever its situation rendered the operation practicable. Should this not be

the fact, then may be employed the other remedies mentioned, especially Conium, Stramonium, and Opium internally, and the cauterly, actual or potential, externally.

The following remarks on the nature and treatment of this complaint, occur to me as of sufficient importance to be presented in a distinct form.

1. Neuralgia is a disease of the nerves. The muscles are disordered in a secondary way only.

2. This affection is not confined to the head. All the principal nerves of the body are liable to be affected with it, but superficial nerves more than others.

3. After being subdued on the first attack, it is apt to return on the application of exciting causes, and to become one of the most intractable of complaints.

4. There is no remedy which can be considered a specific cure for it. There is no one remedy that is often successful. It is to be combated by various agents judiciously adapted to the peculiarities of the case.

5. Of consequence, the Carbonate of Iron is not entitled to the praises which have been bestowed on it; nor is Hemlock, Stramonium, or Belladonna.

6. A surgical operation for excision of the affected nerve is frequently successful in the early part of the disease, and often fails in a protracted case, even when it gives temporary relief.

7. This operation, when successful, is not always followed by immediate disappearance of the paroxysms.

8. The affusion of hot water is a valuable remedy, when the disease is seated in an extremity.

9. The physical and intellec-

tual constitution of the patient is to be studied carefully at first, and kept in view during the whole course of the disease.

10. The patient is never to be abandoned to his sufferings. When the more approved remedies have been tried, the most extraordinary practice is justifiable.*

II.

Partial Amputation of the Hand, across the Metacarpal Bones.

Communicated for the Boston Medical and Surgical Journal,

By DANIEL GILBERT, M.D.

ON the 27th of March, A. F. had the two fore-fingers of the right hand torn off at the knuckle joints in a saw-mill. The skin and muscles over the metacarpal bones were very much lacerated. The consequence was, that the extremities of the bones were left in a projecting state, and it was thought necessary that the hand should be partially amputated. The operation I performed as follows:—

An incision was made on the outer surface of the hand, as far as the ring-finger, and the same on the inner surface; also, an incision at right angles was made on the inner and outer surface of the metacarpal bone next to the fore-finger, and the skin dissected up to make a flap to cover the metacarpal bone of the ring-finger. The skin was also dissected back

on the outer and inner surface of the hand, and the muscles and tendons divided to the bone. A narrow bladed knife was then passed through each of the interosseal spaces,—a retractor with three heads was passed through each of these spaces, and confined by an assistant. With a saw the two bones were cut through. The hemorrhage was slight, and when stopped, the flaps were brought together and secured. The patient has been comfortable since, and the wound is now entirely healed.

Brattleborough, Vt. April 18, 1829.

BOSTON, TUESDAY, MAY 5, 1829.

THE NEW MEDICINES.

Nature, Effects, and Modes of prescribing what are called the New Medicines.

SEVERAL of our subscribers having from time to time expressed a desire that we should insert in the Journal what we know of these remedies, we shall endeavor, in some degree, to comply with their request. A full account of such medicinal agents would occupy room to little purpose, since, their leading characteristics made known, their combination and practical use must be left to the judgment of each individual. As these new medicines are sometimes expensive, we shall add the price of each, as it may be procured in this city; but it should be remembered that the *doses* are so minute, that, although *primâ facie* extravagant articles, they are not, to the consumer, much more costly than the drugs from which they are extracted.

I. *Morphine*.—This is the peculiar

* I knew a patient who was ordered, and actually took, seventy emetics of Sub-sulphate of Mercury and Red Oxide of Mercury, on seventy successive days. This is not mentioned as altogether commendable, but as an instance of *extraordinary* practice; and it is to be added, as more extraordinary than the practice itself, that she did not die of the medicine, but of the disease.

alkali of opium, and is entirely freed from the narcotine, which is the principle in opium and laudanum that is so apt to irritate and disorder the nervous system. Morphine is said to be a direct anodyne, and after its sedative operation is ended, the nervous system remains in an undisturbed and tranquil state. The black drop, and several other preparations of opium, have been said to effect this desirable purpose, but each in its turn has failed. We hope a different fate will attend the substance here treated of.

The *citrate*, the *sulphate*, and the *acetate*, are three salts of morphine which have been used in medicine, but the latter is preferred to either of the others. The syrup of acetate is a favorite remedy among the French. The solution of the acetate is most used in Boston, and indeed *generally* preferred. The *price* of Morphine is thirty-two dollars the ounce. The acetate and sulphate are the same. The solution of acetate, \$2 the ounce.

Modes of prescribing Morphine.

1. *Pure Morphine.*—Dose, from 1-8 to 1-4 of a grain or more.

2. *Syrup of Acetate of Morphine.*

Take of

Perfectly clarified Syrup, 1 lb. troy.

Acetate of morphine, 4 grains.

Make a syrup. Dose, from 2 to 4 teaspoonsful.

3. *Syrup of Sulphate of Morphine.*

Take of

Perfectly clarified Syrup, 1 pound.

Sulphate of Morphine, 4 grains.

Make a syrup. Dose, from 2 to 4 teaspoonsful.

4. *Anodyne Drops.*

Take of

Acetate of Morphine, 16 grains.

Distilled Water, 1 ounce.

Acetic Acid, 3 or 4 drachms.

Alcohol, 1 drachm.

Mix. Dose, from 6 to 24 drops.

5. *Solution of Acetate of Morphine.*

Take of

Acetate of Morphine, 16 grains.

Distilled Water, 6 drachms.

Diluted Acetic Acid, 2 drachms.

Make a Solution. Dose, from 6 to 24 drops.

II. *Narcotine.*—From what we have said of Morphine, our readers can judge of the effect of Narcotine. It promises nothing as a medicine; it is only a chemical curiosity, and sells for the *moderate* price of \$80 an ounce.

III. *Extract of Opium deprived of Narcotine.*—The action of this substance is decidedly narcotic, and entirely like that of Morphine, only weaker. “I have employed it,” says Magendie, “in practice, with advantage, especially on a young Greek physician of the greatest promise, who had not been able to bear well the common aqueous extract of the shops.

“This new preparation of opium, therefore, seems to deserve the attention of physicians.” Dose, from half a grain to two grains.

IV. *Extract of Opium deprived of Morphine.*—Four grains of this are not quite equivalent to a grain of morphine. Usual dose, from two to six grains.

ASPHYXIA IN INFANTS.

The Recovery of Children born apparently still.

THE means of bringing into action the inert organs of an infant which exhibits, at birth, no evidence of life, are so familiar to the profession, that we shall not obtrude on our readers even an enumeration of them. We would, however, suggest the importance of greater perseverance than

is customary in the use of these means. An hour appears very long to a physician engaged in fruitless attempts to blow the spark of life to such a blaze that its processes will go on without his aid; yet he ought not to be discouraged at the expiration of this period, unless some other reasons than the failure of his efforts lead him to believe that further exertions will be useless. Instances have come to our knowledge in which infants have been resuscitated after two hours of asphyxia, and a case of such wonderful encouragement is recorded in the *Lancet*, that, had not the gentleman given his address, we should have regarded his history with incredulity. This case occurred to Mr. HENRY POINTER, Eaton, Eng., and the communication, dated January 9, 1829, is in the following terms:—

Mr. Pointer was sent for to a Mrs. Groves, of Staines, Middlesex, arrived at the full period of utero-gestation, whom he delivered of twins, a boy and a girl; the boy, which was the second child, apparently dead. Having used the means to restore the child, without success, Mr Pointer wrapped it up in a flannel, and laid it on the hearth before the fire. This occurred about eleven o'clock, A. M. The following morning, about the same time, Mr. Pointer called to see the patient; the child was still lying in the situation he left it in, but retained a little warmth. Conceiving, as the child retained some warmth, there must be life, Mr. Pointer desired the nurse to give it some gin; two teaspoonsful were given in its pure state. In a short time after, the child began to show some symptoms of life, and in a quarter of an hour began to cry, to the astonishment of mother and nurse. This boy became afterwards by far the finest child.

SMALLPOX.

The best Method of preserving Vaccine Matter.

WE noticed, a few weeks since, that a case of this hideous malady had appeared in Peterborough, N. H., and that numbers had been exposed to the contagion. Messengers were immediately sent to this city for cowpock matter, and all who had been exposed were vaccinated without delay. The effect of this measure has been, that, with the exception of seven persons, who contracted the disease before its character was known, and too early to reap the benefits of vaccination, no other case has broken out,—the further communication of the disease was effectually prevented by the promptitude with which the invaluable prophylactic was administered.

It is worthy of notice, that many lives were probably preserved by means of the Vaccine Association, from which the virus was procured. But for the existence of this institution, which owes its origin to Dr. BIGELOW, matter could hardly have been obtained in sufficient quantity to extend the security to all who had been exposed. The association is simply this:—Twelve medical gentlemen have associated for the purpose of preserving constantly on hand a full supply of *fresh* matter. Each is charged with the renewal of the matter eight times at least in the month assigned him, at the expiration of which he passes his stock to the next in order. A second society is already formed here on the same basis, and we would strongly urge on the faculty in general the adoption of

this feasible and effectual method of securing virus of undoubted purity, and in sufficient abundance.

There are some objections to public vaccine institutions which will occur to every one. To the plan here spoken of we can imagine none. Even in the country, if six physicians, practising in the same vicinity, or within ten or fifteen miles of each other, should agree to take each two months in the year to vaccinate the families under his charge, and preserve and renew the virus once or twice a week, the same great end would be most surely and easily effected.

The physicians concerned would find in such a measure a very great convenience,—vaccination would be less likely to be overlooked and forgotten, since there would be a definite time for proposing it, and in cases of emergency, like that which led to these remarks, a full supply of genuine and fresh virus would be speedily accessible.

EXCISION OF THE TONSIL.

Extirpation of an Enlarged Tonsil.

By WILLIAM AUCHINCLOSS, M.D.,
Surgeon.

THE subject of this case was 39 years of age; the tonsil occupied the whole of the posterior fauces; it had been eighteen months growing, and the result of the operation confirms the opinion which Dr. A. had formed from others recorded by Dupuytren, Bertrandi, &c., that, in the removal of the tonsil by the knife, hemorrhage is not to be dreaded. The following is his account of the operation:—

“Having previously taken hold of its middle with a pair of double-hooked forceps, by which means it could be pulled a little to the opposite side by my assistant, I introduced the bistoury to its lower part, along my fore-finger, with which I depressed the tongue, and cut from below two-thirds up, on a line with the edge of the anterior pillar of the velum. I then withdrew the knife, and taking hold of the forceps, completed the section from above downwards. Scarcely any bleeding ensued. During that day he was ordered to gargle his throat frequently with a strong solution of alum. On the 10th, the cut surface was freely rubbed over with lunar caustic; and by the seventh day from the operation, the whole had cicatrized. I have seen him three times since. He is perfectly well.

“The part of the tumor removed measured three inches by fully an inch and a half in its lesser diameter. On cutting it open, it presented a variety of structure. It was dense, and firmly organized around its circumference; but towards the centre it was in some parts fibrous, and in others of a spongy appearance, made up of a number of small cysts. In some was contained a fluid somewhat resembling putrid blood, and in others a gelatinous semi-organized matter. A small quantity of fluid, similar to pus in appearance, had escaped during the operation. Its base along the cut surface was soft, and in every other respect seemed free of disease.”

A Case of Enlarged Scrotum, treated with the Unguentum Iodinæ. By MEDICO CHIRURGUS.—G. S., student of medicine, æt. 21, a free liver, contracted in the month of May, 1828, a severe gonorrhœa, from which time until August very little care was taken to prevent its progress. During the latter stage, he suffered much from hæmaturia.

One day in August, the patient having drunk rather freely of wine, exercised himself at the game of skittles, which produced great swelling of the scrotum. Severe pain ensued, so severe, that from this cause, and also the size of the tumor, (equal to a large fist,) he was confined to bed. Dr. Epps having seen the tumor, ordered a dozen leeches to be applied, and rigid abstinence, with rest. The pain having been subdued, Dr. Epps prescribed the ung. iodinæ, which was applied, and reduced the tumor to the size of a hazel nut. The ointment producing great irritation, was at this stage left off. The effect produced was very striking.

London Med. and Surg. Journal.

Nymphomania.—Professor D'Ou-trepoint relates a case of nymphomania in *Siebold's Journal fur Geburtshulfe*, which would seem to show that it is not always safe to advise marriage in affections of this nature: in the instance in question the disease was much aggravated by sexual connexion and by pregnancy,—the patient dying in a state of fatuity at the age of twenty-seven.

M. Ozaman, a physician at Lyons, has published a case of the same complaint, which he cured by applying to the parts a solution of nitrate of silver, in the proportion of four grains to an ounce. A slight eschar was produced, by which the morbid sensibility was diminished, and the application being repeated twice a day, very speedily cured the disease.

Discovery of Arsenic in Sulphur.

—By means of caustic ammoniac 0.00061 parts of arsenic have been discovered in sulphur. To make the experiment, a certain quantity of milk of sulphur—of flowers of sulphur—or of common sulphur, should be subjected to the action of alkali; the liquid should be filtered, and treated with an excess of hydrochloric acid. If a yellow precipitate is produced, it is a sign that the sulphur

contains arsenic. If no precipitate be perceptible, the liquid should be allowed to evaporate till a few drops only remain; a little ammoniac is then to be added, afterwards hydrochloric acid, and lastly hydro-sulphuric acid. The arsenic, be it ever so minute in quantity, will make a yellow precipitate.

The Common Buck-bean, or Marsh Trefoil, as a Substitute for Hops.—Mr. Yosy communicated to the Medico-Botanical Society, that the above-named plant is used in Germany as a substitute for hops, and contains the bitter principle in greater abundance than the common hop. The leaves should be gathered in the spring, and dried in the shade. It is also employed in brewing porter in Sweden, and it is said to have been introduced there by an English sailor, in 1789. For this communication, the Society presented to Mr. Yosy their silver medal.

Danger of artificial Inflation of the Lungs.—The practice of artificial inflation of the lungs, as a means of recovery from drowning, has been objected to before the Académie des Sciences, on the strength of experiments made by M. Leroy d'Etortes, on various animals, especially on sheep, which are stated to prove, that the practice is attended with great danger, and that a strong inflation is capable of producing instant death, although some animals are better able to bear the process than others, a dog, for instance, than a sheep, on account of the stronger texture of the lungs. The experimentalist infers, that the number of persons restored to life from drowning, is less than it would be, but for the use of inflation as a remedy for their recovery.

Epilepsy of fourteen Years' Duration.—A woman, aged fifty-five, was admitted in the month of September at La Charité, who had la-

bored under daily attacks of epilepsy since the year 1814. When brought to the hospital she had two fits daily. During several years she had suffered from occasional attacks of hematemesis and uterine hemorrhage. She was in good condition, her strength and digestion unimpaired, and no disease about the uterus to be detected by examination. Copious bloodletting was tried without benefit. Ten days after admission she was taken with the epidemic prevalent in Paris, and the epilepsy disappeared. The symptoms of the epidemic continued twelve days, after which a new series of phenomena presented themselves—namely, hemorrhages from the different mucous membranes. Copious bleeding occurred from the nose, stomach, bronchiæ, vagina, and rectum; but these organs, except merely the discharge, showed no sign of disease. The epidemic complaint diminished during this time, and then disappeared. After this the hemorrhages ceased; and, lastly, the patient quitted the hospital, cured of the epilepsy, and in good health.—*Journ. Hebdom.*

Preparation of Iodine. By M. SOUBERAN.—The following is the process recommended by M. Souberan, by which he has obtained as much as the eightieth part of iodine from mother liquors, that would yield none by the ordinary process. The mother liquors from the soda works, are to be diluted with four or five times their weight of water, and solution of sulphate of copper added, until precipitation ceases. The deposit will consist of iodide of copper and sulphate of lime, and is to be separated. Large iron filings, or turnings, are then to be put into the liquid and agitated, until all smell of iodine has disappeared, by which process, the remaining portion of iodine will separate as an iodide of copper, mixed with metallic copper and the iron turnings, but easily separated by washing over. These

two precipitates are then to be acted upon separately, in one of the following ways:—1, the iodide is to be mixed with two or three times its weight of peroxide of manganese, and a sufficient quantity of concentrated sulphuric acid, and then distilled, when all the iodine will rise with some aqueous vapor; or 2, the mixture of iodide and oxide of manganese is to be heated in a retort to a high temperature, when pure iodine will come over; the residue is pulverulent, and can easily be extracted without breaking the vessel.

Ann. des Mines, N. S. iii. 102.

Injurious Colors.—The Government of Lombardy has issued a law, which, under penalty of confiscation, forbids the use of any venomous substance, such as arsenic, zinc, lead, and other mineral colors, in the printing or dyeing of fabrics which are intended for clothing, or may come in contact with the human body. Many cutaneous affections, it is said, of which the cause has hitherto been unknown, are occasioned by the absorption of deleterious dyeing substances.

Nouveau Journal de Paris.

Iodine for Chilblains.—The tincture of iodine has been recommended for the cure of chilblains. Two or three applications of it are said to restore the skin to its natural state.

Suppression of Intemperance.—At a meeting of the Windham County Medical Society, held in Brooklyn, Con., April 20th, 1829, the following preamble and resolutions were adopted:—

Whereas the deep and increasing interest manifested upon the subject of Temperance at the present day has rendered it proper that some public expression of opinion should be made by those who are the constituted guardians of health,—and whereas peculiar weight always at-

taches to opinions when promulgated in manifest contrariety to private interest:—

Therefore, *Resolved*, That it is eminently the duty of the Medical Faculty to lend their aid both by precept and example in promoting the cause of Temperance.

Resolved, That in our opinion, ardent spirits are unnecessary in health, and their frequent use creates a predisposition to both acute and chronic diseases.

Portrait of Dr. Gorham.—The Senefelder Lithographic Company are about executing a vignette lithographic portrait of the late Dr. Gorham. It will be copied from a painting now in possession of the family.—Subscription price, *one dollar*.

CHARLES H. STEDMAN, M.D., of this city, has been appointed Surgeon to the United States Marine Hospital at Chelsea, in place of David Townsend, M.D., deceased.

JOHN HOMANS, M.D. has been regularly admitted a member of the Boston Medical Association.

Abernethy.—The following is the last and best that we have heard of the above-named gentleman. We should premise, that the details of it are a little altered, with a view of adapting it to "ears polite"; for, without some process of this kind, it would not have been presentable. A lady went to the Doctor in great distress of mind, and stated to him, that, by a strange accident, she had swallowed a live spider. At first his only reply was, "whew! whew! whew!" a sort of internal whistling sound, intended to be indicative of supreme contempt. But his anxious patient was not so easily repulsed. She became every moment more and more urgent for some means of relief from the dreaded effect of the strange accident she had consulted him about;

when, at last, looking round upon the wall, he put up his hand, and caught a fly. "There, Ma'am," said he, "I've got a remedy for you. Open your mouth; and as soon as I've put this fly into it, shut it close again; and the moment the spider hears the fly buzzing about, up he'll come; and then you can spit them both out together."—*Athenæum*.

TO CORRESPONDENTS.

WE are indebted to some unknown friend for a pamphlet of four and twenty pages, entitled "Both Sides," which is *the beginning* of a smart and too personal controversy between Dr. B. W. Dudley, the Professor of Surgery in the Transylvania University, and Mr. W. P. Nicholson, a former patient of the Professor. The subject in dispute, so far as the profession is interested, is the use of tight bandaging for fractures, as a substitute for splints, and the effect of this practice in the case of Mr. N. Since it is manifestly unjust to present a view of such a controversy before its conclusion, we shall reserve our notice of this pamphlet for a future number.

Dr. TOWNSEND'S Letter, and Dr. J. C. HOWARD'S Case of Mammary Abscess and Amenorrhœa, are acknowledged, and will receive early attention.

The Case of Fracture of the Cranium contains nothing new or important, and cannot therefore receive a place in the Journal.

WEEKLY REPORT OF DEATHS IN BOSTON,

Ending April 24, at noon.

Of apoplexy, 1—convulsions, 1—consumption, 3—drowned, 1—infantile, 1—inflammation in the bowels, 1—liver complaint, 1—old age, 2—suicide, 1—unknown, 4. Males, 10—females, 6. Stillborn, 1. Total, 17.

DIED,—In New-York, Frederick Gore King, M.D., youngest son of the late Rufus King, æt. 28.

ADVERTISEMENTS.

DENTAL SURGERY.

THIS day received by Benjamin Perkins & Co., No. 135, Washington Street,—A SYSTEM OF DENTAL SURGERY. In three parts.

1. Dental Surgery as a Science.
2. Operative Dental Surgery.
3. Pharmacy connected with Dental Surgery.

By SAMUEL SHELDON FITCH, M.D., Surgeon Dentist. Denticum curam habeto ut bene digeras et diu vivas; laxatis dentibus laxantur et chylaceos officinae; hinc mille malorum occasiones.—Baglivi XIII.

March 17.

ep6w

LONDON STATIONARY, &c.

JUST received by COTTONS & BARNARD, 184 Washington Street, Crown and Double Crown Tissue Paper, large thin Bath Letter Paper; Billet Paper, Demy and Royal Bristol Board, do. do. London Board, Newman's Carmine, Music Paper.

A COPY of Bloomfield's Critical Digest of Sacred Annotation on the Gospels, 3 vols. 8vo. "The most learned Commentary in the English language." For sale by COTTONS & BARNARD, 184 Washington Street.

CASEY'S APPARATUS FOR THE CURE OF DISTORTED SPINE.

THE Proprietor of the Dormant Balance for the cure of Distorted Spine, gives notice, that he has established an agency in this city, for the convenience of those who may wish to avail themselves of this invention. Physicians having under their care the subjects of this disease, or patients themselves, may have an opportunity of inspecting the apparatus, and examining the testimonials of its efficacy, at Mr. Charles White's, corner of Wimper Street. It is recommended, however, that all patients availing themselves of this invention, should do it by the advice, and under the superintendence, of their own physicians, as it is only by medical opinion that the proper subjects of the machine can be deter-

mined, or the other proper measures to be made use of in conjunction with it, can be pointed out. The Proprietor expressly disclaims the idea that a cure is to be effected, in any case, by mechanical means alone. This machine has received the approbation of many of the most eminent medical men in this city and New-York. Upon application to the agent, references will be given, and written testimonials exhibited.

All letters, post-paid, addressed to J. Lincoln, No. 27, Fayette Street, will be attended to.

Boston, Feb. 6, 1829.

NEW BOOKS FOR CHILDREN.

JUST published by COTTONS & BARNARD, 184 Washington Street.

The Waning Moon; The White Palfrey, by the author of Thomas Mansfield; The Kind and Happy Child, by the author of the White Palfrey, &c.

FRENCH WATER COLORS.

COTTONS & BARNARD, 184 Washington Street, have for sale, the following Water Colors, of an excellent quality, manufactured by P. C. Lambertye, (France,) viz: Bistre, Raw Cassel, Burnt Umber, Raw Umber, Egyptian Brown, Vandyke Brown, Brown Pink, Seppia, Violet Lake, Carmined Lake, Sanders Blue, Prussian Blue, Mineral Blue, Indigo, Yellow Ochre, Yellow Mineral, Gamboge, Yellow Orpiment, Yellow Lake, Naples Yellow, Burnt Italian Earth, Burnt Sienna, Raw Sienna, Italian Earth, Crocus Martial, Green Lake, Sanders Green, Sap Green, Mineral Green, Prussian Green, Vermillion, Saturnine Red, Indian Red, Red Ochre, Red Orpiment, Flake White.

Also—a great variety of Newman's, Ackerman's, Reeves's and Osborne's Colors, in boxes and separate cakes.

SUNDAY SCHOOL CONVERSATIONS.

COTTONS & BARNARD, 184 Washington Street, have just published, Sunday School Conversations on some of the interesting subjects recorded in the New Testament. By the author of the Factory Girl, The Badge, James Talbot, &c.

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

I.

MADAM BOIVIN.

Observations on the most frequent Causes of Abortion. By MADAM BOIVIN, M.D.

[The following abstract from Madam Boivin's late "Researches" is from the pen of Dr. James Johnson, and executed with his accustomed spirit and judgment. Madam B. is probably the only lady who has ever received a medical degree from a Literary Institution. She is the most distinguished midwife in Paris, holds the office of Chief Superintendant of the MAISON ROYALE DE SANTE in that city, and received the degree of Doctress in Medicine at the University of Marbourg.

Her work on Abortion was published in 1828. About ten years before, she favored the profession with a large octavo treatise on midwifery.]

THE appearance of a work full of dissections and pathological investigations by a LADY, will, no doubt, create some surprise among the *old women* of the profession on this side of the channel! Pathological researches by a lady! Yes! a lady whose anatomical, pathological, and physiological acquirements, as well as her diploma in medicine, need not shrink from comparison with those of a Clarke, a Merriman, a Davis or Davies, a

Granville, a Ley, a Ramsbottom, or any of the MAGNATES OBSTETRICI in this proud metropolis. We wonder that Sir Anthony Carlisle did not bring forward MADAM BOIVIN as a practical proof of the soundness of his arguments—for assuredly this lady might fearlessly enter into single combat with the most doughty champion of man-midwifery here. Armed with her shining and terrific PELVIMETER, "Couronné par la Société Royale," we should like to see Madam B. break a lance or a pair of long forceps with Dr. Davis—or, as the lawyers would say, "join issue" with that celebrated accoucheur, on some of the more intricate problems of mechanical midwifery—as, for example, the "evolution of the fœtus." We are strongly inclined to think that the female M.D. would prove victorious in obstetrical tactics!

Madam Boivin has selected a single (but, as she thinks, a very frequent) cause of abortion, for her investigation, and encumbers not her book with a compilation of what others have written on other causes of this serious accident.

The nature of this cause, or class of causes, will be best understood by placing before our readers an abstract of a few of the cases detailed in the work before us—cases which are interesting, and rendered less equivocal by *post-mortem* examinations.

CASE 1.—Madame Kall, aged 27, was confined with her first child at the age of 21 years, and delivered by aid of the forceps, after a tedious labor of sixty hours. She became affected with peripneumony, which confined her to her bed for three months afterwards. Subsequently she went through two natural and easy labors. In February, 1826, while coming home from a ball, she caught cold, and had a severe catarrh, which did not, however, prevent her from attending to her domestic concerns for some time. A severe pain becoming fixed in the left side of the chest, twenty leeches were applied, and gave relief. Uterine pains now came on, and a fœtus of five months was expelled. She was carried to the MAISON ROYALE DE SANTE, the third day after the abortion, and the fifth day of the peripneumony. In spite of the best medical assistance, she died on the tenth day of the disease.

Dissection.—There was a large purulent depôt in the right lung, the left being completely tuberculated. There was some inflammation in the abdomen. In the pelvis, the broad ligaments, the fallopian tubes, and the ovaries, were intimately matted and agglutinated to the posterior face of the uterus—the adhesions being so strong that they could not be separated without the aid of the scalpel. In the midst of this mass of adhesions there was a plentiful crop of recent tubercles, from the size of a millet-seed to that of a pea.

Remarks.—The aforesaid pathological condition must have obtained prior to the peripneumony, and must have rendered the enlargement of the uterus a matter of great difficulty. Madam B. thinks, and apparently with reason, that

the abortion would have taken place independently of the pulmonary affection. The broad ligaments, in the above condition of disease, and so morbidly adherent to the uterus, could not have stretched, as that organ enlarged in the latter months of uterine gestation—their resistance would excite uterine action—and abortion would be the consequence.*

CASE 2.—M. Delam—, aged 32 years, was brought to the MAISON ROYALE DE SANTE, in consequence of a violent hæmorrhage, by which she was reduced to a state of extreme weakness—the pulse not to be felt—the face deadly pale. When a little revived, she gave the following account of herself:—She had menstruated at 12, but the returns were not regular, and she was always affected with profuse leucorrhœa, and obstinate constipation of the bowels. She had been married five years—had received a syphilitic infection from her husband, and underwent the usual treatment—the leucorrhœa was still more abundant after this complaint, and at 30 she became pregnant, three years after marriage. She was delivered safely at the full term; but aborted in the third month of a second conception, with great loss of blood, which lasted four days, and was the cause of her reception into the MAISON DE SANTE. In addition to the great prostration, the left lower extremity was found to be infiltrated even to the foot—the os tincæ felt larger and harder than natural—and, in endeavoring to raise the uterus on the finger, much resist-

* The cause of those morbid states is attributed by Madam Boivin to neglected bowels, bad air, and extreme irregularity of living.

ance was experienced—indeed, it was found impossible to move that organ. The abdomen was distended, and fluctuation was perceptible. Leeches were applied, and various means used—but a slow fever came on, and she died on the 15th day after her entrance into the MAISON.

Dissection.—Much fluid in the abdomen—liver large—in the mesocolon and sub-peritoneal tissue, tubercles were developed—portions of colon and rectum intimately adherent to the uterus and also to the sacrum—a large purulent depôt in the recto-vaginal fold—fallopian tubes and ovaries agglutinated into a mass and inseparable from the uterus, and when carefully examined, they were found to be disorganized. The substance of the uterus itself was greatly inflamed, and its internal surface sprinkled with black points like petechiæ, whence, no doubt, the prodigious quantity of blood had proceeded. The rectum was taking on a state of disease.

Madam Boivin remarks that there can be no doubt of the swelling and infiltration of the lower extremities being a consequence of the state of disease in the pelvis—a consequence which she has, in numerous instances, seen result from the same. One thing, she observes, is certain—it was impossible for the uterus to expand and become developed under such a state of its annexations,—hence abortion was inevitable.

CASE 3.—Miss L——, aged 24 years, had been subject to obstinate constipation and leucorrhœa, especially during the last two years, while residing in Paris. She was carried to the MAISON DE SANTE, in consequence of a large loss of

blood from the uterus that had succeeded an abortion of three months. The sanguineous discharge had been accompanied by a violent pain in the right loin, hip, and thigh. The pulse was quick, the tongue red. The abdomen gradually enlarged during the next eight days of her residence in the house, but without evident fluctuation. The pain of the lower extremity continued in spite of the anodyne frictions. Vomiting, pains in the abdomen, diarrhœa, and fever, came on. The state of the uterus was examined, and it was found to be completely immoveable, the os tincæ being gorged. This led Madam B. to believe that there was disease going on in the appendices of the uterus. The fever increased, delirium came on, and she died on the 19th day after her entrance into the house, and on the 22d day from the abortion.

Dissection.—There was a good deal of peritoneal inflammation, with adhesions among the intestines, especially the small intestines, which were agglutinated in a mass. The colon and rectum were glued to the posterior face of the uterus—the ovaries and fallopian tubes, on both sides, being reduced to a putrid jelly. A portion of cœcum was completely amalgamated by adhesive inflammation, with the fundus of the uterus, in the substance of which was a small white tumor. The internal surface of the organ was livid and gorged with blood.

Madam B. entertains no doubt that disease had been going on long before the abortion, and was the cause, not the consequence, of this event.

It is not necessary to extract any more cases from the large number which the talented author-

ers has published—some fatal, others not fatal, but with abscesses pointing into the rectum, vagina, and elsewhere, showing the nature of the disease that produced the abortion. These cases are highly important, and should lead accoucheurs to be attentive to the signs which indicate inflammatory action about the uterus. The poisoning of the organ on the finger is an ingenious hint of Madam Boivin, and deserves to be remembered.

We are unable to convey any idea of Madam Boivin's pelvimeter, without the aid of plates. The work contains a great number of cases of extra-uterine and false conceptions, with minute dissections, and keen remarks, that deserve the attention of the accoucheur. In short, if we had a plentiful race of Madam Boivins, we should become converts, at once, to the doctrines of Sir Anthony Carlisle.

II.

Intermittent Character assumed by Diseases not usually of such a Nature.

[A fortnight ago, we remarked on the tendency which some complaints have evinced, during the present and past season, to assume an intermittent form. We have since received from London an account of the debates in the Westminster Medical Society, from which we give the following extract.]

DR. STEWART called the attention of the Society to the tendency evinced by diseases not usually intermittent, to assume that type during the present season. He mentioned, in illustration, the case of a gentleman who had labored under symptoms of catarrh, which,

after resisting the common treatment, yielded to sulphate of quina. He appealed to Dr. Johnson, who had formerly alluded to this subject, and called upon him for further information.

Dr. Johnson then rose and related some cases of headach, which we understood him to say had been almost entirely confined to one spot, which had assumed an intermittent type, and finally yielded to sulphate of quina or to arsenic. The Doctor also stated that he had met with cases of pain about the stomach, and palpitations at the heart, presenting the same tendency to intermit.

Dr. Ley said he had met with a case of violent cough in a pregnant lady distinctly becoming intermittent, and yielding to quina. The remedy being discontinued, the cough returned, and was again cured by the same means.

Dr. A. T. Thomson informed the society that the intermittent character was extremely well marked in rheumatism, some striking illustrations of which he had met with; and after some further observations, he concluded by recommending the preparations of bark as entitled to particular attention.

Mr. Gilbert Burnett next rose, and shortly related a case of mania which had proved intermittent, and yielded to tonics.

Dr. Macleod remarked, that if we went on much longer at this rate, there would not be any disease in the whole range of nosology but would come under the denomination of an intermittent, while he supposed that this would be followed by a corresponding change in our treatment in favor of sulphate of quina. Without denying that catarrh and headach,

and pain of the stomach and palpitations, and cough, and rheumatism, and mania, might occasionally assume an intermittent type; he denied that such was the *general character* of these diseases; and he feared that the younger members, from what they had heard, might be too ready to abandon the usual remedies, and have recourse to tonics where they were calculated to do harm.

III.

Letter to the Editor of the Boston Medical and Surgical Journal.

Boston, April 21, 1829.

SIR,—Dr. Warren's cases of Neuralgia, which have appeared in the Journal, remind me of one which occurred in my family in the latter part of the year 1823. I think Dr. W. visited the lady, and saw the state in which she was left by the disease. The patient, in full health, was seized, while at supper, with a violent pain under the biceps muscle of the right arm, extending down to the fingers. The pains soon became so violent as to produce fainting,—every paroxysm was accompanied with a spasmodic action of the extensor muscles of the hand, bringing the fingers backward. The only relief she could obtain was from immersing the hand in *hot water*, so hot, that to the attendants it was insufferable, but to her just comfortable. The *Carbonate of Iron* was tried without effect, and relief was finally obtained from the Extract of *Cicutia* in increased doses, until delirium was produced; but the fingers were left extended and inflexible for a year after the attack. The joints were finally relieved from this partial anchy-

losis by pouring a *stream of warm water* upon them from a height, followed by *friction with palm oil*.

Eight months from this time, she was again attacked with neuralgia of the left side of the face. In this case, it took the form of a regular intermittent, the pain occurring every morning, during which paroxysm it was necessary to resort to large doses of opium for relief. Bark, to the extent of an ounce, in the intermission, and the Arsenical Solution, were tried for six days, without any diminution of the paroxysm. The Carbonate of Iron, in drachm doses, was then exhibited, and in two days the patient was restored to health. Yours, &c.,

SOLOMON D. TOWNSEND.

In connection with the subject of neuralgia, the following article, from the last number of the *Western Journal of the Medical and Physical Sciences*, will be read with interest.

IV.

Notes of a Case imitative of Neuralgic Affection, occasioned by Mercury.

By Dr. J. BENNET.

IN the spring of 1825, I was consulted by a man who had contracted syphilis, and found him laboring under chancre, bubo, and an eruption on the skin. I put him on a course of mercury, and directed confinement to his room. The mercury soon produced a ptyalism; and from its first affecting the mouth, he complained of unusual pain in the right cheek, which I took but little notice of, supposing it arose from decayed teeth. As the soreness of the mouth increased, the painful affection of the cheek became almost insupporta-

ble. On attempting to speak, the muscles of the right cheek were thrown into violent spasms; indeed, every motion of the face was followed by a paroxysm; the pain, following the course of some of the principal nerves of the face, indicated its affinity to tic douloureux.

To remedy this affection, I had recourse to opium, both internally and externally, using a watery extract or solution, as a wash to the mouth. Although this medicine was not sparingly exhibited, it increased the painful affection of the face to an intolerable degree, and the spasmodic twitchings became almost incessant. On the day following the exhibition of the opium, I directed him to take bark, hourly, in as much wine as would form a convenient vehicle. On visiting him in the evening, I found him free from pain; he informed that he had attempted to take the bark; that it had vomited him, and produced violent pain and spasms in the muscles of the face. For relief, my patient flew to the wine bottle, half a pint of which he drank at a single draught, which tranquillized the spasms and suspended the pain in a few minutes. He subsequently drank the same quantity through the day, resorting to it whenever he felt the pain returning, with immediate relief. His mouth was less sore this evening, and the discharge of saliva had evidently increased.

Wishing again to try the effects of opium, I directed him to discontinue the wine during the night, and to take that medicine in combination with camphor. In the morning, I found him suffering the most excruciating pain, which came on soon after he had taken

the opium, and continued to torment him through the night. The wine was now resumed, and again afforded immediate relief. From this time the patient suffered little or no pain. He kept up a moderate excitement with the wine until his mouth was well, which happened sooner than any case of sore mouth from mercury, which I recollect to have seen. A subsequent salivation in the same patient produced a similar disease of the muscles of the face, and the same remedies produced the same effects as before. I ought to remark that the patient's teeth were sound.

Is mercurial sore mouth more speedily cured by a liberal use of wine, or ardent spirits, than by the ordinary remedies? Does not the free use of wine produce a discharge of saliva in mercurial cases, attended with dryness and ulceration of the mouth, with hemorrhages from the gums? May we not infer from this case, that wine would give relief in certain forms of true tic douloureux?

Newport, Ky., Jan. 18, 1829.

V.

A Case illustrating the Sympathy which exists between the Mammary Glands and the Uterus.

Communicated for the Boston Medical and Surgical Journal,

By JOHN C. HOWARD, M.D.

Feb. 2d, 1829.—MISS N. B. requested my advice for a violent pain in her right breast. She told me it was very constant, and prevented any motion of the arm, which was found to depend upon an enlargement and inflammation of the axillary glands. The pain traversed the arm, and sometimes was violent in the ends of the fin-

gers, the bare touching of which occasioned great anguish. At this time there was very little difference between the size of the healthy and diseased breast,—there was, however, a considerable difference in the consistence, the diseased being of a stony hardness, not yielding in the slightest degree on pressure. I inquired if she had sustained any injury in the part ;—none that she recollected. I thought of *cancer*, (perhaps it was the scirrhus feeling of the breast upon examination, the color, and pain, which induced me to think of cancer,) but the patient was not twenty years of age, and my books had informed me that cancer most commonly occurred in single women at an advanced period of life, or to those who had past child-bearing, and seldom, if ever, occurred in young women. I inquired of her general health,—had she been well. Ascertained that she had never been regular in her catamenia ; she informed me that seven months had elapsed without any occurrence of the discharge, excepting, (as she expressed herself,) when the month came round there was a little headach, which might last a few hours, but she had not the least menstrual discharge.

The first inconvenience in the breast commenced seven months since, and she had frequently dull pains there ; it now had increased in size, and, from tension, was exceedingly painful ; it was not much relieved by anodyne applications, and what were deemed proper depletions ; poultices of flaxseed were applied, with a view to promote suppuration, if possible. These were continued for five days, and renewed twice

each day ; at the end of this time, the breast had increased very much. I observed it pointed an inch below the nipple, and, from its appearance and consistence, determined to open it immediately. Upon opening the *mammary abscess*, (for I believed it to be such,) half a pint of sanious pus followed, which occasioned fainting. Mild poultices were applied, after which the wound was allowed to heal, and the breast returned to its usual size.

What was peculiar in this case, and seemed to me almost anomalous, was the occurrence of the abscess during the absence of the menstrual discharge, and the fact that the pain commenced in the diseased breast at the precise time when the irregularity in the menstrual discharge was first observed, and continued with little remission, finally terminating in suppuration,—for such would have been the case, had it not been promoted by the usual means.

The following question seems to arise. Was this disease of the breast in any way connected with, or dependent upon, the failure of the uterine function? Much more experienced individuals than myself must answer.

In the treatment of this case, there were two indications to follow, viz., to promote the formation of the abscess, and induce the menstrual discharge. How the former was effected is already told,—the latter was accomplished by occasional aloetic purges, hip-baths, and *tincture of cantharides*, as recommended by Dr. Dewees, beginning with fifteen drops, three times a day. As the tincture used here is much milder than that prepared for Dr. Dewees, we may begin with fifteen

drops, instead of ten, and increase one drop each day with safety. If strangury should occur, as it may, omit the cantharides for a day, and give flaxseed tea. I have, in sixteen cases of amenorrhœa, given the tincture of cantharides with effect. Like many other medical agents, it should be used with caution, for strangury and inflammation of the bladder may be the consequence of its imprudent use,—which events, if not dangerous to the patient, would be very troublesome to the practitioner. In this case strangury did not occur. When the patient had arrived at twenty-five drops, she had a pain in her hips and the lower part of her back. This seemed almost immediately to precede the discharge, for she had not this pain more than twelve hours before it occurred.

With the amenorrhœa there was great nervous irritability, amounting to *chorea sancti vili*,

which was most remarkable on the left side of the face and arm. Her speech was for some time considerably affected. Chorea is not, I believe, an uncommon attendant on amenorrhœa of long standing. This, also, disappeared, upon the reëstablishment of the uterus to the healthful performance of its proper function. The young woman is now very well, and has been so since I left her, two months ago. The menstrual discharge has twice occurred,—she is altogether free from nervous irritability,—and has had no chorea, no undue determination of blood to the head, nor vertigo, which once troubled her. I met the woman yesterday, when she told me she had not been so well for six years. Asked if she was suffering from pain in the head; “Oh no,” said she, “I never was better,—I am quite light headed.”

Tremont Street, Boston, April 14.

SKETCHES OF PERIODICAL LITERATURE.

NATURE'S THERAPEUTICS.

On the Methods pursued by Nature in the Cure of Diseases.

A VERY interesting paper on this subject, by Mr. McKenzie, is published in the Glasgow Medical Journal. The question, what is the course pursued by nature in the cure of disease, is regarded by the author of this paper as one of the highest importance. The idea of a *vis medicatrix*, as advanced by Stahl,—that is, of a sentient power in the system, overruling and controlling the physical laws which in general direct its actions,—is justly censured as unphilosophical. Such a theory strikes at

the root of active and efficient practice, by destroying confidence in those powers of nature according to which such practice should be directed, and by inducing the practitioner to waste the time for action, in the vain expectation that some mysterious agent will supply that aid, which ought to be furnished by his own efforts.

In the simplest case of recovery from disease, the transition from the morbid to the healthy state is immediate, and not accompanied by any symptom which can be pointed out as the *means* by which the recovery is effected. Such is the case in re-

stored action of the heart after syncope, in relief obtained from pain, &c., where we perceive only that the disease has departed.

Another description of natural cure in disease is effected by what is called *revolution of the functions*. This takes place after a fit of drunkenness, when the liquor, taken into the stomach and carried into the circulation, is expelled again by the action of the kidneys, the lungs, and the skin. The same mode of cure is thought by the author to occur in fever, and furnishes a correct indication for its treatment.

In the third place, diseases are governed by *revolutions of time*. Periodical occurrences in the system are subjects of daily remark, as occurring in health; and that many diseases are governed by a similar law is equally familiar.

The processes employed by nature in the repair of injuries form a fourth class of restorative means, which may be included under the general name of *natural surgery*. These differ materially from the processes of health, but are so important to the preservation of life under certain circumstances, as to be well deserving of attention. The most important of them are,—1. The closure of divided bloodvessels. 2. Adhesion, or union by the first intention. 3. Granulation, and union by the second intention. 4. Intestinal, progressive, and ulcerative absorption. Hemorrhage from a wounded vessel is arrested, either by its retraction, by coagulum formed within it, or by that of the blood effused into the cellular substance around it. Cohe-

sion is effected by the fibrin of the blood, which glues together those parts which are brought into contact. Granulations are formed of the same fibrin, somewhat more organized, and produce union by gradual approximation and contraction. By interstitial absorption, parts, or the whole of the body, are wasted gradually, when supplies are not furnished from without; by the progressive, extraordinary bodies are brought to the skin for their exit; and by the ulcerative, those parts are removed which are injurious to the system, or which have no longer the power of maintaining their vitality.

A fifth mode by which diseases obtain a natural cure is by the conversion of one into another. Examples of this are also frequent; thus, dropsy is cured by diarrhœa, and headach by epistaxis. These are instances of *sanative conversion*. But in many cases the vicarious disease is equally painful and dangerous with the original malady, and the patient has only the alternative of two equal evils. These are *insanative conversions*. Many curious cases of both are related by the author, who concludes his paper by recommending increased attention to these phænomena, as furnishing the best guide to the practitioner in the choice and application of remedies.

IRITIS.

THE same Journal contains some remarks by Dr. Monteith on Iritis, in which he insists much on the great importance of distinguishing this disease from other affections of the eye, though it does not, in the majority

of cases, appear in its simple form. Those inflammations with which it is most likely to be confounded, are,—1. Ophthalmitis interna. 2. Corneitis. 3. Inflammation of the capsule of the aqueous humor.

This disease presents, according to Dr. M., five distinct varieties, or species as he terms them, viz.—1. Traumatic. 2. Catarrhal—rheumatic. 3. Venereal. 4. Scrofulous. 5. Arthritic.

INTERMITTENT FEVER.

Observations on the Practice of Bleeding in the Cold Stage.

OUR readers will recollect with how much earnestness this practice has been recommended by Mr. Mackintosh. In the last Edinburgh Journal, Dr. Stokes has given the result of his trial of this remedy in twenty-two cases, of which accurate records were kept, and from which he has drawn some highly interesting conclusions. The mode of investigation adopted by him is described in the following terms:—"I treated the patients at first only by bleeding in the cold stage, and the use of saline purgatives when necessary, but soon found that without the use of bark I could not succeed in eradicating the disease, and the practice was also followed by some effects for which I was not prepared. I then determined to try cautiously, in each case, the result of bleeding, and if I found that the patient was not advancing toward recovery, to make use of the bark." The quantity of blood drawn at each time averaged fourteen ounces, and the operation was repeated in but few cases.

On the rigor itself, the various ef-

fects produced were,—checking the rigor altogether; its momentary suspension; checking the rigor after a certain quantity was drawn, and its return in a mild degree when the operation was over; diminution of its intensity, but not of its length; relief of the local symptoms alone; prolongation of the rigor, without diminution of intensity; disappearance of the rigor on the fourth pyrexial day after the operation, but persistence of the symptoms indicative of internal congestion. Of these, the third was by far the most common. The diminution of intensity, but not of length, was the next in frequency. The cutting short of the rigor occurred in four cases. In two, it was prolonged without diminution of intensity. In one, the local symptoms alone were relieved. In three instances, no apparent effect was produced by the operation, either on the intensity or duration of the rigor.

With regard to the effect of the operation on the subsequent stages, the most frequent result was, that no effect whatever was produced on either. In a very few cases, the symptoms were rendered milder, and various results occurred in the remainder, in about equal proportion.

The most favorable effects, however, which result from this practice, were exerted upon the local inflammatory symptoms which accompanied the cold stage. Those especially which were referrible to the lungs were in almost every instance immediately relieved. Even splenic and hepatic enlargements were favorably affected, and in two instances, splenic tumors of long stand-

ing yielded entirely to the use of this remedy.

The benefit derived from this practice, however, was not without its alloy of positive evil. In three cases, it was followed, within three days, by severe gastritis. In one other, inflammation of the tonsil supervened, and in a fifth, pneumonia, which was fatal. In this case, all the symptoms had been exasperated by the bleeding.

Such is a very imperfect sketch of this highly valuable paper, which appears to have been drawn up with the utmost care, and which probably contains the greatest amount of information on this interesting topic, of any communication yet made to the profession.

TANNING IN PHTHISIS.

FROM some facts stated in a late number of the London Medical Gazette, it appears that those engaged in the business of tanning are far more rarely affected with consumption than others; and hence the aroma, or peculiar atmosphere, produced by this process, is proposed as a remedy for phthisical patients. It is stated to be a popular opinion that the smell arising from a tan-yard is conducive to health, and that it is by no means uncommon for persons unfavorably affected by other occupations, to seek employment in these places, and to recover from their complaints on obtaining it. A striking case is related by the author, which occurred in his own practice, and which, in fact, first directed his attention to the subject. In this case, an individual who had applied

to him in an advanced stage of phthisis, and of whose recovery he entertained no hope, was cured by taking up the business of tanning. It is found that those who are exposed to the aroma in its concentrated form, from working among the pits, are more healthy than those who are occupied in other branches of the art; and it is also the case, that those who tan with oak bark enjoy better health than those who tan with other ingredients. With the constituent principles of this *aroma*, the author confesses himself unacquainted; at all events, it seems to be disengaged only during the combination of the tanning principle of the bark with the gelatine of the hides. It is a fact said to be familiar to tanners, that the tanning liquor, or *ooze*, when applied to *external* ulcers, exerts upon them a highly salutary influence. As the best mode of applying this remedial agent in consumption, the author proposes placing in the chamber of the patient a large vessel, containing a quantity of the liquor and bark, recently taken from a tan-pit; or, in order to obtain the aroma in a more concentrated form, that it should be breathed from a tube connected with a cask filled with the same fluid.

Whatever may be the actual value of the above-mentioned plan, it is certainly entitled to a fair trial. Some few years since, a considerable degree of interest was excited among the practitioners of this place, by an individual who professed to have repeatedly cured consumption by causing patients to inhale certain tonic and antiseptic substances in the form

of a fine powder. The practice was eagerly adopted and extensively tried. Besides being considerably used in private cases, the inhaler was introduced into one public hospital, and a full trial of its effect was instituted by the distinguished physician of that institution. Some flattering instances were reported of its good success, but, on the whole, so little was gained by its use, that it was soon abandoned. This ill success

by no means furnishes a conclusive argument against the present plan; since, independently of the facts by which it is recommended, the introduction into the lungs of the vapor, or aroma, arising from the remedial article, seems far more likely to be beneficial than the grosser mode of its direct application in the form of powder. Some experiments are in progress to test the efficacy of this novel mode of treatment.

BOSTON, TUESDAY, MAY 12, 1829.

NEURALGIA.

IN the letter of Dr. Townsend, which will be found in this number, we recognize the history of a case with which we were more or less acquainted from its commencement. There are many points in it which will arrest the attention of the reader;—the first is its great and almost unparalleled severity; the last, its favorable termination. The lady now enjoys sound health, and has experienced no symptoms of her former disease for five years. The efficacy of the douche of warm water, and the frictions with palm oil, in removing the stiffness of the joints, is a fact scarcely less worthy of notice in a practical point of view, than the relief obtained from the neuralgic symptoms.

Dr. Wilson, author of a work on the West India Fever, prescribed the *Oil of turpentine* in three cases of Neuralgia, and all of them were cured—we do not say decidedly *by* it, but during its exhibition. He gave calomel from 2 to 4 grs. with opium from 1 to 2 grs., every night, and

from 1 to 2 drachms of oil of turpentine in the same quantity of honey, the next morning. A more extended trial of this remedy is desirable.

Before dismissing the subject of Neuralgia, we cannot but remark that we are happy to have had it in our power to offer so much to our readers on a topic of such vast importance;—an importance derived from the protracted misery caused by the disease, its extreme obstinacy in a majority of instances, its rapid increase of late years, and the comparative paucity of means in possession of the faculty, for determining what is the best and most efficient course to be pursued in its treatment.

RUPTURE OF THE UTERUS.

THIS appalling catastrophe, which so generally terminates in immediate dissolution, we apprehend seldom if ever occurs in a healthy uterus. It is doubtful whether any organ in the body has power sufficient to rupture its own fibres, when those fibres are in a sound and healthy condition.

Post-mortem examinations of this viscus, after such accidents, have very generally developed some deviation from the natural state of its parietes, (or some part of them,) which has been immediately appreciable by the senses; and which has been usually so great as not only to account readily for the fatal occurrence, but to excite astonishment that labor could have advanced so far. Some portion of the womb has been found in a state of ulceration, or *emollissement*, or, more frequently, so much thinner than the rest of the organ as to render it mechanically impossible it should give even moderate resistance to the pressure of the *foetus* acted on by the healthier fibres. Cases may be on record in which no morbid condition has been discovered; but even here, such a condition might have existed, and yet been of such a nature as to leave no structural trace discernible after death. If then the principle above stated be correct, we have, in the first place, no reason to fear the rupture of a healthy uterus, however severe may be the labor; and secondly, where rupture does occur, we may always say with confidence that the organ was diseased.

Of late years but two cases of ruptured uterus are known to have occurred in this city. In one, no post-mortem examination was made. In the other, the ruptured portion and parts in its vicinity were found exceedingly thin.

Mr. Spark, Surgeon at Newcastle, has communicated an interesting case of this description to the London Medical Gazette. In his account of the examination he says,

“The uterus itself was of the common size, the whole of its fundus, posterior and left lateral portion, being as firm and thick as usual, and free from any traces of disease; all the right side of it, on the contrary, was dark-looking, relaxed, thin as a sixpence in places, and transparent; a fissure, three inches and a half in extent, with ragged and sloughy edges, running perpendicularly through it to the cervix, which appeared to retain its usual texture; above the commencement, and to some extent on each side the fissure, there were several patches of diseased structure,—the whole, doubtless, indicating morbid action of long continuance.”

With a view to the elucidation of this subject, no fatal case should be allowed to pass without examination, when permission can possibly be obtained. We say no *fatal case*, for it does not *always* happen that death is the consequence of such rupture. Although calculated in an eminent degree to paralyse the hopes, and terminate the efforts, of even an experienced practitioner, cases have been recorded in which delivery has yet been effected and the mother restored to health.

At the meeting of a medical society of London, Feb. 24, 1829, such a case was read by Mr. Neville. The labor had advanced without accident till the ear of the child was felt by the hand introduced per *vaginam*. At this stage a sensation was experienced by the woman as of something giving way, and immediately the *foetus* was found to have escaped from the uterus, and discovered under the integuments of the abdomen. The hand of the accoucheur was passed through the vagina and the

rent in the uterus; and the child being seized by the feet, was withdrawn, and thus delivery safely effected. This woman recovered, and afterwards bore a child.

In the Medical Repository, a case was recorded, about two years ago, in which the uterus was ruptured, and the upper part of the full grown foetus escaped into the abdomen. Yet was delivery effected, and the woman recovered. The gentleman who gave that case to the Repository has recently addressed a letter to the Medical Gazette, of which the following is an extract.

"I once met with a very extensive rupture of the uterus, commencing at the os uteri. The case was as follows:—A healthy negress, about 18 years of age, was taken in labor with her first child. When called to her, I found the head within the uterus, with only a trifling dilatation of the os tincæ pressing very forcibly upon the perineum, forming the perineal tumor, and with so much force that I thought the uterus, with its contents, would be expelled through the os externum. I abstracted blood from the arm, and supported the perineal tumor as much as I could; but, in spite of all my exertions, the force of the pains continuing, the uterus was rent upwards, from the os uteri towards the fundus, for at least six inches, and the child, with the placenta, was expelled through the os externum, with only a slight laceration of the perineum.*

What was still more extraordinary in this case, the patient recovered without any untoward symptom, and two years afterwards gave birth to another child, with no more inconvenience than from the common oc-

* The patient being perfectly exposed, I saw the whole of the above as described.—T. H. B.

currences in natural labor. I am,
Sir, Yours, &c,
THOS. H. BROCK, M.D."

Dr. Henschell, of Breslaw, also relates a case in which the uterus was ruptured whilst he was aiding the efforts of nature by the forceps. The child was born alive, but died in a few hours. A prolapsus uteri enabled him to examine the rupture with unusual accuracy, and it was found to be about two inches in length, and of considerable depth, without, however, penetrating through the parietes of the organ. "Emollient injections were thrown into the uterus, and small doses of opium given internally. The ensuing night was very restless; the patient lost much blood, and complained of violent pain over the whole abdomen, which was tense and very tender on pressure." The injections and opium were repeated, and a poultice laid over the abdomen. On the second night all the symptoms were aggravated, and fever and despondency added to the unfavorable aspect of the case. Emollient injections were thrown into the rectum, and leeches applied to the hypogastric region, and the fever and inflammation began to abate; the secretion of milk became abundant, the lochial discharge was profuse, and mixed with purulent matter. Four weeks after delivery the patient was perfectly cured.

THE NEW MEDICINES.

V. *Emetine*.—THIS is the active ingredient in Ipecacuanha. It acts as an emetic and purgative, and is said to produce a subsequent tendency to sleep.

*Modes of prescribing Emetine.*1. *Emetine in Substance.*

Dose, 4 grains, dissolved in any vehicle, and given in divided doses.

2. *Emetic Mixture.*

Take of

Emetine, 4 grains.
 Infusion of Roses, 2 ounces.
 Syrup of Orange, 1-2 ounce.

Mix. Dose, a dessert spoonful every half hour.

3. *Pectoral Lozenges.*

These lozenges may be used instead of the Ipecac. lozenges, in pectoral complaints. They are thus made:—

Take of

Sugar, 4 ounces.
 Emetine, 32 grains.

Form into lozenges of 6 grains each.

4. *Emetic Lozenges.*

Take of

Sugar, 2 ounces.
 Emetine, 32 grains.

Form into lozenges of 18 grains each.
 1 vomits a child, 3 or 4 an adult.

5. *Syrup of Emetine.*

Take of

Simple Syrup, 1 pound.
 Emetine, 16 grains.

This is used as Syrup of Ipecac., and in the same doses.

Emetine is sometimes *refined*, when it goes by the name of *pure emetine*, and may be given in doses just one quarter as great as above stated.

MASS. MEDICAL SOCIETY.

THE members of this Society will not forget that the Annual Meeting is to be held in this city the first Wednesday in June, at 10 o'clock, A. M. In consequence of the death of Dr. Gorham, who was to have delivered the address, no discourse will be given at this meeting—the By-Laws making no provision for such cases. In lieu of an address, the dissertation on the best modes of preventing and curing habits of Intemperance, to which the Society's premium has

been awarded, will be read by the Recording Secretary.

SKETCHES OF PERIODICAL LITERATURE.

UNDER this head we propose to devote three or four pages each week to sketches of such original papers in other journals, foreign and domestic, as have a practical value, or are in any way particularly interesting to the profession in this country. The trouble of making these sketches will be very considerable, but we shall be thereby enabled to concentrate into a small space, that information which would occupy many pages if entire articles were extracted. Some general views may also be given of long and elaborate essays which it would be wholly beyond our limits to reprint.

Number of Patients in the Paris Hospitals—The past winter having been uncommonly severe, the Hospitals of Paris have been crowded. At the Hotel Dieu there have been 1124 patients, and at La Pitié, 700, although there are usually but 900 beds in the former and 500 in the latter. More than half the cases at the Hotel Dieu are *medical*, and there are but seven Physicians, a number, says the *La Clinique*, greatly too small for such a charge.

Surgical Lectures.—In consequence of the severe indisposition of Mr. Abernethy, Mr. Lawrence has been appointed to give the surgical course at St. Bartholomew's Hospital.

WEEKLY REPORT OF DEATHS IN BOSTON,
Ending May 1, at noon.

Of abscess, 1—accidental, 1—apoplexy, 1—consumption, 10—croup, 1—drowned, 2—dropsy, 1—dropsy on the brain, 1—infantile, 3—imprudent use of landanum, 1—old age, 1—sudden, 1. Males, 11—females, 12. Stillborn, 1. Total, 24.

ADVERTISEMENTS.

DENTAL SURGERY.

THIS day received by Benjamin Perkins & Co., No. 135, Washington Street,—A SYSTEM OF DENTAL SURGERY. In three parts.

1. Dental Surgery as a Science.
2. Operative Dental Surgery.
3. Pharmacy connected with Dental Surgery.

By SAMUEL SHELDON FITCH, M.D., Surgeon Dentist. Denticum curam habeto ut bene digeras et diu vivas; laxatis dentibus laxantur et chylaceos officinae; hinc mille malorum occasiones.—Baglivi XIII. March 17.

ep6w

LONDON STATIONARY, &c.

JUST received by COTTONS & BARNARD, 184 Washington Street, Crown and Double Crown Tissue Paper, large thin Bath Letter Paper; Billet Paper, Demy and Royal Bristol Board, do. do. London Board, Newman's Carmine, Music Paper.

A COPY of Bloomfield's Critical Digest of Sacred Annotation on the Gospels, 3 vols. 8vo. "The most learned Commentary in the English language." For sale by COTTONS & BARNARD, 184 Washington Street.

CASEY'S APPARATUS FOR THE CURE OF DISTORTED SPINE.

THE Proprietor of the Dormant Balance for the cure of Distorted Spine, gives notice, that he has established an agency in this city, for the convenience of those who may wish to avail themselves of this invention. Physicians having under their care the subjects of this disease, or patients themselves, may have an opportunity of inspecting the apparatus, and examining the testimonials of its efficacy, at Mr. Charles White's, corner of Winter Street. It is recommended, however, that all patients availing themselves of this invention, should do it by the advice, and under the superintendence, of their own physicians, as it is only by medical opinion that the proper subjects of the machine can be deter-

mined, or the other proper measures to be made use of in conjunction with it, can be pointed out. The Proprietor expressly disclaims the idea that a cure is to be effected, in any case, by mechanical means alone. This machine has received the approbation of many of the most eminent medical men in this city and New-York. Upon application to the agent, references will be given, and written testimonials exhibited.

All letters, post-paid, addressed to J. Lincoln, No. 27, Fayette Street, will be attended to.

Boston, Feb. 6, 1829.

NEW BOOKS FOR CHILDREN.

JUST published by COTTONS & BARNARD, 184 Washington Street.

The Waning Moon, by the author of the Rising Sun; The While Palfrey, by the author of Thomas Mansfield; The Kind and Happy Child, by the author of the White Palfrey, &c.

FRENCH WATER COLORS.

COTTONS & BARNARD, 184 Washington Street, have for sale, the following Water Colors, of an excellent quality, manufactured by P. C. Lambertye, (France,) viz: Bistre, Raw Cassel, Burnt Umber, Raw Umber, Egyptian Brown, Vandyke Brown, Brown Pink, Seppia, Violet Lake, Carmined Lake, Sanders Blue, Prussian Blue, Mineral Blue, Indigo, Yellow Ochre, Yellow Mineral, Gamboge, Yellow Orpiment, Yellow Lake, Naples Yellow, Burnt Italian Earth, Burnt Sienna, Raw Sienna, Italian Earth, Crocus Martial, Green Lake, Sanders Green, Sap Green, Mineral Green, Prussian Green, Vermillion, Saturnine Red, Indian Red, Red Ochre, Red Orpiment, Flake White.

Also—a great variety of Newman's, Ackerman's, Reeves's and Osborne's Colors, in boxes and separate cakes.

SUNDAY SCHOOL CONVERSATIONS.

COTTONS & BARNARD, 184 Washington Street, have just published, Sunday School Conversations on some of the interesting subjects recorded in the New Testament. By the author of the Factory Girl, The Badge, James Talbot, &c.

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

I.

NOSOLOGICAL PLACE OF NEURALGIA.

To the Editor of the Boston Medical and Surgical Journal.

SIR,—Since the publication of my papers on Neuralgia, a friend has informed me that Dr. Good, in the last edition of the Study of Medicine, has actually changed the arrangement of Neuralgia from the order Cinetica to Æsthetica, as I proposed in the last of those papers. He also has spoken of a Neuralgia of the Mamma in the same article, and alluded to the description of Neuralgia of the Uterus, in another author.

Although I have not set up a claim for novelty, I should certainly have alluded to these remarks of Dr. Good, had I known of them; and perhaps it will be thought that I ought to have consulted his excellent work on the practice of medicine, for the purpose of ascertaining whether any change had been made from the Nosology. It really occurred to me to do this; but I found that if I took the time to consult such works as were calculated to throw light on this subject, it would be impossible for me to publish these cases at present. For this reason, I resolved to allow them to be taken for better or for worse. The remarks of Dr. Good are gratifying to me, not only because I had proposed the arrangement which he had ultimately

adopted, but also because they seem to confirm the existence of two species of the affection noticed in these papers,—that of the Mamma and of the Uterus.

Acupuncturation is mentioned by Dr. G. as an application worthy to be tried before resorting to operation, both in recent and confirmed cases. This practice I have fairly employed, without any good effect. The Prussic acid is also spoken of by the same distinguished author as meriting a trial. This I have not used; and powerful as are its effects on the animal economy, I must freely confess, though at some risk, that I have not seen cause to put confidence in its curative virtues.

Your obedient servant,

J. C. WARREN.

II.

WOUND OF THE HEART.

Wound of the Heart, in which the Patient survived the Accident ten days.

VICTOR JANSON, sixteen years of age, on the 8th of September wounded himself accidentally in pulling a knife from one of his companions; but, as he felt no pain, he supposed he had only cut his waistcoat. He laid the knife upon the table, walked out into the court, and remained there ten minutes, without even thinking of the accident. At the end of this time, he

observed his clothes stained with blood; he vomited, and fell to the ground.

He was conveyed to LA CHARITTE. The blood which flowed at this time was florid. When brought to the hospital, his face was pale, his lips colorless, eyelids drooping, respiration short and frequent; pulse small, frequent, and compressible; the shirt and clothes of the patient bathed in blood. Between the fourth and fifth ribs of the left side, near two fingers' breadth from the sternum, was a transverse aperture, from six to seven lines in length. It was remarked that the wound of the integuments did not correspond exactly with that of the muscles or pleura; and this want of parallelism prevented the blood from having a free exit. In order to determine the exact direction in which the instrument had penetrated, and the hemorrhage continuing, the extremity of a covered director was introduced into the wound; and seeing that it tended to run from within outwards, and from above downwards, it was withdrawn, without introducing it within the chest. The lips of the wound were gently approximated by means of adhesive straps, and a compress and bandage, applied moderately tight. The left and back part of the chest emitted a dull sound on percussion; the respiratory murmur was feeble at the upper part, and entirely wanting beneath. On the right the sound was clear, and the respiratory murmur very perceptible. The patient being laid on his back, the sound was sufficiently clear above and in front, but dull beneath and at the side, where the respiratory murmur was lost. These different signs clearly pointed out considerable extravasation of blood into the

chest. The patient continued all this time with his eyes shut, and insensible. He was bled, and sinapisms were applied to the calves of the legs, the feet rolled in warm cloths, and the hands retained some minutes in warm water.

Next morning it was found that he had slept two hours during the night. Some reaction had manifested itself. He was directed by M. Boyer to be bled three times, viz., immediately, at mid-day, and at night. The first produced a momentary relief; the second and third, also, somewhat diminished the oppression.

The symptoms still remaining, on the third day he was again bled, and the venesection once more repeated at night.

On the 11th, (the fourth day,) the patient was in great distress, and the dressings were removed. M. Boyer then directed him to cough; dark blood flowed copiously from the wound. The left side of the thorax was observed to be more prominent than the other, and the intercostal spaces were obliterated: a portion of air entered the chest in lieu of the blood evacuated. The dressings were again applied. In the evening, the oppression continuing, twenty leeches were applied to the anus.

On the 12th and 13th, he continued with gradually increasing oppression of respiration, anxiety, and general distress.

On the 14th, M. Boyer introduced a probe through the wound into the chest; immediately the blood sprung to the height of several feet. He then removed the instrument, and tried to introduce his little finger. This brought on a kind of spasmodic action of the respiratory muscles, and the blood escaped as before. Air entered to

occupy the place of blood; the pulse became extremely feeble, and little or no relief was given to the bleeding. About three o'clock in the morning, he died.

Examination.—An incision was made at the inferior and back part of the thorax, through which about a pound and a half of blood was extracted. The chest was then opened with great precaution. An aperture was found in the pericardium, which was thickened and inflamed throughout its whole extent: it adhered to the heart only at the edges of the wound. It contained pus, particularly at the lower part, where the quantity was considerable: it was thick and greenish. An opening, rather less than that in the pericardium, existed in the left ventricle: this ventricle was removed by two incisions parallel to the septum. A stilette, introduced from without inwards, penetrated into its interior, and pushed out a little clot of blood. The inner aperture was extremely small. A false membrane, which lined the surface of the pericardium and the heart, extended itself across the wound; the heart appeared to be becoming inflamed, being thickened and very hard. There was no blood in the pericardium; no artery that could be seen was wounded.

Journ. Hebdom.

III.

NEEDLE IN THE LARYNX.

Case in which a Needle was introduced into the Larynx.

A MAN had been using a needle for the purpose of scratching his nostril: having let it go, it passed backwards into the fauces, and fell into the windpipe. The needle had a thread attached to it, which was entirely drawn in, and disap-

peared. Violent fits of coughing, and attempts at expectoration, immediately came on: by these, the end of the thread was ejected, and the patient laid hold of this and pulled it. These attempts gave him great pain, but were unavailing. He continued for three days in a state of great anxiety and suffering, during which he made numerous ineffectual attempts to pull out the needle. At length he came to the BEAUJON, at Paris.

The thread was still hanging out of the mouth, and some efforts were again made by the house surgeon to extract the needle by pulling it gently, but in vain. M. Blandin, when he arrived, found that the thread had disappeared during the act of deglutition, nor could he recover it by introducing the fingers into the pharynx, or by any other means. Uncertain whether the needle had really got into the larynx or the gullet, he contented himself with applying thirty leeches to the throat, followed by a poultice, &c. Next day, the patient was much in the same [state, and was bled to sixteen ounces, and had twenty leeches to the neck, &c.

For two days more, there was little to remark; when, during the visit, the patient expelled the end of the thread in a fit of coughing. M. Blandin, having satisfied himself that the needle could not be pulled out, fixed the thread upon the cheek with a little adhesive strap, and resolved to operate next day.

On the following morning, the respiration was more difficult, and the voice more hoarse. M. Blandin, having again tried various means of extracting the needle, proceeded to operate. The patient was placed horizontally on a bed facing the light, and M. Blandin,

standing on the right side of the patient, fixed the larynx with the left hand, and then endeavored to find the crico-thyroidean space, but the swelling rendered this impossible; he therefore made an incision through the skin on the median line, about a third of the length of the throat, and afterwards divided the subjacent parts very cautiously. It was not till he had penetrated to the depth of an inch that he laid bare the crico-thyroid membrane. Some bleeding took place, but the hæmorrhage soon ceased. The nail of the forefinger of the left hand was placed transversely on the membrane, which was then punctured, and cut in the same direction. A grooved and curved director was introduced by the wound, and carried upwards, and the thyroid cartilage divided upon it, throughout its whole length. Respiration was now freely performed through this large opening, but the voice was lost. A polypus forceps was introduced at two different times, and speedily withdrawn, on account of the irritation it excited, but without the needle. Considering it possible that the needle might be expelled in a fit of coughing, the patient was put to bed, the wound being lightly covered with a piece of linen pierced with holes, and spread with cerate.

On the following day, a needle, nineteen lines in length, and as it were bronzed, was found attached to the compress laid over the wound.

The wound healed very slowly. The operation was performed on the 22d of June, and a fistulous opening, with great weakness and hoarseness of voice, remained in September. On the 30th of that

month, it is stated that, by means of caustic applied to the edges of the aperture, it had at length closed, and the voice regained some of its former strength.—*Ib.*

IV.

HIP PRESENTATIONS.

Six successive Hip Presentations in the same Individual.

MADAME Q., large and well made, of good constitution. Her first accouchement was long and difficult: the hips presented, and various manipulations were adopted by her attendant, which caused great pain; but at length the delivery took place spontaneously. She was put to bed a second time, and the labor was much easier, being speedily terminated, although the presentation was the same as before. On the third occasion, as soon as the pains came on, an accoucheur was sent for, who remained with her above ten hours, when the labor gradually ceased, and the delivery did not take place till five weeks after.

The physician who relates the case was sent for to the lady during her fourth pregnancy. He found the os uteri thick and hard, with a little tumor at the left side, about the size of a nut, and which felt like a hæmorrhoid. The pains continued, but without effect, and after some hours entirely ceased. In a month afterwards, she was delivered without difficulty, the hips still presenting. A fifth accouchement was attended with similar circumstances, false labor supervening about the eighth month, and delivery three weeks after.

On the 11th of December last, Madame Q. was seized with la-

bor-pains for the sixth time, but which again subsided till the 8th of January, the hips presenting as in every one of the preceding instances.

These presentations are neither rare nor difficult at the Maternité, in Paris; 360 were met with in 20,000 cases, and of these, only 30 required the interference of art. But the case above detailed is so far remarkable, because, though the woman was well formed, and the pregnancy presented nothing extraordinary, yet the position of the fœtus was always the one above mentioned.

La Clinique.

V.

PECULIARITIES OF FŒTAL LIFE.

Functions of the Intestinal Canal and Liver in the Human Fœtus.

A VERY interesting paper on the above subject was lately read at the Royal Society by Dr. Lee. From the circumstances of the early development of the liver and intestines of the fœtus—of the copious supply of blood which they receive, and of the great space which they occupy in the abdomen—the author was led to the conclusion that they performed some important functions in the fœtal economy. Although no nutritive matter can be furnished by the mouth, yet the contents of different portions of the alimentary canal were found, both in appearance and chemical composition, to have a striking analogy to those of the same parts of the canal in the adult, where the processes of assimilation and absorption are performed. A semi-fluid matter, possessing all the charac-

ters of albumen, is found closely adhering to the inner walls of the small intestine, and is more especially abundant around the papillary projection, through which the common duct of the liver opens into the duodenum, and diminishes in quantity as we trace it towards the termination of the ileum. The great intestines are generally distended with a dark green homogeneous fluid, containing no albumen, and apparently excrementitious. No albumen can be detected in the contents of the stomach; hence the author infers that an absorption of some nutritious substance (which he brings forward several arguments to show must be derived from the liver) takes place from the intestinal canal in the latter months of gestation. He states that in two instances he detected the presence of a substance similar to that which he had found in the duodenum, in the hepatic duct itself. Hence he is led to the conclusion that the function of the liver in the fœtus is not confined to the separation of excrementitious matter from the blood, but that it supplies materials subservient to nutrition. That the substances existing in the intestines of the fœtus are not derived from the mouth, is proved by these being equally found in encephalous children, or where the œsophagus is impervious, as where no such malconformation had existed. A note is subjoined to this paper by Dr. Prout, giving an account of the mode by which he ascertained the chemical character of the substance referred to in his examination. The paper is accompanied by drawings of the intestinal tube in the fœtus.

Philosophical Magazine.

VI.

Description of the Rudiments of a Fœtus, extracted from the Testicle of a Child seven Months old.

By Dr. WENDT, of Breslau.

IN the neighborhood of Glogan, in Silesia, the wife of a laborer was, in December, 1827, delivered of a healthy male child, which, during six months, enjoyed good health; but having after this period been affected with dysuria, was found to have a hard swelling of the left testicle, and congenital phimosis. The latter having been removed by the operation, the testicle rapidly increased in size, so that the scrotum at last hung down to the knees; the tumor had an uneven surface, was very hard, and tender on pressure, and as it continued to grow, was on the 9th of July removed. The ligature came away on the 12th, and the wound was completely healed by the beginning of August.

The extirpated testicle was four inches and a quarter in length, and two and a quarter in diameter; it weighed seven ounces, and its parenchyma was infiltrated with a greasy, ichorous matter, of a yellow color. No trace of the epididymis could be found. The tunica vaginalis being opened, a solid oblong body was exposed, and, on closer inspection, found to be a thigh bone, without its periosteum, one inch and a half in length; in the circumjacent tissue, the rudiments of several other bones were found, which, on a more accurate examination, proved to be the pelvis of a fœtus at the fourth month; the os coccygis was very much curved; the sacrum terminated in a ligamentous mass, which ap-

peared to represent the rudiments of the lumbar vertebræ. The head of the right thigh bone was much compressed, without any trace of the neck, although two prominences, resembling the trochanters, were visible; its lower end terminated in two tuberosities, representing the internal and external condyles. The left os pubis and the ischium were totally wanting; the ileum, which was well formed, had attached to its semicircular line the left thigh bone, which was only three-fourths of an inch in length, and its lower extremity bent backwards; the tibia and fibula were almost entirely cartilaginous, and were separated by a very thick inter-osseous ligament; the foot was represented by a confused cartilaginous mass, without any distinct traces of toes. No other rudiments of any fœtal organs could be found in the testicle, the substance of which was not in a morbid state, except from mechanical pressure. The child from which it had been removed was, five years after the operation, in the enjoyment of excellent health.—*Bulletin des Sc. Méd.*

VII.

OPTICAL PECULIARITY.

Double Pupil in one Eye.

A REMARKABLE case of double pupil was observed by Professor Pacini, of Lucca, in a young man who, in his childhood, had, from an unknown external cause, been affected with chronic inflammation of the left eye, which had left it in the following state:—The external parts of the eye are healthy, the cornea is perfectly transparent, except at its external part, where there is a small pte-

rygium; the pupil is elliptic, the fourth part of a line in height, and one line in breadth, and immovable even in the strongest light. The upper eyelid being raised, another pupil, three lines and a half in its largest, and one line in its smallest, diameter, is discovered at the upper portion of the iris; it is somewhat directed towards the internal angle of the eye, and likewise insensible to light. The parts behind it are perfectly transparent. The young man is long-sighted, and squints, the left eye being constantly turned towards the nose; whenever he looks at an object with both eyes, he sees it simple and distinct; if the healthy eye be closed, and the accessory pupil covered, the object appears confused, but if seen with the superior pupil only, it appears simple and distinct. Whenever he looks with the morbid eye at an object placed before him, he sees its right half only, and that double; in order to see it simple, he is forced to direct the eye towards the external angle, and even then the right half is seen more distinctly and somewhat higher than the other. Objects appear of the same size, whether seen with the morbid or healthy eye; and continued exertion of the former produces a disagreeable sensation in the interior of the globe, so that he is obliged repeatedly to close the eyelids.

Journ. des Progr.

VIII.

Effect of Poisons on Plants.

M. MÀCAIRE PRIEREP has lately made some interesting experiments on the absorption of poisonous substances by plants, and the changes which they subsequently

undergo. The flowers of violet and columbine, (*Viola odorata* and *Aquilegia vulgaris*,) the stalks of which were plunged into a solution of the acetate of lead, became of a green color, a considerable time before their complete death, which did not take place for two or three days. In a solution of the oxymuriate of mercury, these plants died within nearly the same time; but absorption appeared to be much less active, and did not exceed a certain degree; those flowers only, which were very near the surface of the liquid, being changed in color. The solutions of mineral acids were absorbed so rapidly, that the flowers of violet became red even before they had lost their odor, and the course of absorption was distinctly visible by the progressive discoloration of the stalk. In all these experiments, some flowers of the same species were placed in pure water, to serve for comparison. The flowers of *Berberis vulgaris*, if placed in common water, retain for several days the habit of contracting their stamina at night, and the same periodical movement, as well as the power of contracting after any mechanical impulse, is also retained by the leaves of the *Mimosa*, under the same circumstances. If, instead of water, a solution of prussic acid, or of opium, be used, the irritability is by the first destroyed within four hours, and by the second in about double that time, the flexibility of the leaves and flowers remaining unchanged. In a solution of arsenical acid of the arseniate of soda, or oxymuriate of mercury, irritability and flexibility were destroyed within three hours. If

stramonium, *hyoscyamus*, or *mordica elaterium*, were submitted to the action of their own poisonous substances, which was done by placing the detached leaves of these plants in a solution of the extracts, or expressed juices, in distilled water, (five grains to an ounce,) they very soon shrunk, and died within an hour or two, while other leaves, placed in a solution of gum, underwent no alteration whatever. If the roots of the plants in question were moistened with a solution of their extracts, they gradually lost their vigor, and died within a short time. It seems, then, that the juices of the plants in question, which are deleterious to other vegetables, are poisons to the

very plants from which they are extracted. This presents a striking analogy between the animal and vegetable kingdom; for it is well known that venomous serpents are poisoned by their own bite.

According to M. Macaire, the results of the latter experiments are to be explained either, 1st, by the chemical alteration which the vegetable juices undergo when exposed to the atmospheric air, and which consists in the absorption of carbonic acid, and the emission of oxygen; or, 2dly, by supposing that the deleterious principle is, in the plant, contained in peculiar canals, and separated from the sap by a sort of secretion.

Ann. de Chim. et de Phys.

SKETCHES OF PERIODICAL LITERATURE.

POISONOUS VEGETABLES.

Treatment of the Cutaneous Affection produced by these Plants.

DR. DAKIN, of Columbus, N. J., has published, in the May number of the American Journal, some practical remarks on the eruption caused by poisonous vegetables. He has found this affection most speedily cured by abrading the cuticle, so as to open the pimples as early as possible after their appearance, and then touching them with the following ointment:—

R. Cupri Sulph. ʒi.
 Precip. Mer. Rub. ʒi.
 Tereb. Ven. ʒiij.
 Axung. ʒi. M.

One or two applications, with twelve hours intervening, will arrest the inflammation, and the disease abates and disappears in three or four days. In several cases, he has found vene-

section and the neutral salts beneficial. Quere,—would not the cauterization of the pimples with Nitr. Arg. be an equally effectual practice? For several species of Herpes we have adopted this method with uniform success.

ON THE USE OF ERGOT OF RYE IN PARTURITION.

THE sixth paper in the Glasgow Journal is an Essay, which amounts, in fact, to a review of a work, lately published in London, "on difficult cases of Parturition, and the use of Ergot of Rye, by W. Mitchell." The ergot is commended by this author, in the most unqualified manner, in almost all the circumstances in which it is desirable to accelerate parturition. Mr. M. by no means confines the use of ergot to those cases in

which the parts are relaxed and nothing is required but an increase of muscular action in the uterus to expel its contents. In this case, Mr. M. conceives that a common stimulus will effect the object, without the necessity of having recourse to so potent an agent. But it is in the implastic labors, with a narrow pelvis and a rigid os uteri, that Mr. M. thinks ergot likely to prove efficacious. He lays it down as an axiom, that it matters little whether delivery is effected by contraction of the uterus, or simply by dilatation of its mouth; and he believes that the great value of ergot lies not in resuscitating the uterus when its inertia is the only obstacle, but in its application to a narrow pelvis, or in its power of dilating the os uteri.

The practice of Mr. M. appears to have conformed to his principles; and his results are more favorable than, on such principles, could with any reason have been expected. The ergot was given by him in 107 cases. In all of these the mothers recovered, and there were only two in which the death of the child could fairly be ascribed to its use. One appearance, however, was remarked in many of these cases, which might have inspired some degree of distrust as to the safety of the practice. He himself remarks, that "when the umbilical cord was divided, or the placenta expelled, the blood was almost black, and without any apparent circulation." Now, as this is known not to be a necessary effect of the use of ergot, the inference is irresistible that it arose in these cases from undue compression, sufficient

to place the life of the child in extreme danger.

In the case of narrow or deformed pelvis, ergot is recommended by Mr. Mitchell as increasing the power of the uterus, and aiding it in moulding the head into such a shape as to render it capable of passing. In one instance, adduced in illustration of this principle, the child was stillborn, its head elongated to eight and a quarter inches in length, and three inches in circumference. This was a first labor in an individual forty-five years of age.

From the facts which are known with regard to this singular substance, it seems probable that it produces little effect, except when uterine action is already present. Thus, of the attempts which have been made to procure abortion by its means, scarce one is on record in which it has been successful, whereas it is known, in numerous instances, to have failed. Even when given after partial delivery, in order to facilitate the expulsion of the placenta, it has in many instances proved wholly inert, and in others has been followed by hour-glass contraction of the uterus. An indication which it seems far better capable of fulfilling, is that of arresting hemorrhage, both before and after delivery. In those cases in which the labor has been expedited by its use, hemorrhage has rarely followed the expulsion; and it has been employed expressly as a preventive with equal success. Where uterine hemorrhage is actually present, more speedy remedies must be resorted to; but in those cases in which, from past experience, this occurrence is

to be feared, the ergot may be administered with great advantage. It has also been given, in small doses, as a substitute for stimulants after exhausting labors. Immoderate lochial discharge and menorrhagia have both been checked by its use. In the latter disease it may be combined with the acetate of lead; but there are decided proofs of its efficacy without this combination.

Upon the principle already stated in regard to its action on the uterus when quiescent, but little advantage could be expected from its employment in amenorrhœa; nor has its success in this disease been such as to encourage farther trials. If it has any effect on the unimpregnated organ, its nature and extent are yet to be investigated.

AMPUTATION OF THE JAW.

A CASE of amputation of the lower jaw is detailed in the same journal, by A. W. Anderson, M.D. The patient in this case was a female, of feeble constitution, 87 years of age. The disease is thus described:—"A firm, spongy tumor occupied the left side of the inferior maxillary bone, from the symphysis backward to the angle. It pervaded the whole thickness of the bone, projecting below it towards the neck, whilst above, it pressed inwards on the tongue and outwards on the face." After much hesitation, on account of the patient's state of health and other circumstances, it was determined to perform an operation. The portion of bone was included between the second molar tooth on the right side, and a point about an inch above the angle

on the left. With this it was intended to complete the operation; but, on examination, the right side of the jaw was found so much diseased, that it was deemed necessary to disarticulate and remove it entirely; so that the only part of the jaw which was left, was that portion of the ascending plate, with its processes, measuring an inch and a half, which remained above the application of the saw on the left side. The hemorrhage was not excessively great, the wound for the most part closed favorably, and the patient did well for the first twelve days. On the thirteenth, she was found to have complained during the night of pain at the top of the sternum, which, after a short intermission, had recurred. She sunk gradually through this day, and expired early in the evening. On dissection, about eight ounces of sero-purulent effusion were found in the upper part of the right side of the thorax, and on the same side, inferiorly, the surface of the lung adhered firmly to the pleura costalis and diaphragm. The substance of the lung appeared sound on both sides

FATAL ACCIDENT.

Case of extensive Suppuration and Death, succeeding the Prick of a Pin.

THIS case, with remarks by David Cunningham, is given in the same journal.—A woman, while washing clothes, received a prick from a pin in the point of the forefinger. This was followed by sphacelus and sloughing of the affected phalanx; pain and swelling throughout the arm to the axilla; suppuration over the scapula,

and a fatal termination on the thirty-eighth day. On the third day, when the case was first seen, an incision was made in the tense and inflamed integument, which, however, was not followed by any beneficial effect. Mr. Cunninghame questions the propriety of incisions where extensive inflammation has resulted from slight injuries, proving excessive irritability of the system. If the scratch of a pin be capable, in such a constitution, of producing so tremendous a chain of consequences, how can we suppose that the cut of a scalpel will be attended with benefit, or is even to be inflicted with safety? To resort to a remedy so analogous to the disease itself, must increase the hazard in place of diminishing it. This species of treatment, therefore, should be limited to local inflammation, resulting from severe local injury, threatening the destruction of the part itself; and not resorted to for the cure of sympathetic inflammation. Mr. C.'s reasoning on this point is certainly deserving of attention; and wherever severe irritation has followed a clean incision, or a mere puncture of the integuments, the practice in question is very blameable; but the same symptoms arising from a lacerated wound, or even from a puncture, which had reached deep-seated parts, would by no means forbid our resorting to it; and in these cases we apprehend the employment of incisions will often be found both safe and necessary.

IS THE BLOOD A LIVING FLUID?

SOME remarks, chiefly of a speculative kind, on this subject, by Dr. John

Davy, constitute an article in a late number of the *Edinburgh Medical and Surgical Journal*. The question which forms the subject of Dr. Davy's essay does not appear to us to be one of very great importance. It is, in fact, a question only of words. It is acknowledged on all hands that the blood possesses certain properties when within the vessels; which it loses on being drawn from them; and these properties constitute its vitality. Much of the obscurity which attaches to the subject has probably arisen from an unfortunate, though ingenious, expression of Hunter, viz., that the coagulation of the blood is proof of its vitality. Now the truth of this is undeniable; and it is equally true that any phenomenon which indicates transition from life to death, is a proof that life has existed; yet the remark is a perplexing one, and has given rise to an idea, that the proofs of the vitality of the blood are to be sought, rather in the phenomena which it exhibits out of the body, than in those it presents while circulating within it; than which, we maintain nothing can be more erroneous. The last expiring breath of an animal is as complete proof of its animal life as any previous act; yet it would be absurd to make this one act, in connection with the loss of respiration subsequent to it, the sole ground of an argument to prove that life had been present. It is not, however, by any means certain that the blood retains the properties which it had in the body up to the period of coagulation. This change may be delayed, either by adding a certain quantity of salt

to the liquid, or by exposing it to a temperature below 32 deg. ; in the latter case it becomes frozen, and is not coagulated until it has been again thawed. Dr. Davy appears to be of opinion that in these cases the vitality is retained ; and in support of this idea, adduces the fact of animals having been exposed to a freezing mixture till they became quite stiff and hard, and recovering to a transient animation on the application of warmth. The argument, however, is not very conclusive. It seems

most probable that blood, after being drawn from the veins, becomes, within a certain time, unfit for the purpose which it has there answered ; the sensible change produced by coagulation convinces us that it has become so ; but we have no proof, nor does it seem very probable, that the same means by which this change is deferred, are also adequate to retaining it in that state, in which it has served for the nourishment of the body, and the maintenance of life.

BOSTON, TUESDAY, MAY 19, 1829.

THE NEW MEDICINES.

VI.—*Iodine*.—Iodine was discovered in 1813, in the mother waters of soda, as it is obtained from sea-weed. A new mode of its preparation was described page 190.

It was first used in Goitre, and thought to produce more effect on that obstinate disease, than any other medicine. In scrofulous affections, it has obtained some credit, and is used with success, both externally and internally, in promoting the dissipation of hard and indolent tumors. As an alterative, it has appeared, in some cases, to hasten the cure of venereal ulcers, and some cutaneous eruptions, particularly when given in the decoction of sarsaparilla. It has been recommended in a variety of complaints, but its reputation cannot be considered established further than above stated.

There are several preparations of Iodine now in common use. The most common for internal adminis-

tration is the *Tincture*, which should be recently prepared, as it soon deposits crystals of iodine. The *Solution of the Hydriodate of Potass* is preferred by some practitioners.

Externally, the ointment and tincture are entitled, perhaps, to equal credit. The *price* of pure Iodine is \$ 1,25 the ounce, and the *Tincture*, 37½ cents the ounce.

Modes of prescribing Iodine.

1. *Tincture of Iodine.*

Take of
Alcohol, 1 ounce.
Iodine, 48 grains.
Make a tincture. Dose, 10, gradually increased to 20, drops, three times a day, in sugared water.

2. *Solution of Hydriodate of Potass.*

Take of
Hydriodate of Potass, 36 grains.
Distilled Water, 1 ounce.
Make a solution. Dose, the same as of the Tincture.

3. *Ointment of Hydriodate of Potass.*

Take of
Hydriodate of Potass, 1-2 drachm.
Hog's Lard, 1 1-2 ounce.
Make an ointment.

From half a drachm to a drachm to be rubbed on the part affected

morning and evening. When the tincture is used externally, the part should be painted with it every day, or every second day, according to the effect of each application.

LEONTODON TARAXACUM.

The Medicinal Virtues of the common Dandelion.

As a green, or boiled vegetable, the leaves and stalks of the common dandelion are generally esteemed an agreeable and healthy article of diet. Their reputation for the latter quality has probably grown out of their diuretic property; for it is a general opinion among the vulgar, that whatever possesses this virtue is conducive to health,—an opinion, perhaps, in the general, correct, but far from being so universally. In some countries, this plant is used in a variety of ways, and the roots, as well as leaves, are pressed into the service of the table. In France, for example, this root is dried, roasted, and pulverized, and mixed with coffee, in the proportion of one eighth to seven. It thus forms, among the French, a very considerable article of diet, as will be readily conceded by any one who has enjoyed the *délicie*, and is aware of the vast quantities of this healthful beverage, consumed in the land of Coffee-houses and *Café noir*.

As a remedy in disease, its reputation is less extended, though founded on a basis no less entitled to confidence. BOERHAAVE recommended the Taraxacum for the removal of biliary calculi; and PEMBERTON, in his concise, but practical treatise, on the diseases of the abdominal visce-

ra, speaks of it in the following terms of commendation:—"I particularly recommend the use of the Taraxacum, from which I have seen the most decided advantage, both in incipient scirrhus of the liver, and also in several chronic derangements of the stomach."

In several cases of hepatic disease, and dyspepsia, we have used this medicine with decided advantage, after the usual, and several unusual, courses of treatment had been pursued to no purpose. In one recent instance, a lady, who had been two years under treatment by different physicians, and was found in a state of great debility, emaciation, and despondency, was restored to health by the use of this single remedy; and another, which occurs to us at this moment, exhibits its good effects in a still more striking manner. The young lady referred to had been dyspeptic, troubled with a cough, pain by the side, and a variety of other ailments, for about six years. Very few articles of food could be retained by the stomach in the early part of the day. Almost everything she ate oppressed her, and during the whole of the above period, the bowels scarcely acted once without the use of medicine. After many inefficient attempts to correct this state of the system, and being convinced that the torpid action of the bowels was accompanied by a functional debility, or general torpor in the stomach and liver, we prescribed the extract of Taraxacum, in doses of from ten to twenty grains, twice a day. The necessity for laxatives became less and less frequent, the digestive pow-

ers of the stomach were gradually restored, and in about six months, we had the satisfaction of seeing our patient in better health than she had been for as many years, and able to enjoy herself and her friends.

Many cases might be related in which this remedy has been administered without any benefit, but more in which it has given us entire satisfaction. Mr. Pemberton prescribes half a drachm of the extract in ℥ iss. of peppermint water, forenoon and evening,—and gives ℥ ss. of Epsom salts in solution, every second morning. The mode of prescription must, however, be left to the circumstances of each case, and the judgment of each practitioner.

We have found a remarkable difference in the efficacy of this extract procured at different places,—a fact, not so much owing to any especial loss of virtue by the length of time which had elapsed since the article was prepared, as to its original preparation. To be efficacious, the extract should be prepared by the spontaneous evaporation of the expressed juice of the roots, taken up in August and September. Mr. Houlton, who has used the extract a great deal, and with great satisfaction, is of opinion, that a large proportion sold at the shops has very little virtue, and attributes this to the circumstance of its not being prepared in the manner above described.

GASTRO-ENTERITIS OF INFANTS.

THE Physician of the Foundling Hospital, at Paris, has reported several interesting cases of this affection in newly-born infants. By am-

ple observation, he has been enabled to distinguish three grades of the disease. The *first grade* is characterized by the following symptoms,—“tension, and moderate, but diffused heat of the abdomen; intense redness of the anus and vicinity; tongue red at the sides and tip, white at the back and middle part; diarrhœa of greenish matters; constant, and almost tetanic rigidity of the muscles about the back of the neck; countenance expressive of suffering.” This grade of the disorder is usually cured in about ten days, by abstinence, fomentations to the abdomen, and the internal administration of Gum Arabic in Syrup of Marshmallows.

The following case illustrates the *second grade* of this gastric and intestinal inflammation.

“A female child, 11 days old, was brought into the infirmary of the Hospice on the 19th of March, 1827, presenting the following symptoms:—Diarrhœal discharge of yellow and watery matters; tongue red at the edges, and white on the surface; abdomen not apparently tense; heat of the skin natural; little or no crying; pulse accelerated; thorax sounding well on all points. *Rice-water with gum; abstinence.* 20th and 21st.—Continuance of diarrhœa; drink vomited; the abdomen somewhat hotter than other parts of the body. *Fomentations to the abdomen.* Pulse still more accelerated. 22d.—Death, without any convulsions.”

On dissection, the heart, large arteries, and veins, were found gorged with blood. The mucous membrane of the stomach was of one uniform redness throughout, and some degree of enlargement and inflammation existed in the mesenteric glands.

The *third degree* of this complaint

is supposed to exist in those children who die shortly after birth, without any sufficient cause of death being discoverable before the event. In many post-mortem examinations in these cases, the reporter has invariably found the vessels of the gastrointestinal canal extremely injected,—often from the œsophagus to the rectum.—A little reflection on these cases will teach us the importance of abstinence and the diluent plan of treatment in such infantile diseases, and point out the danger of subjecting organs in such a condition to the influence of powerful and irritating medicines.

On the Treatment of Colica Pictonum by Alum.—It appears that M. Kapeler has treated colica pictonum with alum for several years, with general success. From fifteen to twenty persons affected with this disease are annually received into the hospital. The method consists in giving the alum in a mucilaginous mixture, emollient clysters being at the same time administered, and the patient placed on low diet. The usual dose of alum at the commencement is a drachm, and it is increased to two or three, if the disease resists smaller quantities. The amount of the dose, however, does not seem to be in proportion to the apparent severity of the case, as some which commenced with alarming symptoms yielded to two or three drachms, while others, which appeared milder in character, required eight or ten. Dr. Perceval used to give it in doses of fifteen grains every four or six hours; but of late it has not been much used in this country.—*M. Gaz.*

New Method of studying the Cavity of the Bony Labyrinth. By Prof. MECKEL.—Place the petrous portion of the temporal bone in boiling wax, then dissolve the calcareous

phosphate of the bone, by means of diluted muriatic acid; in this manner a preparation in wax is obtained, which shows very well the disposition of the cochlea and semicircular canals, and even the distribution of the auditory nerves in the foramina of the scalæ of the cochlea. This procedure is especially recommended in relation to comparative anatomy. The anatomical collection at Bernè contains a series of interesting preparations made in this manner.—*Bul. des Sciences Med.*

New Method of preserving Anatomical Preparations.—A cheap durable process, and one which clearly displays minute structure, has been published by Dr. Davy; it is simply sulphureous acid, which may be prepared in a manner equally economical and easy, by burning sulphur matches over any appropriate vessel, and agitating the water when the match ceases to burn; when the water is sufficiently impregnated with the acid gas, it should be filtered, to render it clear and transparent. The best kind of match for this purpose is that which is used in Italy, made by dipping cotton-thread in melted sulphur.—*Ed. Med. Chir. Trans.*

Prize Essay.—The prize of 50 dollars, offered by the Massachusetts Medical Society for the best dissertation on the best modes of preventing and curing habits of Intemperance, has been awarded to WILLIAM SWEETSER, M.D., Professor of the Theory and Practice of Physic in the College at Burlington, Vt.

Several Communications are on hand, and will receive early attention.

WEEKLY REPORT OF DEATHS IN BOSTON,

Ending May 9, at noon.

Consumption, 6—convulsions, 2—croup, 1 dropsy, 1—infantile, 3—inflammation in the bowels, 1—intemperance, 1—lung fever, 1—old age, 1—teething, 3—unknown, 5. Males, 13—females 12. Stillborn 1. Total 26.

ADVERTISEMENTS.

DENTAL SURGERY.

THIS day received by Benjamin Perkins & Co., No. 135, Washington Street,—A SYSTEM OF DENTAL SURGERY. In three parts.

1. Dental Surgery as a Science.
2. Operative Dental Surgery.
3. Pharmacy connected with Dental Surgery.

By SAMUEL SHELDON FITCH, M.D., Surgeon Dentist. Denticum curam habeto ut bene digeras et diu vivas; laxatis dentibus laxantur et chylaceos officinæ; hinc mille malorum occasiones.—Baglivi XIII. March 17.

ep6w

LONDON STATIONARY, &c.

JUST received by COTTONS & BARNARD, 184 Washington Street, Crown and Double Crown Tissue Paper, large thin Bath Letter Paper; Billet Paper, Demy and Royal Bristol Board, do. do. London Board, Newman's Carmine, Music Paper.

A COPY of Bloomfield's Critical Digest of Sacred Annotation on the Gospels, 3 vols. 8vo. "The most learned Commentary in the English language." For sale by COTTONS & BARNARD, 184 Washington Street.

CASEY'S APPARATUS FOR THE CURE OF DISTORTED SPINE.

THE Proprietor of the Dormant Balance for the cure of Distorted Spine, gives notice, that he has established an agency in this city, for the convenience of those who may wish to avail themselves of this invention. Physicians having under their care the subjects of this disease, or patients themselves, may have an opportunity of inspecting the apparatus, and examining the testimonials of its efficacy, at Mr. Charles White's, corner of Winter Street. It is recommended, however, that all patients availing themselves of this invention, should do it by the advice, and under the superintendence, of their own physicians, as it is only by medical opinion that the proper subjects of the machine can be deter-

mined, or the other proper measures to be made use of in conjunction with it, can be pointed out. The Proprietor expressly disclaims the idea that a cure is to be effected, in any case, by mechanical means alone. This machine has received the approbation of many of the most eminent medical men in this city and New-York. Upon application to the agent, references will be given, and written testimonials exhibited.

All letters, post-paid, addressed to J. Lincoln, No. 27, Fayette Street, will be attended to.

Boston, Feb. 6, 1829.

NEW BOOKS FOR CHILDREN.

JUST published by COTTONS & BARNARD, 184 Washington Street.

The Waning Moon, by the author of the Rising Sun; The White Palfrey, by the author of Thomas Mansfield; The Kind and Happy Child, by the author of the White Palfrey, &c.

FRENCH WATER COLORS.

COTTONS & BARNARD, 184 Washington Street, have for sale, the following Water Colors, of an excellent quality, manufactured by P. C. Lamberlye, (France,) viz: Bistre, Raw Cassel, Burnt Umber, Raw Umber, Egyptian Brown, Vandyke Brown, Brown Pink, Seppia, Violet Lake, Carmine Lake, Sanders Blue, Prussian Blue, Mineral Blue, Indigo, Yellow Ochre, Yellow Mineral, Gamboge, Yellow Orpiment, Yellow Lake, Naples Yellow, Burnt Italian Earth, Burnt Sienna, Raw Sienna, Italian Earth, Crocus Martial, Green Lake, Sanders Green, Sap Green, Mineral Green, Prussian Green, Vermillion, Saturnine Red, Indian Red, Red Ochre, Red Orpiment, Flake White.

Also—a great variety of Newman's, Ackerman's, Reeves's and Osborne's Colors, in boxes and separate cakes.

SUNDAY SCHOOL CONVERSATIONS.

COTTONS & BARNARD, 184 Washington Street, have just published, Sunday School Conversations on some of the interesting subjects recorded in the New Testament. By the author of the Factory Girl, The Badge, James Talbot, &c.

I.

To the Editor of the Boston Medical and Surgical Journal.

Windham, May 4, 1829.

SIR,—I send you the following curious case. If you should be of opinion that it would subserve the medical profession, by exciting useful inquiries, or in any other way, you are at liberty to publish it.

Yours, &c.,

JAMES W. PERKINS.

Mrs. —, a middle-aged woman, of good constitution, had been the mother of five healthy children, in uninterrupted succession, and had invariably had short, easy labors. In 1822, she again became pregnant with her sixth child, and went her full time. During the first months of pregnancy, she was as well as usual; but, for more than two months before delivery, was almost constantly afflicted with pain in the right side and back, and became so enfeebled as to be unable to sit up for several days before the commencement of labor. Breech and feet presented; pains feeble. Feet and legs brought down into the vagina, and she was delivered principally by manual extraction. The child presented a complete mass of deformity, and had no life. A minute description of this monster might be given, were it necessary to my present

purpose,—suffice it to say, that the membranes of the brain and abdomen were fully distended with water, and its features deformed throughout. Placenta and funis very tender. The mother was relieved of pain, and remained comfortable for twenty-four hours; was then attacked with severe pain in the right iliac region, increased by pressure, which was soon removed by an active cathartic and vesication of the region. From this time the patient went on well, and had a good getting up. In 1823, this woman again became pregnant, and had no untoward symptoms until the sixth month, when she began to complain of pain in her right side, and an uncommon sense of fulness. These symptoms continued to increase, especially the sense of fulness, up to the time of delivery, at the commencement of the eighth month. May 2d, 1824.—Labor-pains came on. Examination per vaginam: os uteri beginning to dilate; pelvis almost completely filled with the uterus, distended with water. Pains continued, and at 2 o'clock that morning, the membranes ruptured, and I was sent for. Having only a few rods to travel, was soon there, and found the woman in bed, almost deluged with water. There was at least two gallons, still remaining upon the sheet in a body,

—how much had drained off could not be computed. The water resembled, in color and consistence, that which I have sometimes seen drawn in cases of ascites. Pains returned after an interval of half an hour, and delivery was soon accomplished. Child perfectly formed, and made some ineffectual efforts to breathe; but the common means of resuscitation failed to produce the desired effect. The mother got about house in ten or twelve days, but was obliged to take her bed again, in consequence of one of the inferior extremities becoming anasarcaous. From this she soon recovered, and her health became good. In 1825, she again became pregnant, and near the end of the eighth month was delivered of a dead child in a state of putrefaction. In 1826, this unfortunate woman again found herself pregnant, and went her full time; not, however, without feeling much uncommon pain and tension of the abdomen; was then delivered of a poor, feeble child, that never exhibited any other signs of life than one feeble gasp. The waters were abundant, but less than in the instance above. She was about house in eight days. In 1827, she again became pregnant, and was delivered, Sept. 12th, 1828, of a fine healthy boy.

Queries.—There was evidently a morbid state of the uterus and its appendages, brought on without assignable cause, and terminating without any remedy but that of nature. Was the derangement altogether functional? Why should abundant water, in the first instance, be contained within the body of the child; and in the second, within the parts of the mother?

II.

On the Use of Opium in Inflammatory Diseases. Communicated in a letter to Professor V. MOTT.

By F. G. KING, M.D., of New-York.

[The practice of administering opium in inflammatory diseases was proposed several years ago by the celebrated Dr. Armstrong, of London. It is a practice, however, by no means generally adopted throughout the country, and before transferring to our pages the following extract from the last American Journal, we esteem it a duty to caution the inexperienced practitioner against the too indiscriminate application of the precept it contains. If opium were to be given in fever without previous and thorough evacuation, the result would doubtless be fatal in a majority of cases; and it behoves us to reflect deeply, examine the case in all its bearings, and bring into exercise our best judgment, before adopting a treatment which, directed by skill and experience like that of Dr. Post, may be eminently successful.]

IN reply to your inquiries as to the use of anodynes and opium by the late Dr. Post, I have to remark, that in conversation with him some two years past, relative to Dr. Armstrong's practice in inflammatory diseases, he told me that the use of opium, as recommended by that gentleman, (except in *larger doses*,) was corroborated by his own experience for a long series of years, and that to him it was by no means a novelty; for that in 1804 he was called to a child about three years of age, suffering under a violent pneumonic attack, accompanied

by pain, cough, and great febrile excitement. That he accordingly bled, blistered, and evacuated the patient, afterwards placing him under the use of antimonials, but all without benefit. Matters proceeded from bad to worse, until the child, exhausted by constant cough and excessive restlessness, seemed nearly at the point of death. Under these circumstances, he determined to quiet all these irritating symptoms by a powerful anodyne, and accordingly exhibited sixty drops of laudanum. Two hours after, he was called to the child, then supposed by its parents to be dying. He found the features sunken, the surface covered with a cold clammy sweat, and secretions of an unpleasant appearance about the eyes and nostrils, but the pulse had diminished in frequency, and was more full; the respiration was slower, and everything indicated the full and desired action of the anodyne. The parents were astonished to hear the physician say that the child would soon be better. The next morning all untoward symptoms had subsided, and the child became gradually convalescent and recovered.

This was his first trial of anodynes in such affections, (his *experiment*, if you please,) but a few months afterwards, a similar case occurring, he immediately resorted to the anodyne, depletion and evacuants having been premised, and with similar success; since which period he has generally continued that mode of practice; latterly, however, substituting the Dover's powder, in place of laudanum, in pneumonic attacks.

In 1810 he was called in consultation upon a gentleman in Jersey, suffering under enteritis. He found that he had been repeatedly bled, blistered, and evacuated, but to no advantage; the pain still continued acute; the pulse was small, frequent, and corded; the skin dry and hot. Under these circumstances, he suggested the propriety of exhibiting a powerful anodyne, in order to quiet all irritation, and give nature an opportunity of recovering herself. After a little hesitation on the part of the attending physician, it was finally determined to adopt the course proposed, and one hundred drops of laudanum were directed. An hour elapsed, no sensible effect having been produced, when the *dose was repeated*, and in half an hour the patient was under its full influence. He awoke the next day free from pain or tenderness, and so recovered. The same gentleman has been frequently attacked since with the same affection, and uniformly after being bled and evacuated, he has recourse to his anodyne, which rarely fails to quell the disease. But to be efficacious, the dose must be *heroic*; at least, such was the opinion of Dr. Post, who often remarked that practitioners, especially in England and France, were not aware of the value of opium in inflammatory diseases, for even when employing it in such cases, their doses were too trivial to exert any marked influence over the malady. He himself always exhibited it under the opinion, that to obtain its soothing effect upon the system, and its *paralyzing* influence over the disease, it must be given in large doses. In diarrhœa and certain

conditions of dysentery, after having cleansed the passages, he employed laudanum or Dover's powder, with the happiest effect; in fact, he rarely used much else than salts and Dover's powder in diarrhœa, in adults. In his own case, he was no less prodigal of anodynes than with his patients. Being, as you well know, for many years a constant prey to pleuritic affections, his treatment of himself was short and efficacious, viz., blisters and purgatives, followed by eighty or one hundred drops of laudanum, which quieted his cough, allayed pain, and soon placed him in a condition to resume his business.

In conclusion, permit me to state an occurrence which took place under my own eyes, two years previous to his death. He was then violently attacked with pleurisy, accompanied with much fever, for which he had been purged and blistered, and at the period in question, was under the use of antimonials. At this time he directed me to give him seventy drops of laudanum. I remonstrated, directing his attention to the dryness of his skin, its increased heat, and the frequency and hardness of his pulse. His answer was, "believe in my experience rather than in your theory; give me seventy or eighty drops of laudanum, and an hour will convince you of its propriety." It was given, and within the hour his pulse became calm, full, and slow; his skin was covered with a gentle perspiration, and his condition strikingly improved. He left his bed the next day, and frequently since has said to me, "I think I have given you a clinical lecture that you will remember."

III.

ABSORPTION OF THE CRYSTALLINE LENS.

History of a Case of the Probable Absorption of the Crystalline Lenses of both Eyes, in consequence of local Irritation in the Fauces. Read at a late Meeting of the Boston Society for Medical Improvement.

By J. V. C. SMITH, M.D.

MARY ANN D., of this city, in the autumn of 1822,—then five years of age,—became suddenly ill, as was supposed, with the first symptoms of croup; but the course of treatment, instead of relieving her, manifestly increased the general debility, without materially diminishing the peculiar sensation of which she constantly complained in the throat. To the surprise of the family, the little sufferer continued in this painful condition several weeks, and, consequently, various ineffectual prescriptions were made. Some additional disease was now apprehended, as it was with extreme difficulty she made a full inspiration. It was conceived by some, that the action of the heart was actually suspended, whenever the lungs were thus inflated. This, however, rests on doubtful authority. A copious expectoration was next observed, so free, and at times so fœtid, as to induce the parents to change all former opinions of her case, and conclude that she was in a pulmonary consumption. Several medical gentlemen, who saw her from time to time, coincided in this opinion.

It is remarkable that Mary Ann lingered in this uncertain, and frequently distressed, condition, with but slight relief, till the following April. For the last two

months, her dissolution was daily expected. About the middle of this month, when no expectations were entertained of a recovery, an entire and unlooked for change was happily wrought. Mrs. D., the mother, who had watched the bedside of her child with intense anxiety, happened to step into an adjoining room for a moment, just as the child had one of her common turns of coughing. Perhaps she was agitated at seeing her mother going out at this particular instant;—be the cause, however, what it may, the paroxysm was unusually severe, and dislodged from the throat a thin scale of bone, the size of a vest button-mole, ragged on the edges, which she held in her fingers when the mother returned.

All the circumstances attending the early history of the case, and the manner in which she uniformly pointed to the affected part, were then seen in a new light, and had they been apprized of the cause, a speedy relief might have been afforded. As she was eating beef soup when she first complained of a painful sensation in the throat, the parents have no doubt the piece of bone was then swallowed. It is almost needless to remark, that the patient's restoration to perfect health was soon accomplished.

Here follows the most interesting part of the case:—Before the occurrence of the accident, which has been narrated, her eyesight was as perfect as that of any other person; but when good health again permitted her to return to her story books, it was apparent that she could not distinguish one letter from another. Through the whole course of her late indisposition, it was a subject of

frequent remark and regret, that her eyes had gradually become weak,—which accounted for the habit of peering through the eye-lashes, as though there was an effort of the muscles to elongate the axis of vision, whenever she endeavored critically to examine any object. At these times she was often heard to say that she could not *see*. The reason of this, the friends were given to understand, was simply that the terrible fits of coughing had protruded the eyes from their sockets, from time to time, with such convulsive force, as to have given an increased convexity to the cornea. Completely satisfied that this was merely a *temporary* near-sightedness, the father sought a *temporary* relief. She was therefore taken to an optician's in Washington Street, to select a pair of concave glasses; but great was the gentleman's surprise, when Mary Ann declared she could not see through them at all. Perplexed and discouraged, after trying, without benefit, many grades of concave glasses, she was entirely neglected, with a hope that time and nature would eventually overcome the supposed internal derangement of the organ.

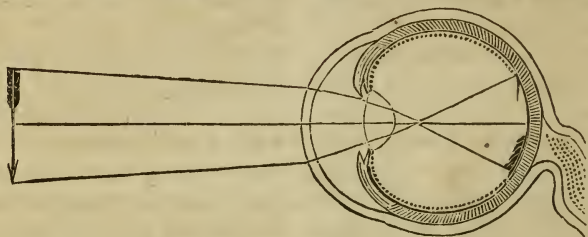
Nearly another year passed away, and no favorable change had been effected, though she endeavored to study her lessons, by finding a confused focus over a page of large letters. The effort, however, was always painful and unsatisfactory. Thus the sight remained, till she was one day taken to Roxbury, to visit an aged aunt, whose spectacles were lying on the table when she entered the parlor, and which the child, in her playfulness, happened to put on. The same moment she

exclaimed, with rapturous delight, "*I can see, I can see.*" Double convex lenses, of a sixteen inch focus, were purchased immediately, through which she continues to see with perfect distinctness, precisely as she did originally, at various distances, from eight inches to the ordinary limits of distinct vision.

Finding no cases related in the books, of a similar character, and conceiving that there is but one way of accounting for the change which has been produced within the globe, which renders a double convex lens indispensable to perfect vision under all circumstances and at all distances, we are necessarily led to the follow-

ing conclusion, viz. :—That the efforts of the system to relieve itself from a local irritation in the vicinity of the visual organs, called into sympathetic action the active absorbents of the eyes, which actually seized upon the lenses, and wholly destroyed them. This is inferred from the consideration, that a convex lens is now absolutely necessary ; and, secondly, because nature has made no progress in restoring the eyes to their natural condition. The annexed diagram exhibits the eye, with the converging rays of light passing through the lens, and forming an accurate picture on the retina, before the organ was impaired by the absorbents.

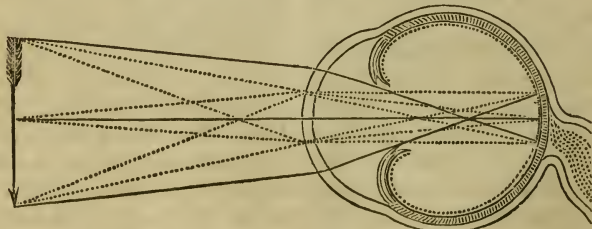
Fig. 1.



The present condition of the eyes, without lenses, is presented in the following figure, which shows the manner in which their original refractive power is impaired. The point at which the rays diverge is so far back in

the posterior part of the vitreous humor, that the image is carried entirely beyond the retina,—therefore, the object cannot be otherwise than indistinct and confused. The eyes of the aged approximate this state.

Fig. 2.

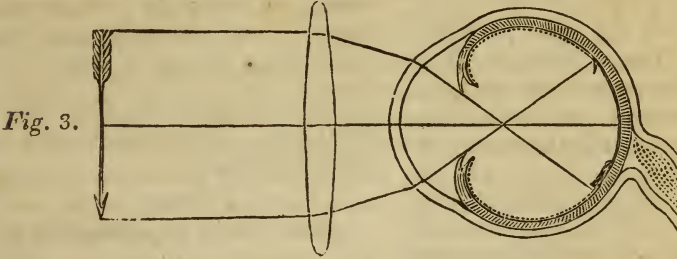


Though the individual may be enabled to distinguish objects after the extraction of the lens, it is self-evident that it must be an obscure vision, which is easily

corrected by convex glasses: they give the proper refraction to the light, and, consequently, a distinct picture on the appropriate point of the retina. The case under

consideration is precisely the same; the lens having been taken away from the inside, is placed on the outside of the eye, and the object is answered. Though the focus of the double convex lens is the radius of a sphere, of which the

surface of the glass is a segment, it is not necessary to have it of the thickness of the natural lens, because, in that case, it would be necessary that it should be placed at an inconvenient distance from the organ to produce the desired effect.



This last diagram exhibits the young lady's eye, with the lens on the outside. Its distance from the cornea gives a greater refraction to rays, which, passing through the pupil, cross precisely at the

same place that they would if the crystalline humor were there, as seen in Fig. 1. Thus has the unfortunate little patient been restored, by art, to all the pleasures arising from unimpaired vision.

SKETCHES OF PERIODICAL LITERATURE.

DR. SAMUEL JOHNSON.

Post-mortem Examination of the Body of this celebrated Writer.

At a late meeting of the College of Physicians, some account of which is given in the Med. Gazette, a paper was read by Dr. Wilson, which contained the following memoranda.

On Wednesday, December the 15th, 1784, Mr. Wilson opened the body of Dr. Samuel Johnson, who died the Monday before. About a week preceding his death, Mr. Cruikshank, by desire of his physicians, scarified his legs and scrotum, to let out the water which had collected in these parts. Dr. Johnson being very impatient to have the water entirely gone, repeated the operation himself with a lancet; and cutting very deep, lost about ten ounces of blood. He was in too weak a state to survive

this apparently trifling depletion, and died the same day. He had been affected for several years with asthma, for which he used to take opium, but had discontinued this for some time before his death, although it was the only remedy which afforded him relief. On opening the chest, the lungs did not collapse, but remained distended, as if they had lost the power of contracting. The superficial air-cells were very much enlarged. No water was found in the cavity of the chest, and not more than naturally exists in the pericardium. The heart was exceedingly large and strong, and the valves of the aorta beginning to ossify. In the abdomen there was ascites, and some inflammation of the peritoneum; the liver and spleen hard, the latter like cartilage; a gall-stone, as large as a pigeon's egg, in the gall bladder. The omentum was loaded

with fat; the folds of the jejunum adhered in several places, and there was a strong adhesion between the bladder and colon. The pancreas was remarkably enlarged. The kidney of the left side had some hydatids beginning to form on its surface; that of the right side was almost entirely destroyed, two large hydatids occupying its place. Dr. Johnson had never complained of pain in this part. Both testes had hydatids on the surface, and the right spermatic vein was exceedingly large and varicose. The cranium was not opened.

Dr. Wilson, after concluding the above history from his father's notes, alluded to the Doctor's first journey from Litchfield, when a child, to be "touched" by Queen Anne for scrofula,—a circumstance which may, perhaps, have encouraged that tendency to superstition which so strongly marked his character.

PRUSSIC ACID.

FROM an article in the last number of the American Journal of the Medical Sciences, by Dr. Hayward of this city, it appears that this substance has been employed by him with considerable success in the treatment of a very troublesome class of diseases. From noticing its sedative effects in phthisis, in which however it does not seem to be attended with benefit, Dr. H. was induced to make trial of it in cases of nervous or spasmodic cough, unattended with disease of the lungs, but apparently produced by unusual irritability of the system, and which had resisted various other remedies. The treatment was followed by the most decided relief. Similar good effects have resulted from the use of the acid in the latter days of hooping cough, and during

the continuance of painful menstruation. In hysteric cases also, for which its sedative properties seemed to point it out as peculiarly adapted, its use was attended with very favorable effects. The preparation used by Dr. H. is about one fourth the strength of that of the U. S. Pharmacopœia. Of this preparation, the commencing dose for an adult is eight drops, to be gradually increased to thirty two. This quantity may be taken twice daily.

OBSERVATIONS ON HYDROPHOBIA.

THE Edinburgh Medical and Surgical Journal contains some interesting observations on this terrible disease, by Mr. Crichton, Surgeon at Dundee, in which he explains the reports which have come to us from time to time of Hydrophobia being cured. A young woman, said to have been bitten by a mad dog, was brought to Mr. Crichton at a time when he was somewhat sceptical as to the real existence of any such disease. He directed that the bitten arm should be wrapped in lint soaked in laudanum, and desired the patient to return home, and give herself no anxiety. After some days, he was sent for to visit this young woman, and found her in a room crowded with friends, whose intense anxiety and horror-struck countenances were ill calculated to calm the agitation of the unhappy girl, who was howling and foaming at the mouth. After clearing the room, Mr. C. sent for a jug of water, and offered it to the patient, who drank it freely, supposing it, no doubt, a salutary prescription. She was now assured that it

was impossible she should have Hydrophobia, as persons in such a disease are unable to drink. Her fears were immediately calmed, and her terrific symptoms disappeared. It seems her great fear was that she should be smothered in her sleep, that being *the popular cure* for Hydrophobia in many parts of Scotland.

It may be well to add, that the doubts of Mr. C. respecting the existence of such a disease, were subsequently removed, by the occurrence in his practice of two genuine and fatal cases.

DENGUE—OR DANDY FEVER.

THE same Journal contains a history of this disease, as it prevailed in the West Indies, by Mr. Nicholson, Surgeon at Antigua. He terms it an "arthritic exanthem," and says, that in conformity with the nosology of Good, it may be called *exanthesis arthrosia*. His account does not differ materially from those already given in this Journal. His treatment consisted in brisk purgatives, diaphoretics, and the warm bath, during the

febrile stage; and subsequently, frictions with dry flannel and cold affusion.

EXFOLIATION OF THE CUTICLE.

A REMARKABLE case of exfoliation of the cuticle from various parts of the body is related by Dr. Newell, of Cheltenham, in the Midland Med. and Surg. Reporter. The patient, a young lady, experienced the first attack of this disease when about twenty years of age. The cutis, or true skin, first became inflamed, and the connection between that and the cuticle, or scarf skin, then became dissolved. These attacks have since come on about twice in a year, and the cuticle may sometimes be drawn off like a glove. Its texture does not appear to undergo any change, but the process is attended by febrile symptoms of considerable severity. The Cheltenham waters have appeared to arrest the disease.

Such phenomenon is exceedingly rare in the human species; a case somewhat similar was, however, communicated to the Royal Society, London, in 1769.

BOSTON, TUESDAY, MAY 26, 1829.

DR. JOHN MASON GOOD.

WE have before us the biography of this eminent physician. It was written by Olinthus Gregory, M.D., and forms a handsome octavo volume. The following brief sketch of his life and labors, which we have prepared for this Journal, will, we think, be read with an interest proportioned to the well-earned fame of its remarkable subject.

Dr. Good was born at Epping, in Essex, England, the 25th of May, 1764. His early education was conducted by his father, who was a respectable clergyman. At the age of fifteen, he was apprenticed to a Surgeon at Gosport,—a Mr. Johnson,—with whom he remained about three years. At the end of this period, an opportunity presented itself to him of becoming connected in business with

Mr. Weeks, a reputable Surgeon at Sudbury in a neighboring county. To prepare himself for this situation, he spent the autumn and winter of 1783, and the spring of 1784, in London, attending the lectures of Dr. Fordyce, Dr. Louder and other eminent medical professors, visiting the hospitals, and in other ways collecting professional information. He commenced his duties at Sudbury, about August, 1784. Some striking proofs of his surgical skill which occurred soon after, gained him so much reputation, that in a few months Mr. Weeks left the business entirely in his hands. His professional occupations now increased, and began to extend themselves into the surrounding villages. He continued at Sudbury till 1793, when he received a proposal to go into partnership with Mr. W., a surgeon and apothecary of considerable practice in London, who had also an appointment as surgeon in one of the prisons. This offer was accepted, and in April of that year, Mr. Good removed to London. The connection, however, though auspicious in its commencement, proved singularly unfortunate. His partner became envious of his talents, and instead of aiding, employed all his efforts, to thwart his success. He interfered with him in his practice, and industriously excited distrust of his skill among their common patients. The consequences were that the business failed, the partnership was dissolved, and Mr. Good, deprived of all resources, and with an increasing family, was almost thrown upon the charity of his friends. So far, however,

was his ardor from being damped by this disappointment, that it only excited him to new exertion. Eager to obtain distinction among medical men, he soon availed himself of an opportunity to accomplish this object. Dr. Lettson, an active member of a medical Society, had offered a premium of twenty pounds for the best dissertation "on the Diseases of Workhouses, and the best means of their Cure and Prevention." This prize was to be awarded in February, 1795. Mr. Good became a competitor, and had the satisfaction of being successful.

He also became member of a Society, constituted in the year 1794, under the title of "the General Pharmaceutical Association." The object of this Association was to get the business of druggists placed under certain restrictions, and the practice of medicine freed from the odium which the ignorance of this class of persons was likely to throw upon it. At the request of some of his colleagues, he drew up a "History of Medicinè, so far as it relates to the profession of the apothecary, from the earliest accounts to the present time." The work was published in 1795, and served, in conjunction with the labors of the Association, to call the general attention of medical men, and of the intelligent portion of society, to the ignorance adverted to and its baneful effects.

For many years after this period, Mr. Good was engaged in a variety of literary pursuits, which, however, by no means interfered with the increase of his practice, or with his attention to his medical duties. It is stated

by his biographer, that his translation of Lucretius, which was published in 1805, was actually composed in the streets of London, during the walks he took to visit his numerous patients, in the course of the six preceding years. In the autumn of 1810, he was invited to deliver a course of lectures at the Surrey Institution, "on any subject, literary or scientific, which would be agreeable to himself." The consequence of this request was the delivery of three courses of lectures, in three successive years, all of which attracted crowded audiences. The first series treated "of the nature of the material world," the second "of the animate world," and the third was devoted to "the nature of the mind." The substance of these lectures was afterwards published in the "Book of Nature." They would have been extended still farther in subsequent years, had not the pressure of professional duty obliged him, notwithstanding the strongest solicitations to the contrary, to relinquish the occupation of a Lecturer.

In the year 1820, Mr. Good received the degree of M.D. from Marischal College, Aberdeen, and, in consequence, entered upon a more elevated department of professional duty. During the same year he published his treatise of Nosology, a work to which his attention had been directed for many years. Any criticism on this production would be wholly misplaced in this connection; but whatever are its faults and imperfections, it has generally been allowed to be much superior to any classification which had preceded,

nor has it been surpassed by any subsequent attempt. It was followed in 1822 by his great work, the *STUDY OF MEDICINE*. This publication, as is well known, was most favorably received; and the first edition having been exhausted, a new and improved one issued from the press in 1825. His own copy of this contains several notes and improvements, condensed, however, into the smallest possible space, with a view to a third edition.

Till this period, Dr. Good's health had always been remarkably sound. The great activity of his life, with his temperance and regularity, had secured to him the almost uninterrupted enjoyment of his bodily powers. These, however, now began to fail. Probably, the change from the habit of visiting his patients on foot to that of riding, affected him unfavorably, and the great mental labor to which he was subjected in the preparation of his last works, augmented the evil. During the year 1822 he had several attacks of gout, and these continued to recur occasionally until the end of life. His last illness,—an inflammation of the bladder,—was exceedingly severe, and terminated his existence the 2d of January, 1827, in the 63d year of his age.

We have thus given an account of the medical career of this eminent individual, partly because we think it will prove interesting in itself, and partly because we believe a somewhat unjust estimate has been made by medical men in this country, of the degree of confidence to be placed in his professional opinions. Dr.

Good is far better known as a literary man than as a physician. His translation of Lucretius, his versions of several books of Scripture, and his various treatises on physical, metaphysical, and moral topics, are well known, and have gained for him a great, and, we trust, a durable, reputation. These achievements, however, great as they are, and supposing as they do unwearied application, naturally inspire some distrust as to his practical acquaintance with his own profession, and suggest the notion, that what he knows of medicine must have been derived from reading, and not from observation. An attentive perusal of his memoirs is calculated to do away this prejudice. Dr. Good was educated a surgeon. The amount of his practice in the country is mentioned as very considerable, and it became so in London as soon as he had time to make himself known. For more than forty years he was actively engaged in professional duty; there can be no doubt that, with the powers of observation he possessed, he was enabled to make himself familiar with the actual appearance of diseases, as well as to theorise on their causes and modes of treatment; and we have no reason to doubt that the descriptions he gives were, in the majority of cases, derived from personal observation. For the rest, Dr. Good is an instance of the union of very respectable talents with indefatigable industry. Every moment of his time was devoted to some valuable purpose; and, by the order and system which he maintained in his operations, he was enabled to reconcile

an attention to a great variety of duties, with the faithful and thorough performance of all. "If," says his biographer, "he had published nothing but his translation of Lucretius, he would have acquired a high character for free, varied, and elegant versification,—for exalted acquisitions as a philosopher and a linguist, and for singular felicity in the choice and exhibition of materials in a rich store of critical and tasteful illustration. Had he published nothing but his translation of the book of Job, he would have attained an eminent station among Hebrew scholars, and the promoters of biblical criticism; and had he published nothing but his Study of Medicine, his name would, in the opinion of one of his ablest professional correspondents, 'have gone down to posterity, associated with the science of medicine itself, as one of its most skilful practitioners, and one of its most learned promoters.'"

DR. KNOX AND THE RESURRECTION-MEN.

A REPORT has been recently published by a Committee appointed at the request of Dr. Knox to investigate the nature and degree of his connection with Burke and his comrades. The language of this report is not on the whole remarkably favorable. They acquit the Doctor of any participation in, or knowledge of, the mode in which the bodies were obtained for the dissecting-room; but add, that the circumstances under which they were conveyed, their appearance, and the

well known character of the persons engaged in the traffic, were sufficient to have excited suspicion, and that his want of attention to these circumstances, if it does not prove his ignorance wilful, still renders it highly culpable. It appears that Dr. K. did not often purchase subjects himself from those who supplied them, but left the business in the hands of his assistant, and even of his porter. It also appears that it was a rule with him never to make inquiries as to the manner in which bodies were obtained, and to discourage such inquiries in others, under the idea that it would interfere with and interrupt their future supply. He had also openly expressed his belief, no doubt a sincere one, that bodies might be purchased from the friends of deceased persons among the lower classes, and this opinion being known to Burke, furnished him with a plausible mode of accounting to the Dr. and his assistants for the supplies he furnished, and of obtaining money for the negociations in which he was supposed to be engaged. The conclusion therefore is, that Dr. Knox exhibited, in relation to a very important business, for the conduct of which he alone was responsible, a most imprudent and culpable indifference. Had he managed the affairs of his dissecting room himself, instead of leaving them to others; had he made up his judgment with regard to the existing means for obtaining bodies for dissection, from a more careful examination of the subject, and a better acquaintance with the state of popular feeling; and above all had he insisted on knowing from those who brought subjects to

his rooms, and whose desperate character was well known to him, the particulars of the means by which they procured them, he would, by so doing, have avoided the lasting stigma which must now attach to his character, and which connects his name in the history of the age with those of an atrocious murderer and his infamous accomplice.

By way of illustrating the *popular feeling* with respect to Dr. K., we give the following anecdote from the London Lancet:—A woman called on Dr. Ramage of Ely Place, to consult him on some complaint, for which the doctor ordered her to be cupped, and desired her to apply to Mr. KNOX, in the Adelphi. Two days after, the woman called again on Dr. Ramage, but had not been cupped; she was again desired to go to Mr. Knox, who, she was told, would operate gratuitously, as he was cupper to the Infirmary of which Dr. Ramage is physician. The woman shortly after made a third appearance, still without having been cupped. She was now closely questioned as to her reason for not following the physician's advice. "Sir," said she falteringly, "I am afraid to call on Mr. Knox."—"But why, my good woman? Mr. Knox will cup you extremely well."—"Yes, Sir, I have no doubt of that; but I am afraid he is some relation of Doctor Knox, the Scotch gentleman, and that he will make a subject of me; and, if you please, I'd rather not go."

THE NEW MEDICINES.

VII.—*Strychnine*.—This is the vegetable alkali of nux vomica, and is the principle to which all the prepa-

rations of that nut owe their efficacy. Its chief use as a medicinal agent, is in paralytic affections; and what is somewhat remarkable, its stimulating effects are manifested more distinctly, and sooner, in the paralytic parts, than in any other. The action of the medicine is announced by tetanic motions in these parts, a sense of formication, and local perspiration. When given in hemiplegia, these phenomena are exhibited in the diseased side, whilst the other remains cool and at rest; an eruption has also been observed sometimes to accompany the formication, whilst no trace of such an occurrence could be discovered on the healthy side. An overdose produces violent convulsive movements of the whole body, and is speedily fatal.

Magendie, whose formulary we take for a guide, says that one-eighth of a grain of Strychnine is sufficient to kill a large dog, and a quarter of a grain often produces very marked effects on the human body when in health. The price of Strychnine is \$ 40 the ounce,—of the tincture, 75 cents the ounce.

Modes of prescribing Strychnine.

1. *Pure Strychnine in pills.*

Take of

Pure Strychnine, 2 grains.

Conserve of Roses, 1-2 drachm.

Mix intimately, and divide into 24 pills. Dose, one every morning and evening, increased.

2. *Tincture of Strychnine.*

Take of

Alcohol, at 36 deg., 1 ounce.

Strychnine, 3 grains.

Make a Tincture. Dose, from 6 to 24 drops, in some simple liquid.

3. *Mixture of Strychnine.*

Take of

Distilled Water, 2 ounces.

Pure Strychnine, 1 grain.

White Sugar, 2 drachms.

Mix. Dose, a dessert spoonful morning and evening.

Ruptured Uterus, attended by some uncommon Circumstances.—Another case of ruptured uterus is come to us from abroad, which produced immediate death. It was remarkable that no vomiting occurred after the accident, though most of the other symptoms of this catastrophe were present. The child was delivered by grasping its feet. On a *post-mortem examination*, “the uterus and vagina were found extensively ruptured, the laceration in the former extending from the os uteri up to the insertion of the fallopian tube. The substance of the viscus was found to be *very soft*, and there were about a dozen of small tubercles scattered over its surface,—manifest proofs of disease in the organ.” It is also worthy of notice, that in the case referred to the liver was found uncommonly soft, and the abdominal muscles, the recti, oblique, and transverse, were *almost entirely removed*.

New Instrument for examining the Fauces.—Dr. Babington has invented an instrument by which may be examined such parts about the fauces as do not admit of inspection by unaided sight. It consists of an oblong piece of looking-glass set in wire, with a long shank. Where this instrument is to be used, it should first be dipped in water, so as to leave a film of the fluid over the surface of the glass. This expedient prevents it from being dimmed by the halitus of the breath. It is then placed against the palate whilst the tongue is held down by a spoon, when the epiglottis and upper part of the larynx become visible in the glass.

Opacity of the Cornea.—The following powder is found to act with more effect than calomel or zinc in removing this obstruction to the sight:—Take *Red Oxide of Mercury* and *White Agaric*, of each half a drachm; *White Sugar*, one ounce. Mix, and reduce them to a very fine powder.

Gonorrhœa.—A formula, different from any in common use, has been recently recommended in cases of gonorrhœa and gleet, after other remedies, even cubebs, have failed. It is this:—

R. Tinct. Ferri Muriatis, ℥i.
Sp. Æth. Nitr. ʒviij. M.

From forty to sixty drops to be taken three times a day, in distilled water. Copaiba may be substituted in the same quantity for the Spirit. Æther. Nitr., should it be thought expedient to try that medicine.

An exceedingly obstinate case of gleet is recorded in the eleventh volume of the Edinburgh Medical Journal, by Mr. Fletcher, which was cured by an injection of sea-water. The patient had labored under the complaint for two years. It was removed in ten days.

Glandular Swellings.—It is the opinion of Professor Dupuytren, that if *Muriate of Ammonia*, one part, be added to *Strong Mercurial Ointment*, four parts, the deobstruent qualities of the latter are greatly increased.

Aneurism of the Carotid Artery cured by VALSALVA'S Plan.—The aneurismal swelling was seated on the left side of the neck, and extended from the thyroid gland to the clavicle. It was larger than a hen's egg, and pulsated very strongly. The integuments covering it were of a natural color. It was entirely cured by a long continuance of the strictest regimen, consisting of weak broths, bread, vegetables, acid drinks, bodily tranquillity, repeated bleeding, the exhibition of digitalis and of laurel-water. Ice was also frequently applied to the tumor. Compression could not be borne. The patient occasionally suffered from attacks of difficult deglutition.

At the time this case was recorded, four years had elapsed, and he remained perfectly well.—*Hufe. Jour.*

Chronic Ptyalism.—A case of this kind is related by Souquet, which was cured by the mastication of cannella bark, and by swallowing the juice of it. For nine years and a half, the patient had discharged from the mouth five pints of saliva daily. He had never had syphilis, nor had he taken mercurial medicines of any kind.—*Lond. Med. & Phys. Journ.*

Good's Study of Medicine.—A third edition of MASON GOOD'S "*Study of Medicine*," containing all the author's final corrections and improvements, together with additional modern information on physiology, practice, pathology, and the nature of diseases in general, is now preparing for publication by Mr. SAMUEL COOPER, author of the Dictionary of Practical Surgery, &c. From the extraordinary diligence and great judgment Mr. Cooper has shown in his previous publications, we have reason to congratulate the profession upon his having undertaken this task.—*Ibid.*

Prize Essays.—The unsuccessful dissertations on the Effects of Ardent Spirits, which were offered for the premium of the Mass. Med. Society, are deposited at Messrs. Cottons & Barnard's Bookstore, 184 Washington Street, where they may be obtained by their respective authors.

NOTICE.

DR. ADAMS' letter to Dr. Jackson is received. The case detailed is highly interesting, and will be published in the next number.

WEEKLY REPORT OF DEATHS IN BOSTON,

Ending May 16, at noon.

Apoplexy, 1—accidental, 1—brain fever, 1—consumption, 6—disease of the heart, 1—dropsy in the chest, 1—dropsy in the head, 1—inflammation in the bowels, 2—lung fever, 2—measles, 1—unknown, 4. Males, 11—females, 10. Total, 21.

DIED—In Washington City, Dr. Elnathan Judson, Surgeon of the United States Navy.

ADVERTISEMENTS.

DENTAL SURGERY.

THIS day received by Benjamin Perkins & Co., No. 135, Washington Street,—A SYSTEM OF DENTAL SURGERY. In three parts.

1. Dental Surgery as a Science.
2. Operative Dental Surgery.
3. Pharmacy connected with Dental Surgery.

By SAMUEL SHELDON FITCH, M.D., Surgeon Dentist. Denticum curam habeto ut bene digeris et diu vivas; laxatis dentibus laxantur et chylaceos officinæ; hinc mille malorum occasiones.—Baglivi XIII.

March 17.

ep6w

LONDON STATIONARY, &c.

JUST received by COTTONS & BARNARD, 184 Washington Street, Crown and Double Crown Tissue Paper, large thin Bath Letter Paper; Billet Paper, Demy and Royal Bristol Board, do. do. London Board, Newman's Carmine, Music Paper.

A COPY of Bloomfield's Critical Digest of Sacred Annotation on the Gospels, 3 vols. 8vo. "The most learned Commentary in the English language." For sale by COTTONS & BARNARD, 184 Washington Street.

CASEY'S APPARATUS FOR THE CURE OF DISTORTED SPINE.

THE Proprietor of the Dormant Balance for the cure of Distorted Spine, gives notice, that he has established an agency in this city, for the convenience of those who may wish to avail themselves of this invention. Physicians having under their care the subjects of this disease, or patients themselves, may have an opportunity of inspecting the apparatus, and examining the testimonials of its efficacy, at Mr. Charles White's, corner of Winter Street. It is recommended, however, that all patients availing themselves of this invention, should do it by the advice, and under the superintendence, of their own physicians, as it is only by medical opinion that the proper subjects of the machine can be deter-

mined, or the other proper measures to be made use of in conjunction with it, can be pointed out. The Proprietor expressly disclaims the idea that a cure is to be effected, in any case, by mechanical means alone. This machine has received the approbation of many of the most eminent medical men in this city and New-York. Upon application to the agent, references will be given, and written testimonials exhibited.

All letters, post-paid, addressed to J. Lincoln, No. 27, Fayette Street, will be attended to.

Boston, Feb. 6, 1829.

NEW BOOKS FOR CHILDREN.

JUST published by COTTONS & BARNARD, 184 Washington Street.

The Waning Moon, by the author of the Rising Sun; The While Palfrey, by the author of Thomas Mansfield; The Kind and Happy Child, by the author of the White Palfrey, &c.

FRENCH WATER COLORS.

COTTONS & BARNARD, 184 Washington Street, have for sale, the following Water Colors, of an excellent quality, manufactured by P. C. Lamberlye, (France,) viz: Bistre, Raw Cassel, Burnt Umber, Raw Umber, Egyptian Brown, Vandyke Brown, Brown Pink, Seppia, Violet Lake, Carmined Lake, Sanders Blue, Prussian Blue, Mineral Blue, Indigo, Yellow Ochre, Yellow Mineral, Gamboge, Yellow Orpiment, Yellow Lake, Naples Yellow, Burnt Italian Earth, Burnt Sienna, Raw Sienna, Italian Earth, Crocus Martial, Green Lake, Sanders Green, Sap Green, Mineral Green, Prussian Green, Vermillion, Saturnine Red, Indian Red, Red Ochre, Red Orpiment, Flake White.

Also—a great variety of Newman's, Ackerman's, Reeves's and Osborne's Colors, in boxes and separate cakes.

SUNDAY SCHOOL CONVERSATIONS.

COTTONS & BARNARD, 184 Washington Street, have just published, Sunday School Conversations on some of the interesting subjects recorded in the New Testament. By the author of the Factory Girl, The Badge, James Talbot, &c.

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

I.

For the Medical and Surgical Journal.

FATAL CORN.

A Case of Amputation of the Toe, followed by Cerebral Disease and Death, described in a Letter from Dr. Z. B. ADAMS, of this City, to Dr. JAMES JACKSON.

DEAR SIR,—The following are the particulars of Mr. McClemmen's case, which you requested me to give you.—It is now about twelve years since he began to complain; previous to that time his health had been unremittingly good. At first he complained of some articles of food not agreeing well with his stomach; and he was seldom afterwards entirely regular in his bowels, either costive or relaxed continually. So long ago as this, too, he suffered much from a corn on the fatal toe. On the same leg with the toe, there had, at times, for many years, existed an ulcer, situated on the inside of the tibia, and which, being connected with a varicose vein, was often very slow to heal, though it had not been open for the last four or five years. About six years ago he had an attack of inflammation of the absorbents of the same leg, attended with some swelling and great pain, and marked by distinct red lines running from the foot to the groin. This was easily subdued in a short

time. Soon after this he began to complain of swelling in the scrotum, (the left side, also, I believe,) which proved to be hydrocele. The water was first simply discharged, and in a few months afterwards the operation for permanent cure by injection was performed, and he had no trouble from it afterwards. Another trouble now succeeded, which was a papular eruption, attended with great heat and itching. This occurred chiefly in the warm weather, and alternated with his dyspeptic state of stomach during the warm months, almost continually for the last four or five years. It is now between four and five years since he began to feel very intense pain in his toe, though he then would frequently have respites of a month or more at a time, when he would feel nothing of it. But for the last three years he has seldom experienced an interval of ease, beyond a few days at a time. In accordance with the advice of an eminent surgeon, the corn was removed by the knife about two years since. During the healing of the wound caused by this operation, he suffered extreme agony for the greater part of the time, for he was unable to obtain ease, as before, by walking. It is proper to remark here, that whenever the pain threatened him, he could always avert it for the time by walk-

ing ; and however severe the pain, it was always mitigated by this exercise. After the wound of the operation had healed, the toe appeared perfectly smooth and fair, without any appearance of a corny excrescence. During a paroxysm, however, there would be a slight redness and sometimes a little swelling. The paroxysms usually lasted from two to eight hours, almost always commencing at evening, and sometimes continuing through the night, the pain being most excruciating and lancinating. The following day he would go out to his business, and remain, while active and abroad, free from pain the whole day ; but at night the same agonizing scene would always be repeated. Though his constitution became much enfeebled by these nocturnal paroxysms, yet each morning would bring with it freedom from pain, and a consequent hope, though distant, that he should not be again subjected to the same trials. As the pain was always confined to a very small spot upon the toe, he entertained the idea, from which nothing could divert him, that if the toe were removed within the part pained, he should certainly be relieved. The pain, however, appeared to be so connected with his general health, especially taking into connexion the effect of the former operation, that it did not seem probable to any of the physicians who visited him, that amputation would cure him. He was therefore constantly advised against it, though it is not to be presumed that any one believed his life would be hazarded by so simple an operation. It was after a continued succession of miserable nights like those above described, that he called on me early one morning, looking haggard and worn

out, and insisted upon some relief, at the same time saying that there was no relief for him but amputation, for everything else known had been tried. I endeavored still further to dissuade him, and asked for a consultation ; but this he refused, saying that he had determined on amputation of the toe, and it must be done by me or some one else *that day*. I proposed calling on him at his house as soon as convenient : accordingly, about noon I saw him ; he was walking the room in pain, and very impatient at my delay, and when I informed him that I had come without my instruments, hoping he might have altered his mind, he desired me to return for them as soon as possible, for his determination was fixed, and everything else would be ready. In a few minutes more the toe was off. The wound was dressed, with a view to healing by the first intention, and so far as the toe alone was concerned, everything progressed as well as could be wished. It healed gradually, but naturally, with but little pain for the first two days. There was no swelling or inflammation of the parts above, at any time.

On the third day the dressings were removed, and it was found that union had taken place in about two-thirds of the wound, and the remainder looked healthy and well. He began, however, to feel the old pain again in paroxysms as before, which caused considerable despondency ; yet he clung to the hope, that when it was healed up all would be well. During the intervals of the paroxysms, which (the paroxysms) indeed were shorter than usual, his spirits were pretty good, and he occupied himself in planning his work, and giving directions to those he employed.—

He was a rigger, and a perfectly temperate man.—His appetite and general health seemed pretty good, and he appeared to enjoy the visits of his friends. We were under no apprehensions that he would do otherwise than well, when, about noon, on the sixth day from the operation, he was suddenly attacked with a violent ague, which lasted nearly an hour. I had visited him in the morning, and found him as well as usual. Soon after the chill had left him I saw him. He appeared exceedingly restless and uneasy, and like one under the effects of fear; and this was partly the case, for the ague caused alarming apprehensions in his mind; his skin was rather warmer than natural, but not very hot, and little or no sweating ensued. There was great thirst and dry tongue; pulse not much above natural. On inquiry respecting the toe, I found him free from anxiety about it;—other things, he observed, were now of more consequence; he had felt no pain or uneasiness from it, nor was it at all inflamed; from that time our attention was not again called to the toe, except by curiosity. The first night after the ague he passed with much restlessness and jactitation. The next day, in the morning, he appeared a little more comfortable; but in the afternoon he became somewhat drowsy, and before the next morning he was quite comatose. This state continued until the following day, in the afternoon of which he expired without a groan.

It was with some difficulty permission was obtained to examine the body. Time was not allowed to examine any part but the head. The toe appeared al-

most entirely healed; the healthy processes going on as in any ordinary wound. On removing the dura mater, the whole surface of both hemispheres of the cerebrum appeared as if covered with a thick layer of jelly. There was, in fact, an infiltration of serum in the pia mater, and the arachnoid was raised throughout almost its whole extent, by the same fluid distending its cells. No other morbid appearance presented in the brain, unless it were that there was more water than ordinary in the ventricles; of this there was some doubt.

On inquiry, it was ascertained that for several years past he had complained a good deal of dizziness in his head; so much so, that his friends well knew that he would not trust himself upon those heights which, in the younger part of his life, he used to mount without fear.

The question very naturally occurs, whether the operation were the cause of his death? That it was *not, directly*, is certain; that it might have been so *remotely* is more probable; nor do I readily see any reason why a fatal termination should ensue in this particular case, any more than in any ordinary amputation. That the system did not directly sympathize with the wound caused by the operation, seems to me also certain; for the usual fatal symptom of the sympathy of the system with wounds, is tetanus; this did not occur, and is indeed an uncommon occurrence among us. If fever, even in slight degree, is ever the consequence of wounds, it is when they become inflamed or unhealthy in their progress; neither of which happened in this instance. It seems to me

the most probable supposition, taking in connexion the symptoms which occurred, that the operation produced, in some mysterious manner which has never yet been satisfactorily explained, a deposition of purulent matter in some of the internal and important organs of the body. I regret exceedingly that the examination could not have been carried into the other cavities, to ascertain this point. Many cases are on record illustrative of this subject, and some have recently come to my knowledge, through the public journals, so nearly allied to this in their progress and effects, that we can hardly suppose the fatal results to depend on different causes. One particularly has arrested my attention. It was communicated by William Lawrence, Esq., who states that death occurred after the operation for removing a loose cartilage from the knee. In this instance there was discovered a similar alteration of the arachnoid membrane by serous effusion under it, accompanied with a small deposition of pus in one of the convolutions of the brain.

A very interesting paper on "phlebitis," by Mr. Arnott, has also recently appeared. It was read before the Medico-Chirurgical Society of London. In this, several cases are given of the occurrence of abscesses and inflammation in various organs, as the liver, lungs, &c., from amputations or injuries of remote parts. Although we may not accord with all the reasoning in this paper, yet the facts are not the less interesting. Mr. A. considers that abscesses and inflammation which take place in remote situations after injuries of the extremities, are dependent on phlebitis in the

part originally affected. He does not regard the effect as metastasis; but proposes something to my mind fully as unphilosophical and unsatisfactory as the doctrine of metastasis, viz., that these depositions are the effect of change induced in the blood by mixture with pus, or other inflammatory secretions circulated in the blood-vessels. But it seems to me that the only reasonable supposition on this point is, that a similarity of action may be communicated through the medium of the nerves, from one part of the body to another; and it is singular that the idea did not occur that it is not the mere presence of a quantity of pus in any organ, or part of the body, which constitutes an abscess, but it must be surrounded with a secreting surface for generating pus.

I beg you to pardon, Sir, this digression, in a paper which I fear has already exhausted your patience.

With much respect,

I am, Sir,

Your obedient and humble servant,

Z. B. ADAMS.

Boston, Feb. 27, 1829.

II.

On the Employment of Tartar Emetic in Diseases.

IN one of the November numbers of the *Gazette de Santé*, we find the following summary of what is at present known relative to the employment of tartar emetic *à haute dose*, in the treatment of diseases.

1. Tartarized antimony administered internally, in quantity of from eight grains a day to that of a scruple, of one or even several drachms, is not a poison; it is

even never followed by bad effects, except in a very limited number of cases, where its use was manifestly contraindicated.

2. Whether it could be borne or not by the patient, it did not produce inflammation of the mucous membrane of the stomach and intestines. When there existed indications of this phlegmasia, such as redness of the tongue, pain in the epigastrium, diarrhœa, &c., these symptoms have been frequently seen to disappear during its employment. (*Laennec, Delourmel, Meriadec Laennec, Lagarde, Fontanelle.*) When the patients died, the alimentary canal was ordinarily found free from alteration, and the internal membrane pale or slightly injected. (*Meriadec Laennec, Strombio, &c.*)

3. Tartarized antimony, in large doses, is a powerful remedy in *peripneumony*. It is very useful, either as an auxiliary to venesection, or as the only curative means, when sanguineous depletion has failed to arrest the progress of the disease, or when it has not been deemed advisable to have recourse to this measure.

M. Peschier has cured all his patients, with one exception, without bloodletting, by the use of tartar emetic alone. M. Wolff has employed it successfully in ten cases, which are all that he has treated. M. Palais in one; M. Prato in two; M. Rosari in fifty-two out of sixty-one cases in his civil clinique, and fifteen out of sixteen in his military clinique.

In regard to the *peripneumonies*, in which sanguineous depletion and tartarized antimony were concurrently employed, the following is the general result. Rosari cured, in his civil clinique, four hundred and forty-four out of

six hundred and two; he lost one hundred and fifty-eight; making a mortality of twenty-two per cent. In his military clinique, one hundred and forty-nine out of one hundred and seventy-five were cured; twenty six died; mortality fourteen per cent. M. Laennec, out of fifty-seven cases lost two, being rather less than one in twenty-eight. M. Ambroise Laennec lost three out of forty cases, making a proportion of one in thirteen. M. Bang, two out of forty-five,—mortality, one in twenty-two. In the greater number of these cases, the tartarized antimony did not excite vomiting, or at least only in the commencement of its administration; in others, it could not be borne at any period of the disease, without this circumstance having always opposed an obstacle to the cure.

4. Articular rheumatism is, next to pneumonia, the inflammatory affection in which tartarized antimony, in large doses, has been most successfully employed. Among a great number of cases treated by M. Laennec, this professor found, that under the influence of this treatment the medium duration of the disease was from seven to eight days. Of thirteen cases collected in his clinique, the tartarized antimony was evidently very beneficial in eight; it was useless in two, injurious in one, and of doubtful success in two. (*Meriadec Laennec.*) M. Honoré cured, by means of it, four out of five cases of acute articular rheumatism. (*Lagarde.*) Of fifteen cases cited by M. Delourmel, thirteen were cured by the same remedy. The *Observatore di Napoli* contains six other cases of cure, two of which were published by Dr. Spadafora.

5. Tartarized antimony has been given in some other affections, but thus far the number of patients has been too limited to inspire entire confidence in the results obtained.

M. Laennec cured by this remedy one case of *arachnitis*; three of *acute hydrocephalus*, one of *phlebitis*, three of *chorea*, and two of *angina*. M. Ambroise Laennec has succeeded, by means of it, in two cases of *idiopathic tetanus*; M. Recamier in four cases of *acute pulmonary catarrh*; M. Fontanelles in one case of *icterus*.

6. Among the other diseases in which the remedy in question has been tried, there are several cases in which it produced no well marked advantage, and some in which it was prejudicial. M. Laennec has observed that it speedily arrested the inflammatory orgasm in *pleurisy*; but that it did not accelerate the absorption of the extravasated fluid which was its consequence. Of eleven cases of apoplexy, six were cured; but as this professor made use of bloodletting at the same time, it is uncertain what share is attributable to the tartarized antimony. (*Meriadec Laennec.*) In one case of *rheumatism*, and in another of *gout*, it was evidently injurious. (*Meriadec Laennec.*) Its employment in *semi-paralytic mental alienation* has not been followed, in general, by any success. (*Bayle.*)
Monthly Med. Journ.

III.

THE CÆSARIAN SECTION.

Cicatrization of the Uterus after this Operation.

[In the anatomical museum of the University of Bonn, there is preserv-

ed a uterus, taken by Dr. Velten from the body of a woman on whom he had performed the Cæsarean section in March, 1813,—eight years before her death. The wound in the parietes is perfectly cicatrized, and the cicatrix perfectly distinct, being, on the inside, about two and a half lines in length.

This rare and interesting operation has been recently performed in the Hospital of Santa Maria at Florence. As it is a case of great interest, was performed by a tyro in the noble art, and the first operation of the kind in that hospital which has been successful, we give a full history of the case from the *Medico-Chirurgical Review*.]

EG. ZANOBINI, 23 years of age, of weak constitution, rickety and deformed, entered on the holy state of matrimony, contrary to the advice of her medical and other friends. Six months after marriage she became pregnant, and on the 11th of May, 1827, being near the completion of the ninth month of utero-gestation, she was seized with labor-pains, but unaccompanied by any expulsive efforts. In twenty-four hours the waters burst; but the midwife delayed sending for a surgeon, thinking the protraction of delivery was owing to the circumstance of its being a first accouchment. At the expiration of forty-eight hours, Dr. Lotti was summoned, and found that the superior aperture of the pelvis was too small to permit the descent of the head. The patient was therefore conveyed to the Santa Maria Hospital, at 10 o'clock in the forenoon of May 13th, and placed in the ward of St. Philippe. Professor

Andrini examined the parts, and came to the conclusion that nothing but the Cæsarian operation offered any chance of success. Several other professors and surgeons came into consultation, and were of the same opinion. The operation being determined on, the head-dresser of the hospital, (le premier élève interne en chirurgie,) M. Tassinari, proceeded to the task. An incision directly over the linea alba was made, between the umbilicus and pubes, and then the tendinous fibres were divided, till the peritoneum was exposed. This last was opened by means of scissors, and the opening in it enlarged by *tearing the membrane with the fingers*, to the extent of the external incision. The uterus was next incised, from the fundus to near the cervix. The fœtus was then seized by the feet, and readily extracted. A very slight traction on the umbilical cord served to remove the placenta. The wound was brought together, secured by sutures, and covered with lint. The patient was put to bed, and an anodyne draught exhibited. At six in the evening, there were signs of approaching reaction and inflammation, and twelve ounces of blood were extracted, which was repeated at midnight. Next morning, (14th of May,) the pulse was very high, and a third venesection was employed. At 2, P. M., vomiting came on, but was stopped by the exhibition of iced drink. At 11 o'clock the abdomen was much swelled, and the fever very high, with sanguineous discharges from the vagina and suppression of urine. Bled again to six ounces; catheter introduced, but no water drawn off; laxative enema. 15th.

—The constipation and ischuria continue; fever intense; enema; another venesection. 16th.—The symptoms are improved; the fever reduced; the abdomen less tense; the lochia flowing copiously. The urine has again appeared, and the patient has slept. 17th.—An aggravation of the general and local symptoms: another venesection. The symptoms now became more favorable. On the 21st the dressings were removed, in the presence of all the professors who had assisted at the operation, and the whole line of incision was found to be united, except a very small portion at the inferior angle, where a piece of lint had been introduced between the lips. On the 7th of June the patient was able to get out of bed, and was discharged from the hospital, cured, on the 16th of the same month.

The foregoing operation, authenticated as to its success, beyond the slightest doubt or cavil, does great credit to the juvenile operator.

IV.

RESTORATION OF THE URETHRA.

Case in which the Reproduction of this Canal was safely effected, as suggested by Mr. CHARLES BELL. Reported by Mr. S. GREEN, for the London Medical Gazette.

IN 1813, I was sent for to the assistance of a medical friend, in the neighborhood of Colebrookdale, whose patient, a boy, aged about 11, had fallen down a coal-pit, upwards of 30 fathoms deep. His fall had been broken by his catching at the descending rope as he fell, but he came with great force with his legs astride the iron han-

dle of the basket* at the bottom of the pit. When I saw the boy, two days had intervened from the time of the accident; he was then in a high state of fever; there was great distension and extreme tenderness of the belly, and he had not been able to pass any urine. The perineum was much swollen, inflamed, and extremely painful. He had been bled, and this operation was now repeated to the extent of 16 ounces. I immediately made an incision in the linea alba, midway between the umbilicus and pubes, and pushed forward a trochar into the bladder. The urine immediately flowed, and previous to its evacuation I introduced through the canula a flexible œsophagus tube, to ensure a constant draining from the bladder. Fomentations and poultices were kept constantly applied to the perineum, and some purgative medicines were given. The boy was left comparatively comfortable; every care was taken of him, but the inflammation of the perineum increased, and terminated in gangrene, which ultimately sloughed off.

During this process, the flexible tube was by accident withdrawn; it was, however, reintroduced, but not without some difficulty: although it became exceedingly flaccid, it answered the purpose of a constant drain for the urine very well. The introduction of a catheter *per urethram*, or the administration of a clyster, previous to the sloughing, had been quite precluded by the state of the parts. On the slough coming away, an immense gap was the consequence,

for with it the whole of the scrotum, great part of the perineum, corpora spongiosa, and nearly three inches of the urethra, were separated, together with a portion of the prostate. The testicles were left hanging bare, while the vesical opening of the urethra, the remaining portion of the prostate, the ureters, the fundus of the bladder, and about four inches of the anterior portion of the rectum, were exposed, and but little of the anterior part of the sphincter ani was left. Here was a fine opportunity of attempting to establish a reproduction of the urethra, as suggested by Charles Bell. The boy was young, and in excellent health, save the effects of the accident. As soon as the parts were a little clean, a catheter was introduced at the glans penis, and carried forwards, and again introduced into the vesical portion of the urethra in the prostate (from which the urine could be seen issuing) into the bladder. The flexible tube in the abdomen was now withdrawn, and considerable hopes of the boy's recovery were entertained. This immense hollow gradually became filled with granulations, which gradually spread over the catheter, which, being frequently a little withdrawn, turned, and replaced, an artificial passage was soon established. After this, nothing more than general means were resorted to, or required, as the patient continued to go on improving, and got well much sooner than could have been reasonably anticipated, from the great destruction of parts. I knew him for several years afterwards well in bodily health: he had no venereal power, little or no influence in restraining his urine, and but little control over his feculent evacuations.

* The term given to the wooden machine by which the coals are sent up the pit, one of which is usually at the top unloading, whilst the other is being filled at the bottom.

 SKETCHES OF PERIODICAL LITERATURE.

ENDERMIC MEDICATION.

Some singular Instances of the Effects of this Mode of Treatment.

IN a late number of the Edinburgh Journal is noticed a work of M. Lambert's on this subject, and some striking instances are detailed of the effect of this kind of practice. It appears that the only substances which have received a full trial, are strychnine, morphine, and kina. The mode of making the application, as is probably known to our readers, is to raise the cuticle by a blister, and introduce the solution, powder, or ointment, as the case may be, beneath it. Twelve cases are recorded in which the morphine was employed in this way,—four of tetanus, two of chronic bronchitis, an anomalous affection of the stomach and intestines, a case of scirrhus uterus, three of rheumatism, and one of sciatica. The specific effect of morphine is, as might naturally be expected, to allay pain, all kinds of which it removes as it were by enchantment. The quantity to be used as a commencing dose is one-sixteenth of a grain, to be gradually increased to one or two grains. The curative action of strychnine consists in the removal of paralysis. Two cases of palsy from lead are given in which it effected a cure, when introduced by the skin. In a third case it caused tetanus, which was removed, as above stated, by morphine. The effects of sulphate of kina are described as they were exhibited in a case of quartan ague. The sulphate was

tried internally for eight or ten days, without effect. Its external use was then commenced, but with scarcely more success on the four succeeding paroxysms. The fifth was arrested, however, by applying the sulphate only twelve minutes before its expected approach. On the return of the disease at the end of a fortnight, the remedy entirely failed of producing any effect. Whether M. Lambert has any other evidence of the good effect of the endermic treatment than is afforded by these cases, we are not informed; but we think much more substantial proof of its efficacy is requisite, before there is much probability of its introduction into general use. Those practitioners who are thus willing to institute extensive experiments with new remedies, certainly deserve the gratitude of the public; and although they may fail in establishing the reputation of the articles tried, such investigations can hardly be pursued without leading to some interesting conclusion, and adding some valuable facts to the stores of medical science.

 CALOMEL.
Its Effects in the green Stools of Children.

A WRITER in the last London Med. and Phys. Journal, thinks calomel too much and too indiscriminately used in the complaints of children. If, when the stools are white or clay-colored, indicating a deficiency of bile, calomel restores the secretion, what reason can there be in admi-

nistering this medicine when green stools show a superabundance of bile. In these latter cases, the author has not found the usual practice of giving calomel to be followed by any benefit; he rather depends on subcarbonate of soda and rhubarb.

ERYSIPELAS.

The Use of Incisions and other new Modes of Treatment in this Disease.

DR. JOHNSON has introduced, in the January number of his Journal, some very sensible remarks on the fashionable modes of treating this disease. He considers the indiscriminate employment of incisions to be at once unnecessary and cruel, since by far the majority of cases do equally well without their use, and the pain which the operation produces, however trifling it may seem to the surgeon, is matter of serious import to the patient. He admits, however, the propriety of employing incisions in two varieties of the disease,—first, the phlegmonous or suppurating* erysipelas; and, secondly, the malignant variety, in which the cellular substance becomes extensively affected with sloughing, and evinces a tendency to gangrene. In this case, incisions should be made before the integument becomes affected, in order to afford an outlet for the putrid purulent matter, and prevent the extensive disorganization of the cellular tissue. In the generality of cases, this mode of practice is likely to do more harm than good, and is by no means advisable.

* For some considerations on this supposed variety of erysipelas, see Dr. Good on this disease.

We have no doubt that the above remarks are founded in reason and experience, and that the practice alluded to has been too indiscriminately adopted. Incisions, however, are not the only *heroic* remedy which has been proposed in erysipelas. A large number of cases have been published in the English journals, by Mr. Higginbottom, in which the nitrate of silver, applied over the inflamed surface, checked the progress of the disease, and prevented its farther extension; and it would seem from the terms in which the article is spoken of, that it may be regarded a certain cure for every case likely to occur in practice. That these cases are correctly reported, we make no question; but they by no means prove the propriety of introducing a mode of treatment necessarily attended with so much pain to the patient, into constant use. We were ourselves induced to make trial of it in a single case, and the event by no means tempted us to repeat the experiment. The pain produced by the application was very severe, and continued for several hours, during which time the fever evidently increased. Vesication followed on a portion of the surface which was touched; the remaining portion was merely indurated and discolored. Very little effect was produced on the specific inflammation. The part to which the nitrate was applied lost, it is true, its erysipelatous feel, (its color, of course, could not be judged of, after the application,) and the skin was left dried and hard, like a piece of parchment. In the mean time, the eruption passed the bound-

dary which had been marked out for it, trailed along to the neighboring parts, and before it was arrested, had affected a new surface, equal in extent to that which presented itself when the caustic was applied. It will readily be believed that this last was allowed to remain undisturbed by any new or fashionable interference.

HYDROPHOBIA.

This Disease not communicable from Sheep to other Animals.

MAGENDIE'S Journal gives an account of some experiments on this subject. Saliva taken from two sheep, affected with hydrophobia, was inoculated into a horse, two dogs, two other sheep, and a lamb. Four months after, none of the animals had exhibited any symptom of the disease. The conclusion drawn is, that this disease cannot probably be communicated from sheep to other animals. This conclusion, we apprehend, should be received with great caution. The first mentioned sheep took the disease from a dog, and it will require stronger proof than the above to convince us that the power of communicating it, be it greater or less, is not reciprocal.

PHLEBITIS.

An Account of some of the melancholy Consequences of Venesection.

As everything relating to the consequences of venesection must be interesting to the medical practitioner, we venture to lay before our readers a short account of a somewhat remarkable case, reported in the March number of the Med. and Phys. Journal.

The patient, a robust laborer, was bled at St. George's Hospital, in consequence of injury received by a fall. Some inconvenience immediately followed the operation, but not enough to induce him to direct attention to it, although he manifested so much febrile affection as to lead a practitioner who was called to him, and who was not made acquainted with the fact of the first bleeding, to open a vein in the other arm. It was not, therefore, until the sixth day after the operation that the arm was examined. The orifice had apparently united, in part, by the first intention, but there was now much inflammation round it, with general tumefaction, extending to the shoulder, and an irritable condition of the wound itself. The pain on pressure was very acute. He was at once bled in the left arm; leeches were ordered to the part, to be followed by fomentation and poultice, and general antiphlogistic treatment adhered to.

The next day, (the seventh from the first bleeding,) the pain was somewhat relieved, but the symptoms, both local and general, were more alarming. The tongue was covered with a dark coat; skin dry; urine high colored; countenance anxious; pulse 120. He complained of painful throbbing in the axilla, and there was increased tumefaction and sensibility in the whole neighborhood of the shoulder. Local depletion was again ordered.

The next day the symptoms had become still worse. Pain in the arm and shoulder was intense. There was still considerable general tume-

faction. The axillary region was more enlarged than the day before, with an obscure sense of fluctuation. An incision was made into this part, and a large quantity of pus evacuated. Great relief immediately followed.

The next day the patient was much worse. The discharge from the axilla continued; the tumefaction was trifling; he complained of shooting pains running down the arm, from the shoulder to the forearm. On examination, the whole course of the cephalic vein was marked with a reddened line of inflammation, so hardened as to feel like a cord under the skin, and very sensible to pressure. The pain now seemed to be confined to the course of the vein, and eighteen leeches were applied to the arm in this direction.

The next day, (the tenth,) the general symptoms were decidedly typhous. A discharge of thin, sanious pus, with a fetid odor, was exuding from the axilla, and a secretion of the same nature weeping from the orifice in the bend of the arm. A sense of fulness and stiffness was felt in the left axilla, similar to that which had occurred in the right. From this day he sunk rapidly; the wound of the arm and axilla assumed a completely livid appearance; the tumefaction of the left axilla increased; fluctuation became evident, but the tumor was not opened, for he died on the twelfth day.

On examination, the orifice in the arm was found opening into the vein. There was not the slightest appearance of blood in the cavity of the vessel; it was partially filled with

purulent matter in patches like clotted blood; its inner coat was very red, and much thickened; its general appearance was that of an artery, rather than that of a vein. On tracing it towards its termination in the axillary vein, the same appearances were observed till within an inch of the principal trunk. The median basilic and basilic showed feeble traces of inflammatory action.

That this was a genuine case of phlebitis consequent on venesection, there is no reason to doubt; yet, as the author justly remarks, it does not appear that inflammation of the vein formed any part of the original affection. It seems to have commenced in the cellular tissue of the arm, and to have communicated itself to the vein only when suppuration had taken place; then it was that the vein became hardened, and the whole train of symptoms indicating phlebitis made their appearance. He concludes, therefore, that the inflammation of the vein was produced by the insinuation of inflammatory secretion from the adjoining cellular membrane; the consequence was the effusion of lymph, and an admixture of pus with the circulating fluid, which produced the distressing train of secondary putrescent symptoms, and the consequent loss of the patient.

In another case, reported in the London Medical Gazette for March 23^d, the inflammation occurred the day after bleeding, and was accompanied with violent attacks of episthotonos, the muscular contractions being so forcible as to bring the occiput nearly into contact with the

heels. The arm was enveloped in a warm bread poultice, and an opiate mixture, containing ʒss. tinct. opii, was directed to be taken every hour. The application of the poultice was followed by suppuration at the orifice, the swelling subsided, and the tetanic affection yielded to six doses of the mixture. It returned in a few hours, however, and the same mixture was again ordered, together with mercurial inunction to the spine. The fits ceased soon after the friction was commenced; it was persevered in, however, and followed by severe salivation. This case did well. The patient was a large muscular woman, about 26 years of age.

A third case is reported by Dr. Ro-

bert Lee, Physician to the British Lying-in Hospital. An infant, four days old, was attacked with severe erysipelas, first of the arms, and subsequently of the abdominal integument extending to the thighs, which proved fatal on the eighth day. On examination, the umbilical vein, from the navel to the liver, was found to be indurated and enlarged. On laying it open, a yellow-colored purulent fluid escaped, and the whole of its internal surface was found lined with a layer of closely adhering lymph, which extended itself to its principal branches. The coats of the vein were much more thickened than they are usually found to be at the same period after birth.

BOSTON, TUESDAY, JUNE 2, 1829.

INTESTINAL WORMS.

Mr. Rhind's Treatise on this important Subject.

SOME very valuable practical information on this subject is contained in a late work by Mr. Rhind, of the Royal Medical Society of Edinburgh. Mr. R. divides intestinal worms into six species, viz.:—*Trichocephalus dispar*, or long thread-worm; the *oxyuris vermicularis*, or common thread-worm; the *oxyuris angulata*; the *ascaris lumbricoides*, or round worm; the *bothriocephalus latus*, or broad tape-worm; and the *tenia solium*, or common tape-worm. The 'hird of these is a recently discovered species, and derives its name from the circumstance of the body being bent at an obtuse angle. It is much larger than the common thread-worm,

being about two inches in length, and with a diameter of one-eighth of an inch at its thickest part.

In the treatment of worms, Mr. R. thinks two objects are indicated,—first, their destruction and expulsion, and, subsequently, the removal of that state of the alimentary canal which mainly contributes to their formation and continuance. The remedies which have at different times been proposed for the extirpation of worms, are almost innumerable. In 1715, Le Clerc enumerated 350 of these,—and the number still in use, including all the ingredients which enter into popular prescriptions, must be very considerable. Mr. Rhind cuts off from the list the whole tribe of mechanical anthelmintics, such as zinc, tin-powder, &c.

He rejects, for the most part, those articles which from time to time have been regarded as specific, and confines his attention almost wholly to those substances which act through the medium of a cathartic operation.

For the destruction and removal of the varieties of thread-worm, which inhabit chiefly the lower colon and rectum, he advises a compound powder and electuary, which were employed by Bremser, the author of a German treatise on this subject, and the virtues of which probably depend on their containing a large proportion of jalap and sulphate of soda. An injection, containing half a drachm of aloes, or two drachms of oil of turpentine, is an excellent auxiliary when cathartics have been employed for a few days. Cold, and even iced water, have been used in the same manner with good success, as the worms evince a peculiar sensibility to the operation of this agent. The irritation about the rectum, which is a distressing symptom in this form of the disease, is best relieved by oleaginous injections.

The plan adopted for the cure of the round worm, is nearly the same as that above described; but if the oil of turpentine be used, it should be given by the mouth. For tænia, Mr. Rhind, in common with most practitioners, relies almost exclusively on this latter remedy. He advises to begin with small doses, increasing gradually, and continuing its use for ten or twelve days at a time. Its action on the bladder is best prevented by combining it with other laxatives, especially castor oil.

Such are the views of Mr. Rhind on this important subject. They appear to have been formed from extensive experience, and are, we doubt not, worthy of confidence: we are not prepared, however, to follow him in rejecting all those articles which are generally regarded as specifics; for, however dangerous it may be to trust to popular opinions, those which are widely diffused have generally some foundation. We have been in the habit for many years of prescribing the spigelia, with general, though not uniform, success, in the two most common forms of intestinal worms; and have also found calomel efficacious, when given in doses by no means sufficient to produce a powerful cathartic operation.

IODINE.

Iodine regarded as a Surgical Instrument.

IN a late work on diseased joints and other subjects, by Mr. Buchanan, the external use of this article is strongly recommended in a variety of local diseases. Among other cases in which its efficacy was manifested, was one of diseased hip, in a scrofulous constitution, which had resisted the ordinary remedies; one of inflamed finger-joint, in which effusion appeared to have taken place in the synovial cavity; one of gangrenous extremity from wound; one of bubo; two of fistula, and several of common inflammation and cancerous affection of the mamma. In addition to this, the same article produced reunion in a limb in which both the tibia and fibula had been fractured about eleven months previous, and from cir-

cumstances could not then be retained in apposition. In this, as in the other cases, the tincture of iodine was applied daily; the parts became stimulated and deposited osseous substance, union of the fractured extremities followed, and in four months from the commencement of the treatment the patient was dismissed, cured. In fact, this one remedy seems to have proved, in the hands of this fortunate practitioner, a sort of panacæa for human suffering; and if we may confide implicitly in his animated description of its virtues, the surgeon will certainly find in iodine by far the most potent auxiliary in his labors which nature or art has yet been able to furnish him.

Ossification of the Vitreous Humor of the Eye.—In the museum at Strasbourg, a human eye has been recently deposited by M. Kuhn, the vitreous humor of which is in a state of perfect ossification. The person from whose body it was taken died of inflammation of the stomach, at the age of 70.—The eye is the only organ of sense subject to ossification. A cataract is, in fact, an approach to this state, but the choroid membrane is the part which most frequently undergoes this change. Haller states that he has seen the retina ossified, and Morgagni, Scarpa, Magendie, and Manoury, bear testimony to similar occurrences.

Silver obtained from the Human Viscera.—A case is related by Dr. Wedemeyer, of Hanover, in which a patient took the nitrate of silver eighteen months for epilepsy. The disease was overcome, but the skin became discolored. The patient soon after had a disease of the liver, and a dropsy, of which he died. On examination, all the internal viscera were found more or less stained of a bluish color; and the plexus cho-

roides and pancreas being subjected to chemical examination by Mr. Brande, a portion of silver was obtained in a metallic state.

Fracture of the Neck of the Thigh Bone.—In his description of the bones of the lower extremity, Mr. Lizars states that he has been informed by Professor D'Zondi, that several instances of bony union of the neck of the os femoris, when fractured within the joint, have fallen under his observation.

Phlegmonous Erysipelas.—Two cases of this disease have been cured at the Hospice de l'École, at Paris, by simple compression. One was a female, in whom one leg was swollen, painful, of a brownish red color, and had the boggy feel; all which disappeared by the use of bandages, though the patient was 65 years of age. The other was a stout man,—a much more severe case, affecting both legs; bandaging cured him in six days.

Poisoning by Milk.—A family in this city have been recently made sick by drinking milk. It does not appear to be correctly ascertained to what the poisonous quality of the milk can be attributed, though it is thought it must have been impregnated with copper in some accidental way. The family are all recovered from the attack.

The Smallpox.—This disease is prevailing extensively at Havana.

REPORT OF DEATHS IN BOSTON,

The week ending May 21, at noon.

Of brain fever, 2—consumption, 6—carcinoma uteri, 1—drowned, 1—disease of the head, 1—hip complaint, 1—insane, 1—infantile, 1—inflammation in the bowels, 1—intemperance, 1—lung fever, 1—liver complaint, 1—old age, 1—typhous fever, 2—unknown, 1. Males, 10—females, 11. Stillborn, 3. Total, 24.

DIED.—At Paris, on the 30th of March Dr. Samuel F. Ralston, of Philadelphia.

ADVERTISEMENTS.

DENTAL SURGERY.

THIS day received by Benjamin Perkins & Co., No. 135, Washington Street,—A SYSTEM OF DENTAL SURGERY. In three parts.

1. Dental Surgery as a Science.
2. Operative Dental Surgery.
3. Pharmacy connected with Dental Surgery.

By SAMUEL SHELDON FITCH, M.D., Surgeon Dentist. Denticum curam habeto ut bene digeris et diu vivas; laxatis dentibus laxantur et chylaceos officinæ; hinc mille malorum occasiones.—Baglivi XIII. March 17.

ep6w

LONDON STATIONARY, &c.

JUST received by COTTONS & BARNARD, 184 Washington Street, Crown and Double Crown Tissue Paper, large thin Bath Letter Paper; Billet Paper, Demy and Royal Bristol Board, do. do. London Board, Newman's Carmine, Music Paper.

A COPY of Bloomfield's Critical Digest of Sacred Annotation on the Gospels, 3 vols. 8vo. "The most learned Commentary in the English language." For sale by COTTONS & BARNARD, 184 Washington Street.

CASEY'S APPARATUS FOR THE CURE OF DISTORTED SPINE.

THE Proprietor of the Dormant Balance for the cure of Distorted Spine, gives notice, that he has established an agency in this city, for the convenience of those who may wish to avail themselves of this invention. Physicians having under their care the subjects of this disease, or patients themselves, may have an opportunity of inspecting the apparatus, and examining the testimonials of its efficacy, at Mr. Charles White's, corner of Winter Street. It is recommended, however, that all patients availing themselves of this invention, should do it by the advice, and under the superintendence, of their own physicians, as it is only by medical opinion that the proper subjects of the machine can be deter-

mined, or the other proper measures to be made use of in conjunction with it, can be pointed out. The Proprietor expressly disclaims the idea that a cure is to be effected, in any case, by mechanical means alone. This machine has received the approbation of many of the most eminent medical men in this city and New-York. Upon application to the agent, references will be given, and written testimonials exhibited.

All letters, post-paid, addressed to J. Lincoln, No. 27, Fayette Street, will be attended to.

Boston, Feb. 6, 1829.

NEW BOOKS FOR CHILDREN.

JUST published by COTTONS & BARNARD, 184 Washington Street.

The Waning Moon, by the author of the Rising Sun; The White Palfrey, by the author of Thomas Mansfield; The Kind and Happy Child, by the author of the White Palfrey, &c.

FRENCH WATER COLORS.

COTTONS & BARNARD, 184 Washington Street, have for sale, the following Water Colors, of an excellent quality, manufactured by P. C. Lamberlye, (France,) viz: Bistre, Raw Cassel, Burnt Umber, Raw Umber, Egyptian Brown, Vandyke Brown, Brown Pink, Seppia, Violet Lake, Carmine Lake, Sanders Blue, Prussian Blue, Mineral Blue, Indigo, Yellow Ochre, Yellow Mineral, Gamboge, Yellow Orpiment, Yellow Lake, Naples Yellow, Burnt Italian Earth, Burnt Sienna, Raw Sienna, Italian Earth, Crocus Martial, Green Lake, Sanders Green, Sap Green, Mineral Green, Prussian Green, Vermillion, Saturnine Red, Indian Red, Red Ochre, Red Orpiment, Flake White.

Also—a great variety of Newman's, Ackerman's, Reeves's and Osborne's Colors, in boxes and separate cakes.

SUNDAY SCHOOL CONVERSATIONS.

COTTONS & BARNARD, 184 Washington Street, have just published, Sunday School Conversations on some of the interesting subjects recorded in the New Testament. By the author of the Factory Girl, The Badge, James Talbot, &c.

I.

SIR ASTLEY COOPER.

Biographical Sketch of this celebrated Practitioner, extracted from the Imperial Magazine.

SIR ASTLEY PASTON COOPER was born on the 23d of August, 1768. His father, the Rev. Samuel Cooper, D. D., who then resided at Great Yarmouth, in Norfolk, was rector of Yelverton and of Morley, in that county; and his mother was the daughter and heiress of James Barnsby, Esq., of Spottisham, also in Norfolk.

The subject of this memoir, who was a younger son, obtained his baptismal names from his two god-fathers, Sir Jacob Astley and Mr. Paston, both gentlemen of the first distinction in the county. After receiving a private education, he was, at his own desire, articled to Mr. Henry Cline, principal surgeon at Guy's and St. Thomas's Hospitals. Under such an able instructor, and with the advantage derived from the practice of two great medical establishments, an enterprising and intelligent young man, who was bent upon excelling in his profession, could not fail to acquire distinction. The diligence, attention and acuteness of Mr. Cooper, added to a suavity of disposition, and a commendable degree of patience, rendered him no

less a favorite with the patients and students, than with his worthy preceptor. So well satisfied, indeed, was Mr. Cline with the steadiness and ability of his pupil, that he entrusted him with a large share of hospital practice, even in cases of the most intricate nature. The curators, also, were equally confident in him, and as a testimony of their approbation, appointed him, while yet very young, demonstrator of anatomy at St. Thomas's, and assistant surgeon at Guy's Hospital. Mr. Cline being thus, in a great measure, relieved from the weight of labor, gradually relinquished the task of lecturing to Mr. Cooper; and this, instead of lessening, considerably increased the number of pupils at the hospital, as well as auditors in the theatre.

In the year 1800, Mr. Cooper appeared before the public in the character of a discoverer in anatomy. This was in a communication to the Royal Society, of an important paper, stating the effects produced on the organ of hearing, by a perforation of the membrana tympani, commonly called the drum of the ear. It had hitherto been generally imagined, that such an accident must be unavoidably attended with deafness, but several cases were adduced, all concurring in the proof, that the loss of this faculty is but partial, and sometimes

so little, as to produce very slight inconvenience. A perforation of the membrane is indicated when air or smoke can be drawn from the mouth through the external ear.

Other communications, wholly of an experimental nature, free from hypothesis, and drawn up with commendable simplicity, were made to the same learned body; in consequence of which, on the 18th of February, 1802, Mr. Cooper was unanimously elected a member of the Royal Society.

In the same year, he imparted to the editors of the London Medical and Physical Journal, some interesting and important cases, accompanied with a descriptive plate, exemplifying an improved treatment of popliteal aneurism. The celebrated surgeon, John Hunter, first contrived a plan of securing the arteries; but his method sometimes failed in practice, on which account that skilful operator, Mr. Abernethy, directed his attention to the subject, and suggested the application of two ligatures instead of one, and afterwards dividing the vessel, thereby lessening the danger of hemorrhage. Great as this improvement was, some danger still attended it, particularly from the effusion of blood. Mr. Cooper, therefore, contrived a more facile method of fastening the wounded artery, by an eyed probe with a double ligature, which happily answered the purpose, and that in some very desperate cases.

In 1804, Mr. Cooper published, in one volume, folio, and dedicated to Mr. Cline, a work entitled "The Anatomy and Surgical Treatment of Inguinal and Congenital Hernia, illustrated by Plates." — Though the world in general is not quite aware of the extreme frequency of hernia, every medical

practitioner knows that the disease is one of common occurrence in every rank of life. But notwithstanding the obligation under which the faculty lie, of studying this complaint in all its varieties, there was still wanting a clear and accurate treatise, exhibiting all that minute anatomy has been able to discover, and skilful surgery to practice, in the knowledge and treatment of hernia. This deficiency was now in a great degree supplied by our author, who in his preface says, "I have almost uniformly avoided quoting the opinions of authors on this part of surgery. This I have done, certainly not from any wish to slight or undervalue the labors of some of the most excellent physiologists and practitioners that have adorned our profession, but because it did not form a part of my plan to give a history of this branch of surgery, and because I wanted to confine myself to the very wide scene of observation afforded by the two noble institutions of St. Thomas's and Guy's Hospitals, and to that portion of the practice of this metropolis which I have been personally enabled to authenticate. I have therefore related no cure, and given no remark, to the truth of which I cannot vouch; and for the same reason, the subjects of all the plates annexed to this volume, are from preparations either in my own possession, or in the Anatomical Museum at St. Thomas's Hospital."

The style of this performance, as also that of all the author's productions, is a simple communication of facts, clear and unaffected. Almost everything relating to the history of opinions and discoveries in the disease is omitted: the author has appeared desirous of incurring a personal responsibility

for the accuracy of every case and assertion; and to confine himself to the results of a multitude of dissections, of which actual demonstration exists in one or two cabinets of anatomy, or to the records of numerous operations, of which living witnesses remained at the time when he published the respective cures to the world. Under a plan thus circumscribed, to have made so valuable an accession to the kindred arts of anatomy and surgery, displays a brilliant testimony of extensive knowledge, professional skill, unsparing industry, and scrupulous integrity in the author.

In 1807, our indefatigable observer completed his design by publishing, in the same splendid form, a treatise on "Crural and Umbilical Hernia." These two works have been since concentrated in one volume, with additional cases, and edited by the author's pupil and coadjutor, Mr. Key, of Guy's Hospital.

In 1805, Mr. Cooper coöperated with some of the most eminent London practitioners, in founding a social institution for reciprocal information and public improvement. The first fruits of this "Medical and Chirurgical Society" appeared in 1809, when a volume of its Transactions was published. In their preface, the editors give a modest account of the plan on which the institution was founded:—"The varied forms of disease, whether medical or surgical, and the modes of treatment which may be found adequate to their removal, are subjects concerning which the Society necessarily feels the highest interest." Cases having a fatal issue are often not less instructive than such as terminate favorably. They frequently tend

to point out more accurately the plan to be pursued in the treatment of similar complaints; they afford valuable information relative to the probable causes of failure, and, when dissection is permitted, they throw light on the more intimate nature and modification of the disease."

This volume contains "two cases of Aneurism of the Carotid Artery," by Mr. Cooper; the first of which terminated fatally, and the second fortunately. The subsequent volumes of the transactions were also enriched with valuable papers from the same source. Other publications, devoted to the extension of science and professional improvement, have also been enriched with valuable communications from this indefatigable practitioner; and among the rest may be mentioned "The Edinburgh Medical and Surgical Journal," to which he voluntarily transmitted, at the very commencement of the work, some curious cases.

In 1811, Mr. Cooper favored the profession and the public with a series of experiments instituted by him, in order to ascertain the resources with which nature is provided for distributing the vital fluid throughout the bodies of animals, when the principal trunks of arteries are destroyed. To determine this point, Mr. C. tied the *aorta descendens* of dogs, very near to the heart, in such a way as to stop the current of blood from passing by that vessel, to all the lower parts of the frame. The animals seemed to sustain no great inconvenience by this treatment; the wounds soon healed, the health was not impaired, the secretions proceeded as usual, and the creatures even remained active and lively. When they were destroy-

ed, after some weeks or months, in order to ascertain what changes had happened from the destruction of a part presumed to be so essential to life as the aorta, it was found obliterated where the ligature was fixed, and that the blood had been transmitted by anastomosing branches.

On the resignation of Mr. Cline, there could be no hesitation in regard to the choice of a successor; and Mr. Cooper, from this period, may be considered as standing unrivalled in the double situation of surgical operator and anatomical preceptor.

To the acquisition of wealth, distinctions of the most flattering description were soon added. He was nominated surgeon to his Majesty; and in 1821, he had the satisfaction of relieving the august personage from a very uneasy excrescence which had formed on the top of his head. The operation was painful, but the King bore it without evincing any emotion; and when complimented by Mr. Cooper for his fortitude, he replied, "None of our family was ever known to want courage." For his skilful performance of this service, the dignity of a baronet was conferred upon the surgeon, the 27th of July, in the same year, with remainder, in default of male issue, to his nephew, Astley Paston Cooper, Esq., the third son of the late Rev. Samuel Lovic Cooper, A. M., rector of Ingoldesthorpe and Barton, in the county of Norfolk.

On the 11th of August, 1828, Sir Astley was gazetted as sergeant-surgeon to the King, which may be said to complete his professional honors. His fame, however, rests upon a more stable foundation than such adventitious

distinctions: and as long as the two noble establishments to which he is attached shall adorn the metropolis, the name of Cooper will be venerated, by the public, no less than by the faculty, to whose history it gives so brilliant a lustre.

It remains only to observe, that though past the meridian of life, the powers of this celebrated practitioner continue to be employed for the general benefit of mankind, and the particular instruction of surgical students.

Mr. Bransby Cooper, the brother of Sir Astley, and member of parliament for Gloucester, has distinguished himself by his zeal in defence of the Protestant establishment, and opposition to what is called Catholic Emancipation.

II.

Case of the Leaping Ague of Angus-shire.

By JOHN CRICHTON, Esq., Surgeon, Dundee.

TOWARDS the commencement of January, 1818, I was requested to visit Miss M. C., æt. 15, a girl naturally of a brisk and lively temperament, and of quick sensibility. From her parents I learned the following particulars of her previous history. During the summer of 1815 she had suffered much from stomach complaints, rejecting almost everything taken into the stomach, excepting brisk small beer. In the month of October, 1816, the rest of the family being from home, she, with two of her sisters, slept in the house by themselves. One evening, towards midnight, she thought she heard the sound of footsteps, and awakened her sisters, who said

she only dreamed, and desiring her to be quiet, fell immediately asleep again. Not feeling satisfied, however, she got out of bed, and found there were in reality people in the house. The lobby window was open, through which the thieves had gained admittance. In a state of desperation, she sprung out at the window and knocked up the people in the adjoining house. During the interval, however, the thieves had made their escape, leaving their booty bundled up behind them; but the effect of the shock upon her delicate frame was not easily to be effaced, and the subsequent illness and death of a favorite sister the following season, did not tend to improve her condition. She became pensive and bewildered, was affected with excessive perspirations, and her strength rapidly declined. At one period during the summer, the catamenia made a slight appearance, but never returned. Towards the close of the year 1817, she had frequent attacks of shaking, accompanied with foaming at the mouth, and followed by a state of coma, which, after continuing about an hour, gradually went off. At the commencement of the year 1818, when my attention was directed to her case, the disease had assumed the following appearances:

Every morning, about ten o'clock, she became drowsy and torpid; about eleven she began to arouse out of that state; by twelve she got out of bed, and went through the house collecting her trinkets, such as watches, rings, writing apparatus, and other articles she had secreted the preceding day in holes and other by-places out of sight. These she brought with her into bed,

and amused herself with them for some time, occasionally conversing with those in the room, but in such a language that no stranger, and hardly even those of the family, who were constantly beside her, could understand. This arose from her commencing the sentences with the last word, and very frequently pronouncing the words themselves with the last letter foremost. At times, when by no possibility she could make herself understood by her parents or sisters, she became irritated, and would write down what she wished to convey; but her manner of writing was equally singular, beginning at the right edge of the paper and writing backwards towards the left, the last word of the sentences first, and often the last letter of the word first, and this she performed with great rapidity, and seemingly without consideration. Her sight likewise was peculiarly affected, seeing objects only in particular directions, so that when she wished to view anything, she was necessitated to turn her head in another direction. About one o'clock she again got out of bed, and, after carefully secreting her trinkets in various by-places of the house, she commenced dancing the *Copenhagen jig*. Her excitations continued to increase; she jumped upon the tables and chairs, sometimes running with great rapidity round and round the edge of a table, then springing up and squatting herself upon the top of the room door, swinging backwards and forwards without any hold. At this time she required to be very narrowly watched, for fear of her springing out of the window, which she often manifested an earnest longing to do. On one

occasion, the outer door happening to be open, she made a sudden spring out, clearing the staircase at one bound. She was instantly followed and brought back, without having sustained any injury. At first they were in the habit of attempting to keep her forcibly down in bed, fearing she might injure herself. But the strength of several people together was insufficient for that purpose, as she got out of their hold like an eel, springing to the other end of the room, so that it was thought most advisable to allow her to take her own way, only guarding the windows and door. About two o'clock, becoming quite exhausted, she got into bed, and, falling into a deep sleep, she awakened about five o'clock in her right mind, and without being in the smallest degree conscious of anything that had taken place during the paroxysm. She continued so until about ten o'clock next morning, when the same, or nearly the same, routine took place.

After attending particularly to the state of her bowels, various medicines were used, with little or no effect. Opium, however, administered an hour before the accession of the paroxysm, once or twice prevented its recurrence, but was followed by so much stupor and confusion of intellect, that it was not persevered in. The shower-bath was afterwards had recourse to, which put a stop to the train of symptoms; but this again was followed by a complete locking of the jaws for eight days, during which period nothing could be introduced into the stomach excepting by suction between the teeth. The disease, however, never afterwards ap-

peared in its exquisite form, and gradually subsided. She was taken to the country towards the beginning of March, in a state of convalescence, and a sea voyage to the Baltic, during the summer, completely restored her to health and strength.—*Med. Chir. Rev.*

III.

Case in which the Operation of Lithotritie was successfully performed, by ROBERT LISTON, Esq., one of the Surgeons of the Royal Infirmary of Edinburgh, Lecturer on Surgery, &c. Communicated by Mr. ANNANDALE, House-Surgeon.

ANDREW LEECHMAN, aged 70, was admitted into the Royal Infirmary on the 10th of November, 1828. He stated, that for five months past he had been laboring under all the symptoms of stone in the bladder. On sounding him, a stone was distinctly felt. As he had a great aversion to being cut, and as his urine seemed to indicate a diseased state of the bladder, it was thought advisable to break down the stone, in preference to the usual operation.

On the 13th of November, a solution of opium having been injected into the bladder, Mr. Liston introduced Civiale's instrument, but owing to the restlessness of the patient, and the irritable state of the bladder, did not succeed in grasping it completely. Several small portions of stone, however, came away in the fangs of the instrument, and during the night. He suffered no inconvenience from the operation. On the 15th, he passed a barley-corn incrustated with calcareous matter. On the 16th, a piece of straw with the same incrustation. He

complained of pain in the testicles. On the 18th, a small abscess having formed in the scrotum was opened.

The instrument was again introduced on the 25th. The stone was fairly laid hold of, but was so soft that it was crushed by the instrument, on withdrawing which, several fragments of seeds were found adhering. He now confessed, that while reaping during the last harvest, he had introduced a number of barley-corns into his urethra, but would not say for what purpose.

The patient had repeated attacks of retention of urine after the last operation, from the larger portions of stone lodging in the urethra. He passed in all thirteen fragments, having entire barley-corns for their nuclei, besides a much greater number having only small pieces of the beards. He had now little pain, and the quantity of mucus in his urine was considerable. He was sound several times, and as nothing was felt in his bladder, he was dismissed, cured, on the 16th of December, 1828.—*Ib.*

IV.

Imaginary Affections—Pretended Operation—Recovery.

THE two following cases have occurred, one in 1820 and the other within the last few months, under the care of M. Maury, at the Hospital of St. Louis.

CASE I.—A young man from the country, a laborer, imagined that he had swallowed a young snake in a glass of water. "It is five years (said he) since the accident occurred; since which time the animal has not ceased to grow. It has now attained an

enormous size, and produces great inconvenience: constantly in motion, it traverses the belly, mounts into the chest, and sometimes rises up to the left eye, when I have a distinct perception of its size and color. Sometimes its movements are so violent and painful, that I am obliged to constrain them by seizing and squeezing it through the parietes of the abdomen." The patient described a variety of other circumstances connected with his internal enemy, and appealed to the by-standers whether they did not hear it hissing; yet, in all other respects, he was perfectly rational. M. Maury, aware that no reasoning would avail, affected to agree with him. The patient himself expressed his conviction that nothing but an operation could save him. It was practised. In order to render the illusion more complete, a large plait was made in the integuments of the abdomen, the base of which was traversed with a bistoury, and a live adder introduced into the wound in the form of a seton. One of the wounds being covered with the hand, the patient was requested to assist the operator by seizing the head of the "serpent," and unite his efforts in extracting it. No idea can be formed of the joy of the patient without having witnessed it. Next day he declared that he was prodigiously shrunk, in consequence of the extraction of the horrid creature; all the torments which he had suffered for five years were removed; the cure was complete in a few days, and what is more remarkable, it has continued permanent. One circumstance alone for a moment rendered it doubtful,—the patient was afraid that

the serpent might have left some eggs; but his confidence was completely restored on being assured that it was a *male*.

CASE II.—The subject of this observation was a woman, aged 40, the mother of several children, of a nervous temperament, and her health broken by various causes, principally moral. She was admitted into the Hospital St. Louis last November, after having gone the round of most of the hospitals in Paris, and consulted a great number of practitioners, on account of an animal which moved about in the hypochondriac region and left flank, producing pain, extending sometimes to the corresponding side of the head. On some occasions she described it as a tape-worm, on others as a worm covered with bristles; sometimes as an adder, and sometimes leeches, which she had swallowed in eating water-cresses. The countenance was expressive of mental suffering and excitement, but the intellect was

not deranged, except as regarded her complaint. She had increased appetite and borborygmi, which she attributed to the movements of the animal; she was constipated, averse to exercise, and fond of solitude. These circumstances, it will be perceived, rendered this case more complicated than the preceding. It was evident that, though there might be some real suffering, there was more which was imaginary. M. Maury, however, easily persuaded her that the animal was a serpent, and that an operation alone could remove it: accordingly, an operation similar to that above described was had recourse to. The success, however, was not quite so complete, as she still complained, either owing to her experiencing real pain, or that her imagination had not been entirely satisfied. However, she left the hospital much more tranquil, and it has since been ascertained from her family that she has nearly recovered her health.

La Clinique.

SKETCHES OF PERIODICAL LITERATURE.

DELIRIUM TREMENS.

THE proper treatment of this disease, and the circumstances which distinguish it from inflammation of the brain, appear to have attracted, of late, considerable attention. It seems to have been ascertained by experience, that where this disease is regarded as inflammatory, and venesection resorted to, this measure is always followed by an aggravation of the symptoms; and it has repeatedly happened that a fatal termination has ensued within a few hours.

The following considerations, perhaps, will, if kept steadily in view, assist in forming this important diagnosis:—1. Phrenitis is always accompanied with severe pain in the head and intolerance of light; both of which symptoms are absent in delirium tremens.—2. That tremulous motion of the limbs, which gives its name to the latter disease, the convulsive effort with which the hand is extended, and other motions, performed as circumstances may require, are entirely peculiar to it, and

where they have been once noticed are not easily forgotten.—3. The species of mania in the two cases is essentially different; since, in delirium tremens, the patient can generally recognize his friends and the physician, and, provided his attention be commanded, will converse rationally on any topic; circumstances which seldom or never characterize phrenitis.—4. The total absence of sleep may be regarded as peculiar to delirium tremens, in which, whenever slumber occurs, it may be regarded as in the strongest sense critical; whereas, in phrenitis, intervals of sleep are not unusual, and a certain degree of stupor marks the whole progress of the disease.—Such are the main indications by which these two important maladies may be distinguished, and by which the practitioner is to be guided in their treatment.

There are, indeed, occasionally, cases of delirium tremens preceded by decisive symptoms of cerebral congestion, for which local or general bloodletting may be found useful; but such cases are of rare occurrence, and their treatment requires great caution on the part of the practitioner, for, if the depletion be carried farther than is demanded by the local plethora, the consequence will certainly be a general prostration, which will render the subsequent malady more severe and more dangerous.

METALLIC LIGATURES.

THE last American Journal contains an account of some very interesting experiments by Dr. Levert, of Alabama, on different kinds of ligatures

applied to the arteries. Many years ago it was suggested by Dr. Jones, that if a small ligature were tied so tight round an artery, as to divide its inner and middle coats, adhesion would take place, and the ligature might be removed before dressing the wound. This was found not to be so safe and efficacious as Dr. J. supposed, and the evil was remedied in practice by allowing the ligature to remain some days, only observing, in dressing the wound, to leave one extremity out. It is needless to detail the accidents which have resulted from this common and almost necessary procedure.

Some years ago, Dr. Physick proposed the use of animal substances for ligatures, supposing that they might then be safely left around the artery, and that they would be taken care of by the absorbents. This practice has never been very extensively adopted, and seems, indeed, less likely to be so than the subsequent proposal of Dr. P., that leaden cords should be used for securing arteries. That observing and distinguished practitioner was led to this proposal by the fact, that shot, bullets, &c., will remain years embedded in the flesh, without producing any considerable pain or inconvenience.

The experiments of Dr. Levert, twenty-one in number, were made on dogs, to try the effect of *metallic* substances used for tying arteries. Lead, silver, gold, and platinum, were all used, and uniformly with the same result. The wound healed over them; no symptoms of irritation ensued; and in about a week the

part was examined : the arteries were found impervious ; the ligatures quietly resting in their places ; and no mark of surrounding irritation was discoverable. Dr. L. then made use of a stran of silk, waxed, in several cases ; but these ligatures were found surrounded with pus.

APPEARANCE OF THE BLOOD AN UNCERTAIN GUIDE FOR THE PROPRIETY OF REPEATED VENESECTION.

FROM some observations recently made by Dr. Davy, it seems that the appearance of the blood drawn in inflammation, affords much more limited means for judging as to the propriety of repeating the operation, than has generally been supposed. In many instances of severe inflammation, both of the common cellular substance and of the serous and mucous membranes, the blood, when drawn, was examined by him, and found neither buffed nor cupped, and in fact to possess none of those qualities which are usually supposed to accompany this state. Any in-

ference, therefore, which may be derived from this circumstance in regard to subsequent practice, must necessarily be extremely uncertain ; and although it may be highly proper and necessary for the practitioner to examine the blood in all cases in which venesection has been performed, yet he will do wisely to trust in part only to the appearances which it presents, and to form his judgment principally from the comparative state of the patient himself, before and after the operation. We are disposed to think that the opinions of physicians on this subject at the present day, accord, for the most part, with these views of Dr. D. Few, probably, would withhold a second bleeding in pleurisy, where the pulse seemed to demand it, merely because the blood had not presented the requisite appearance ; and as few would continue to urge it in cases where relief had already been obtained, with no better reason than the presence of these morbid phænomena, if such they may be called.

BOSTON, TUESDAY, JUNE 9, 1829.

SELF-SUPPORTING DISPENSARIES.

INSTITUTIONS for affording medical advice and medicine to the poor, exist, in greater or less numbers, in almost every large town or city in the civilized world. No species of charity is less liable to abuse, than such as offers to the indigent that which necessity alone compels them to use, and which cannot be exchanged for cash or credit. Superabundance of food or apparel may be

bartered away for ardent spirits ; fuel may be sold for money to purchase it ; and articles of furniture, which the pleadings of penury may have drawn from the benevolent, may be, and all these *are frequently* exchanged for the means of indulging vicious propensities ; but a prescribed medicine will never be bought but by the individual for whom it was directed, and medical advice is good for nothing to the nearest neighbor

of the invalid. Whilst, therefore, societies for supplying the various wants of the healthy poor, have too often proved the means of diminishing their inducements to industry and sobriety, no possible evil ever has or can come of such as extend the hand of charity only where that of industry is paralyzed.

Institutions of such acknowledged excellence must be permanent, and their number and extent progressively increasing. It becomes an object, therefore, of no small importance, to ascertain the wisest and most economical mode of conducting them. The plans on which they are conducted differ greatly in different cities. In some, the whole expense is paid by subscription; in others, the extent of the charity is limited by the revenue of moderate funds; and in others again, as in our own city, the first of these means comes in aid of the last. In some places, any respectable physician is allowed to order medicine on account of the institution; in others, a few are specially elected to attend the dispensary poor;—these few are, in some cities, young men, to whom a personal attendance on the practice is an object; and in others, older practitioners, who act chiefly through their students. These physicians are paid for their attendance out of the funds of some dispensaries, whilst the directors of others consider the manifest advantages of the practice, and the honor of the station, as sufficient compensation; in some places a building is supported at considerable expense, containing rooms for receiving patients, prescribing for

them, and dispensing medicines; whilst in others, the sick are visited at their own houses, and the prescriptions made up by a general retailing apothecary. Of these latter, some pay the apothecary according to the cost of the medicine prescribed, and others allow a dollar or less per annum for each patient, the apothecary taking his chance to be a gainer or loser on the whole. These and other differences exist in different establishments.

It is remote from our design, as beyond our limits, to examine the pros and cons in each case, and give reasons for believing any one plan superior to all others. Every one will assent, however, to the proposition, that economy is an object of importance in the conduct of dispensaries; and in this country we shall receive as ready and universal an assent to the opinion, that it is a great desideratum that aid should be extended to the sick poor in such manner, as to weaken as little as possible that spirit of independence and pride of self-support, which distinguish the American poor from the same class in other countries. The first object is, and the last ought to be, held constantly in view, in arranging the internal concerns of all charities. This sentiment keeps many a hard laborer from the haunts of vice, and the no less destructive indulgence of a disposition to idleness;—it excites among the neighboring poor sympathy for each other, and leads to an interchange among them of acts of kindness, which keep alive some of the highest and best feelings of the heart. It is this sen-

timent which makes it necessary for the benevolent to seek out the distressed, and offer, as an unsolicited gift, that which, in other countries, is asked for with unblushing effrontery, or extorted by importunity or imposition;—it is this, in fine, which does more than civil legislation to prevent our streets from being thronged, and our dwellings beset by miserable objects of penury and distortion.

We have dwelt on this topic because it is apt to be overlooked, and because the plan we have to bring before the public appears to us an admirable one, inasmuch as it coincides with the view we have thus briefly presented. The plan to which we allude, was suggested by Mr. Smith, of Southam, Eng. Its peculiarity is the proposal, that *those whose families receive attendance from the Dispensary, shall themselves become subscribers at a very moderate rate.*

The question arises on the feasibility of this plan for what Mr. Smith calls “self-supporting Dispensaries.” That all the expenses of even the most economical institution could be paid in this way, we very much doubt; but if such a feature were engrafted on our present plans, and the sums thus collected considered accessory to those otherwise obtained, little doubt can exist of its perfect feasibility. The first or lowest grade of poor are sent, when sick, to Alms-houses; it is the second and third grades who are dependent on Dispensaries in periods of ill health; and there are few among these who would not be able to pay half a dol-

lar a year, for the right of receiving medicine and medical attendance for themselves and families in case of sickness.

In this city, the number of patients who received gratuitous attendance and medicines at the Dispensary the last year, was 1600, more or less, and the expense to the Institution was about as many dollars. If we suppose that these patients belonged, on an average, two to the same family, about 800 families have received aid from the Institution. It is probable not more than half the families who habitually depend on this charity, have occasion to ask its aid in any single year, particularly one of such remarkable health as the last. If this be true, about 1600 *families* look to our Dispensary for relief in case of sickness. If now these families should become subscribers to the institution at half a dollar a year, the income from this source would be about 800 dollars, one half the whole expenses. If one quarter part of the expenses could be actually collected from the poor themselves, the proposed plan would be well worth a trial. At Atherstone, where it has already been tried, it has succeeded perfectly. No less than 765 patients have been admitted, and money enough collected to defray all expenses and leave a surplus of 80 pounds sterling, to be divided among the medical officers.

In our own city, independently of the absolute saving of expense to the Institution, (which we regret to learn is deficient in means,) it might enable the Managers to pay their Physicians, among whom any surplus

funds should always, from policy as well as in justice, be distributed. It is true that without the temptation of pecuniary reward, the medical offices are sought with avidity by the most talented and best educated young men in the profession; but this is in truth a strong reason why they should be paid for their services, if the Institution can afford it. That a young man has ability and zeal in his pursuits, has been industrious, and has spent two or three thousand dollars more than his neighbor in getting the best professional education, is but a poor reason why he should work for nothing; these things give him rather a higher claim for compensation. But, putting the interests of the Physicians and of the Institution entirely out of the question, the *principle* is admirable, and the moral advantage of such a plan to the poor themselves, entitles it to our serious consideration. It is enough that it would tend to cherish that feeling of self-dependence which we have before alluded to as one of the noblest sentiments of our nature, and which outright charity must tend in a measure to subdue.

THE NEW MEDICINES.

VIII.—*Quinine*.—Quinine is the effective principle in Cinchona bark. It is white and uncrystallizable, and its salts are pearl-colored. The preparation most used in medicine is the *Sulphate*, which has all the properties of Cinchona, and may be used on all occasions where that remedy would be proper. Its advantages over the bark in substance are, the greater uniformity in its strength, and the

consequent advantage of regulating the dose with accuracy; the small volume and the more agreeable form in which it may be administered; and its better adaptation to a debilitated state of the stomach.

An overdose of this medicine produces great nervous agitation, with strong cerebral excitement. The *Syrup* is supposed by Magendie to exert some power over the scrofulous affections of children.—The price of Sulphate of Quinine is \$5 the ounce,—of the Tincture, 37 1-2 cts. the ounce.

Modes of prescribing Quinine.

1. *Sulphate of Quinine in pills.*
Dose, from 4 to 14 grains.
2. *Syrup of Quinine.*
Take of
Simple Syrup, 2 pounds,
Sulphate of Quinine, 64 grains.
Mix.
- 3.* *Wine of Quinine.*
Take of
Good Madeira wine, 1 quart,
Sulphate of Quinine, 12 grains.
Mix.
4. *Tincture of Quinine.*
Take of
Sulphate of Quinine, 6 grains,
Alcohol, at 34 deg., 1 ounce.
Mix.

LIFE OF DR. GOOD.

SINCE giving a biographical sketch of this distinguished individual, which was drawn after reading the London edition of Dr. Gregory's Memoirs, we have seen a reprint of this work by Messrs. CROCKER & BREWSTER, of this city. It forms a very handsome duodecimo, and differs from the original in the omission of the preface and several extracts from the

* The wine of quinine may be extemporaneously prepared, by adding two ounces of the tincture to a pint of wine.

writings of Dr. Good and others,—parts not important to the biography, and interesting to the English antiquary only. By these omissions, the book is offered in a form and at a price well suited to the wants of the American reader.

The first Section contains the memoirs of Dr. Good's life,—a life both eventful and useful, and replete with interesting and instructive lessons. The second Section consists of a review of the writings of Dr. G., and a general sketch of his intellectual character. The third presents us with his religious history, and is followed by the sermon occasioned by his death;—the whole constituting a work which will be esteemed a great accession to the medical literature of the age, and a valuable possession not only to the physician, but to the Christian scholar.—The Boston edition contains a lithographic portrait of Dr. Good, which is an exact copy of the original.

Amputation at the Hip-joint.—This operation was performed about two months ago at Edinburgh by Mr. Liston. *The operation was successful, but the patient died.* It is but justice to Mr. L. however to add, that the operation is reported to have been performed with great dexterity and skill, and that the parts were found diseased higher up than was anticipated.

Malpraxis in Midwifery.—A somewhat remarkable and novel question has recently agitated the medical faculty in France. Dr. Helie, of Chenu, in the department de l'Orne, was called to a lady in labor, and found, on examination, that both arms presented. After twenty-four hours of pain, mostly ineffectual, he

conceived the life of the mother to be in danger. For the last ten hours the child exhibited no evidence of life, and the arms, closely embraced by the os uteri, were swollen, livid, and in a state approaching to gangrene. Under these circumstances, he thought the only expedient for saving the life of the mother was to amputate the arms. Having tried in vain to turn the child, amputation was performed, and delivery easily effected. The child lived, and the wounds healed.

The parents prosecuted the Doctor for malpraxis. The question being referred to the Royal Academy of Medicine, was committed to MM. Desormeaux, Deneux, Gardien, Moreau, and Adelon. Their first report was decidedly against Dr. H. It produced much discussion, and was referred back to the same committee for reconsideration. The subsequent report was less severe, but still censured the practice. A final decision is not yet made by the Academy, but the probability is that it will be against Dr. Helie. The legal tribunal will be governed by the decision of the Academy.

Chimney-sweepers exempt from Ophthalmia.—The physician of the Dispensary at Bristol, Eng., states that of 11700 patients with complaints of the eye, no chimney sweeper has ever yet presented himself, though one would suppose ophthalmia a frequent consequence of that occupation. The Surgeon of the Eye Infirmary at the same place also states, that for twenty years he does not remember a case of ophthalmia in any of the sooty brotherhood.

Remarkable Superiority of amputating by one Incision through the Integuments and Muscles.—This great improvement in the mode of amputating, which was formerly recommended by Louis, and unaccountably abandoned, is practised

and highly recommended by all the present surgeons of the Hotel Dieu, M. Dupuytren, M. Breschet, and M. Sanson. In thighs removed by the two former, and an arm by the latter, no tourniquet was employed in either case. The limb was grasped by an assistant, and pressure made on the principal artery. A single incision cut through the skin and muscles down to the bone, and a retraction of the skin and muscles, not inserted in the bone, was effected to the extent of three inches. The first retraction having been completed, the muscles attached to the bone were cut through by a scalpel, on a level with the others, and the bone sawed as usual. The stumps in all were remarkably fine, and the extremity of the bone was more than sufficiently covered.

Extraordinary retention of the Urine.—Dr. George Gregory states an instance of entire retention of urine in a lady, 105 hours after delivery. Complaining of an uneasy sensation in the region of the bladder, a Surgeon was sent for, who introduced a catheter and drew off seven measured pints of high colored urine. The muscular fibres of the bladder appeared to be somewhat paralyzed after (probably in consequence of distention), but no very serious injury followed this extraordinary occurrence. Dr. Gregory asks the question "what is the greatest quantity of urine which the female bladder has ever been known to contain?"

Case in which two ounces of concentrated Sulphuric Acid were swallowed.—A case of this description recently occurred at Malta. Two ounces of carbonate of magnesia were soon got down the throat, not, however, without great difficulty, and the patient was bled. Twelve hours after taking the acid the insensibility and coldness of the whole body banished hope of relief. Leeches were however applied to the epigastric

region, followed by a large blister to the same part, large doses of castor oil, and copious evacuation. These remedies were persevered in several days, and tartar emetic ointment rubbed on the throat, so as to produce an eruption. The symptoms unexpectedly yielded to this course, and the girl recovered.

Medical Society of Connecticut.

—At the annual Convention of the President and Fellows of the Medical Society of Connecticut, held at Hartford the 13th and 14th inst., the following officers were elected for the present year:—His Honor, John S. Peters, M.D., *President*; William Buel, M.D., *Vice President*; Joseph Palmer, M.D., *Treasurer*; S. B. Woodward, M.D., *Secretary*.

Committee of Examination.—Silas Fuller, M.D., Thomas Miner, M.D., S. B. Woodward, M.D.

Committee of Nomination of Professors.—Eli Todd, M.D., Andrew Harris, M.D., Thomas Miner, M.D.

Committee of Nomination of Superintendent of the Retreat.—Hon. Thomas Hubbard, M.D., Eli Ives, M.D., His Honor, John S. Peters, M.D., William Buel, M.D., George Sumner, M.D.

Massachusetts Medical Society.—

A meeting of this Society was held on Wednesday last, an account of which is necessarily postponed till next week.

PRESIDENT ALLEN'S Address, occasioned by the death of Dr. Nathan Smith, is acknowledged, and will receive early attention.

REPORT OF DEATHS IN BOSTON,

The week ending May 29, at noon.

Of brain fever, 1—consumption, 4—convulsions, 1—dropsy in the head, 2—dropsy in the chest, 1—drowned, 1—epilepsy, 4—fever, 1—intemperance, 2—lung fever, 1—old age, 2—sudden, 1. Males, 10—females, 8. Stillborn, 1. Total, 19.

DIED—At Dumfries, Pa., Dr. JOHN GIFFORD, an eminent Physician and Surgeon.

ADVERTISEMENTS.

CARTER & HENDEE,

Publishers, Booksellers, and Stationers,

CORNER OF WASHINGTON AND SCHOOL
STREETS,

KEEP constantly on hand, a large collection of English, French, Spanish and Italian BOOKS.

A complete assortment of MEDICAL BOOKS, and a supply of the best STATIONARY.

They have also for sale, Gardner's Twelve Inch GLOBES, and a supply of the most approved SCHOOL BOOKS.

All of which they will sell, at wholesale and retail, on the most liberal terms.

DENTAL SURGERY.

THIS day received by CARTER & HENDEE, No. 135, Washington Street,—A SYSTEM OF DENTAL SURGERY. In three parts.

1. Dental Surgery as a Science.
2. Operative Dental Surgery.
3. Pharmacy connected with Dental Surgery.

By SAMUEL SHELDON FITCH, M.D., Surgeon Dentist. *Denticum curam habeto ut bene digeras et diu vivas; laxatis dentibus laxantur et chylaceos officinæ; hinc mille malorum occasiones.*—Baglivi XIII. March 17.

ep6w

CASEY'S APPARATUS FOR THE CURE OF DISTORTED SPINE.

THE Proprietor of the Dormant Balance for the cure of Distorted Spine, gives notice, that he has established an agency in this city, for the convenience of those who may wish to avail themselves of this invention. Physicians having under their care the subjects of this disease, or patients themselves, may have an opportunity of inspecting the apparatus, and examining the testimonials of its efficacy, at Mr. Charles White's, corner of Winter Street. It is recommended, however, that all patients availing themselves of this invention, should do it by the advice, and under the superintendence, of their own physicians, as it is only by medical opinion that the proper subjects of the machine can be deter-

mined, or the other proper measures to be made use of in conjunction with it, can be pointed out. The Proprietor expressly disclaims the idea that a cure is to be effected, in any case, by mechanical means alone. This machine has received the approbation of many of the most eminent medical men in this city and New-York. Upon application to the agent, references will be given, and written testimonials exhibited.

All letters, post-paid, addressed to J. Lincoln, No. 27, Fayette Street, will be attended to.

Boston, Feb. 6, 1829.

NEW BOOKS FOR CHILDREN.

JUST published by COTTONS & BARNARD, 184 Washington Street.

The Waning Moon, by the author of the Rising Sun; The White Palfrey, by the author of Thomas Mansfield; The Kind and Happy Child, by the author of the White Palfrey, &c.

FRENCH WATER COLORS.

COTTONS & BARNARD, 184 Washington Street, have for sale, the following Water Colors, of an excellent quality, manufactured by P. C. Lamberlye, (France,) viz: Bistre, Raw Cassel, Burnt Umber, Raw Umber, Egyptian Brown, Vandyke Brown, Brown Pink, Seppia, Violet Lake, Carmined Lake, Sanders Blue, Prussian Blue, Mineral Blue, Indigo, Yellow Ochre, Yellow Mineral, Gamboge, Yellow Orpiment, Yellow Lake, Naples Yellow, Burnt Italian Earth, Burnt Sienna, Raw Sienna, Italian Earth, Crocus Martial, Green Lake, Sanders Green, Sap Green, Mineral Green, Prussian Green, Vermillion, Saturnine Red, Indian Red, Red Ochre, Red Orpiment, Flake White.

Also—a great variety of Newman's, Ackerman's, Reeves's and Osborne's Colors, in boxes and separate cakes.

SUNDAY SCHOOL CONVERSATIONS.

COTTONS & BARNARD, 184 Washington Street, have just published, Sunday School Conversations on some of the interesting subjects recorded in the New Testament. By the author of the Factory Girl, The Badge, James Talbot, &c.

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

THE BOSTON
MEDICAL AND SURGICAL JOURNAL.

Vol. II.]

TUESDAY, JUNE 16, 1829.

[No. 18.]

I.

REDUCTION OF HERNIA.

*From a Clinical Lecture by M.
Dupuytren.*

THE means of reducing hernia are various, and more or less efficient. The application of the hand, or taxis, is the most methodic and advantageous; it is modified according to the kind of hernia, its size, and other circumstances. Among the empirical methods adopted for the same purpose, there is one which approaches to this. The patient being laid upon his back, the feet are raised as high as possible, leaving the head and shoulders on the ground; the weight of the viscera in the abdomen acts upon the portion of bowel in the hernia, dragging it towards the interior, sometimes effecting the reduction. Here there is a mechanical action, not from without, inwards, as in the taxis, but in an opposite direction. Various topical applications are made to strangulated herniæ; some of these, as cold water, &c., are intended to diminish the volume of the parts in the sac. The action of cold produces several effects; it increases the tone of muscular parts, often, indeed, giving rise to sudden contractions, capable of overcoming the obstacle which has been opposed to the passage of the intestinal contents; so that stran-

gulated herniæ are sometimes speedily reduced by the affusion of very cold water. Ice, applied with perseverance, condenses the liquids and gas, and thus, also, facilitates their return into the abdomen. Other local applications appear intended to act upon the secretion of the mucous membrane of the part; such as cataplasms of senna, gratiola, &c. These are asserted to have good effects in the cases of elderly persons, in whom it is well known that the slowness of the peristaltic motion more frequently occasions overloading than actual strangulation,—a circumstance which must be kept in mind, that we may not trust too much to these measures where the patient is young, and the case one of genuine incarceration. As experience has demonstrated that the manner in which purgatives act is by facilitating the expulsion of the contents of the hernia, it may be asked why more active substances are not employed; for example, the croton oil?

The nausea and vomiting, so frequently present in such cases, does not always contraindicate the use of purgatives, as they sometimes succeed when more methodical treatment has failed. With regard to enemata, they ought never to be omitted unless there be evident symptoms of inflammation.

Some local applications are intended to produce relaxation at the point of strangulation; thus the extract of belladonna has recently appeared to produce good effects in the hands of M. St. Amand.

The rapid sinking of the patient frequently produces the relaxation favorable to the reduction of the hernia. This is effected by means of copious general bleeding, the application of leeches to the tumor, and long continued immersion in a warm bath,—means which, in general, are not employed with sufficient energy. These observations show that the operation is not the only resource in such cases; but it is a very important point that the operation be not delayed after its necessity has become obvious. A consideration of all the circumstances can alone lead to a satisfactory conclusion. The following case will show that at the Hôtel Dieu other means are tried before operating.

A woman, aged 50, had labored under crural hernia of the right side for more than ten years. It frequently became obstructed; but repose, the horizontal posture, and the taxis, had always sufficed to restore it. On the 24th of February, after some efforts to carry a load, the tumor suddenly became the size of a small egg, and symptoms of strangulation manifested themselves with violence. The usual methods to produce reduction were adopted without avail. Next day she was brought to the hospital, when she was bled from the arm, the tumor covered with leeches, and she was put into a warm bath, where she remained nearly two hours. At the end of this time, faintness came on, when the "interne" took the opportunity of

applying the taxis; by which means he entirely reduced the hernia.

M. Dupuytren stated that at the Hôtel Dieu they succeeded in reducing only one-third of the herniæ brought to them, while in civil life at least two-thirds were reduced. Among the causes of this difference, the principal is that those cases in which reduction has already been attempted, without success, are generally sent to the hospital. In the better ranks of life the causes of strangulation are much less frequent, and the patients much more ready to call in assistance. If we are in haste to operate on such individuals, some of those who die might possibly be saved: but at the same time we run the risk of practising an operation which is not called for. Besides, there is never more than twelve hours between each visit; and it is generally in this interval that reduction takes place. Prudence, therefore, requires that we ought not to be in too great haste; and experience proves that gangrene of the intestine neither comes on so easily nor so soon as is generally said. We are now less imposed upon by the brown color which the organ assumes in consequence of the constriction; and knuckles of intestine are now replaced in the abdomen, the appearance of which would formerly have been regarded as indicating the necessity of establishing an artificial anus. It is necessary, then, to multiply the means of reduction; to persevere as long as possible in their employment, and only to despair of their success when the continuance of the local mischief, and the increase of the general symptoms, give rise to well-grounded apprehensions.

La Clinique.

II.

Observations relating to the Function of Digestion.

By A. P. W. PHILIP, M.D. F.R.S. &c.

THE author, referring to his former papers published in the Philosophical Transactions, concludes that digestion requires for its due performance both a proper supply of gastric secretion, and a certain muscular action in the stomach, the latter circumstance being needful for the expulsion of that portion of food which has been acted upon by the gastric juice. Nervous power is necessary for secretion; but the muscular action of the stomach being excited by the mechanical stimulus of the contents of that organ, is independent of the nervous power. It had already been shown by the author, that after the removal of a portion of the eighth pair of nerves, the galvanic influence directed through these nerves will restore the secretion of gastric juice. But Messrs. Breschet and H. Milne Edwards have lately endeavored to prove that the same effect results, also, from mechanical irritation of the lower portions of the divided nerves. The author points out several circumstances which appear to have been overlooked by those gentlemen, and which he thinks invalidate the conclusions they have deduced from their experiments. He states that a certain quantity of digested food will always be found in the stomach of the animal for five or six hours after the operation, and even after the lapse of ten or twelve hours, from its being less completely changed, and therefore expelled more slowly than in the natural state. The paper concluded with the recital of experiments made

for the author by Mr. Cutler, in which the contents of the stomach of a rabbit, whose eighth pair of nerves, after excision, had been kept mechanically irritated, were compared with those of another rabbit, in which the nerves had not been irritated, and a third which had been left undisturbed. All those who witnessed the result of this experiment, among whom was Mr. Brodie, were convinced that the irritation of the nerves had no effect whatever in promoting the digestion of the food, neither did it at all contribute to relieve the difficulty of breathing consequent on the section of the nerves.

Phil. Magazine.

III.

OIL OF TURPENTINE.

Inquiries respecting the Efficacy of the Oil of Turpentine in the Treatment of Neuralgia, and particularly of Sciatica.

By M. MARTINET.

TURPENTINE was employed many years ago in the treatment of diseases of the nerves. It was used by Galen and Michael Doringius in the form of a plaster; Scultet exhibited it successfully in wounds of the nerves; and Bonnet had even the good fortune to cure a patient of neuralgia by the essential oil of turpentine: but Archibald first brought it into notice as a remedy for sciatica. Having informed Cheyne of the success with which he had employed it in this disease, the latter recommended it to Home, who afterwards published, in his "Experiments and Facts," seven cases in confirmation of the practice. Since that period, turpentine has been employed in the above-men-

tioned diseases by many physicians of different countries ; by Helst, Thilenius, and Lentin, in Germany, and by Recamier, De Larroque, Dufour, and Husson, in France.

M. Martinet affirms that little benefit is to be expected from the employment of the oil of turpentine, without due attention to the mode of administering it. It has been exhibited in various proportions, and in very different ways, but he decidedly prefers giving it internally, and in small doses of twenty drops, three times daily, in order that its absorption may be the more gradually but thoroughly effected. In larger doses it is liable to occasion diarrhœa, by which its peculiar properties are rendered unavailing. The oil of turpentine, when thus given in scruple doses, and in some proper vehicle, such as honey, syrup, or, what is still better, in magnesia, by which its acrid taste is more completely disguised, produces a strong sensation of heat in the stomach and whole intestinal tube, as well as in the diseased nerve and limb ; and sometimes it even occasions a general sweat. In certain individuals it causes a slight colic or a mild diarrhœa, and, more rarely, either a dysuria or an increased flow of urine. But when a drachm of the medicine is taken instead of a scruple, intense colic, diarrhœa, and even vomiting, supervene ; yet these formidable signs of irritation, both of the digestive and the urinary organs, generally disappear as soon as the medicine is intermitted. In patients whose stomach and bowels are irritable, a small quantity of opium is found a useful addition to the turpentine, by moderating its

stimulating effects on the mucous membrane of those parts.

When the oil of turpentine is exhibited in the manner and quantity just described, it would seem to be particularly powerful in the removal of sciatica ; yet, as M. Martinet suggests, this opinion may have arisen from the greater frequency of this complaint. Be this as it may, its efficacy is also remarkable for curing other species of neuralgia which affect the extremities.

When we attempt to deduce from the phenomena which follow the exhibition of the oil, the mode of its operation, and the cause of its being efficacious, we cannot refer the latter either to its purgative, its diuretic, or its sudorific effects ; since this augmentation of the different secretions is neither regular nor constant in its occurrence, and never bears any proportion to the benefit derived by the patient. Besides, we daily see patients who are purged, sweated, &c., much more abundantly by other medicines, without deriving the least benefit ; and it was this reflection which led Home to attribute to the oil of turpentine a specific influence over sciatica.

Some physicians have supposed that this medicine produces its sanitary effects on the nervous system by causing a revulsion from the brain to the stomach and skin ; but M. Martinet thinks he has clearly shown in his Essay that these effects are almost always missing, even in cases of recovery ; and he, therefore, will not admit this explanation to be correct. Others, on the contrary, attribute its efficacy to a revulsion on the nerves, which is sympathetic with that on the stomach.

M. Martinet, however, conceives that the stimulation which this oil communicates to the mucous membrane of the stomach, is equally produced in the nerves affected, and to a greater or less degree, in proportion as they are more or less morbidly affected; which, in his opinion, serves to explain the fact that this medicine is more efficacious in severe and obstinate, than in mild and recent cases of neuralgia. The new modification which is thus effected in the state of the nerve would seem, therefore, to dispose it to resume its natural action, that of health. The heat which the greater proportion of those persons, who are either cured or relieved, feel in the affected parts, seems to confirm the explanation adopted.

As to the question whether the turpentine acts directly on the nerves by absorption, or exerts its influence over them indirectly and sympathetically, through the medium of the stomach, we are most inclined to adopt the first of these hypotheses; and we found our opinion on the fact that this oil is nearly always observed to fail in curing those cases of neuralgia where it produces violent purging; which is also true in respect to all other substances employed in this disease, and whose only effect is to irritate the mucous membrane of the stomach and intestines. Its action on the urinary organs would appear to be seldom useful, but, on the contrary, often injurious.

As an external remedy, turpentine seems most beneficial when rubbed in by the hand; it thus produces redness of the surface, without exciting a sensation of heat along the course of the nerve.

But the strong and penetrating odor of the oil, when exhibited in this manner, not unfrequently occasions headach.

This medicine is of approved efficacy in all cases of neuralgia affecting the extremities, and particularly in sciatica, when this disease is simple in its character, and evinces no sign that the nerve is either altered in its structure, in a state of inflammation, or compressed by the formation of a contiguous tumor. M. Martinet affirms that, whether the complaint be recent or otherwise, the chance of cure by this remedy is greatest, *cæteris paribus*, when the pain is so intense as to indicate distinctly the course of the nerve, and so obstinate in its nature as to yield to no other treatment whatever. But it is necessary to pay attention to the state of the stomach; for, in case it should not be perfectly sound, the medicine must be immediately intermitted.

Twelve days usually suffice for curing neuralgia when it affects the extremities, and, more commonly, only half that time; and the exhibition of this remedy, during a longer period, would, therefore, be injudicious, and detrimental to the organs of digestion.

That the reader may be enabled to judge for himself respecting the correctness of the doctrines above advanced, we shall terminate the present paper by giving a brief analysis of the various observations which M. Martinet has included in his Essay.

Of seventy individuals, affected chiefly with sciatica, and other kinds of neuralgia of the extremities, fifty-eight were cured, viz., —three by rubbing in the oil, and all the others by taking it internally; ten, (two of whom previ-

ously intermitted the medicine,) obtained only temporary relief from its use; and five received no benefit. Of these five, two had diseases of the joints, of which they died a few months afterwards.

Of these seventy-one cases of neuralgia, (for one of the patients had two affections of the kind,) forty were acute, and thirty-one chronic. Of the forty acute cases, thirty-four were cured, five relieved, and only one continued in the same state. Of the thirty-one chronic cases, twenty-four were cured, three relieved, and four received no amendment.

Again, of the seventy-one cases of neuralgia, thirty-three had resisted the effects of divers remedies; and of these thirty-three, twenty-five were completely cured, four were only relieved, and four more remained uninfluenced by the medicine.

Of the fifty-eight cases of neuralgia which were cured by the oil of turpentine, thirty-four were cured in less than ten days; twenty-two in less than twelve days; and three within the space of from twenty-eight to forty-five days.

Of the same fifty-eight cases which were cured, forty-eight were cases of sciatica, two of which were cured by frictions; three were cases of crural, four of brachial, and three of facial, neuralgia.

Of the ten patients which were only relieved, two were affected with sciatica, and their treatment was intermitted on the second day.

Finally, of the five in which the treatment entirely failed, there were four cases of sciatica, and one of crural neuralgia. Two of the four died of disease of the hip-joint.

In twenty-one instances it is recorded that a sensation of heat was experienced along the course of the nerve, and in the affected limb; and of these, nineteen were perfectly cured; the other two, having intermitted the treatment, were only relieved.

In eighteen cases a sensation of heat was felt in the intestines, and especially in the stomach. Three were seized with vomiting, in two of whom it was occasioned by a too powerful dose of the oil, namely, two drachms.

Three suffered from diarrhœa and severe colics; and in one instance the inside of the patient's mouth was affected with vesicles.

In five cases the urine was more abundant than natural, and four were attacked with strangury. Two of these had taken too large a dose.

In ten patients there was sweating over the whole body, and in two instances it was confined to the member affected.

And, lastly, one woman, affected with neuralgia, was, as it were, intoxicated by the turpentine; and two other patients experienced the sensation of itching throughout the whole body.

Lond. Med. & Phys. Journ.

IV.

CORPUSCLES IN THE EYE.

Remarkable Case of Corpuscles freely moving both in the Vitreous Humor and in the Posterior Chamber of the Eye, and causing the imaginary Perception of Objects.

ON the 17th of August, M. Galy, Surgeon of the Hospital of Périgueux, consulted M. Parfait-Landrau on the case of M. Audebert, formerly a magistrate, then in his

seventieth year, and of a bilio-sanguineous temperament. He was subject to wandering pains, resembling those of rheumatism, and had for several years experienced an alteration in regard to the sight of his right eye, of which he feared the consequences, although the affection had remained a long while stationary. He sees muscæ volitantes, black points, and other images, of various shapes, &c., which have been so well described by M. Demours, in a memoir which he recently read to the Academy.

After an attentive examination of the patient's pupils, which were rather contracted, M. Parfait-Landrau thought that he could perceive certain corpuscles moving apparently at the bottom of the posterior chamber of the right eye, and shining with a sort of phosphoric brilliancy. As these phenomena were new, and of a most interesting description, he did not hastily admit the evidence of his senses, but doubted the correctness of first thoughts; and, on the supposition that what appeared to be in the eye might be really nothing more than the reflection of external objects, (although they were not apparent in the sound eye,) he proposed to the patient and his medical attendant that the pupil should be dilated by the extract of belladonna. The pupil was, by this means, thoroughly dilated, and MM. Parfait-Landrau and Galy distinctly perceived a considerable number of corpuscles, which in general resembled finely powdered liquorice, and a few had the brilliancy of fine gold dust. These particles moved to and fro throughout the whole extent of the posterior chamber: when the

eye became fixed, they descended; when it moved, they were again agitated as before; and thus on in succession.

M. Parfait-Landrau is firmly of opinion that these substances were in the vitreous humor, as they were numerous, and sufficiently near to be distinctly seen with the naked eye, although he employed a magnifying glass in his examination of them.

This new discovery of an evident and physical cause for that which the ancients called *perpetual imagination*, which the moderns have since attributed to the state of the internal membranes of the eye, to varicose veins in its humors or membranes, is the more remarkable, as no similar phenomenon is described in any work professing to treat of these matters. M. Demours thinks that one of the causes of these muscæ volitantes is due to the humor of Morgagni, in which he supposes there are small portions which, without losing their transparency, become more dense, ponderous, and refractive. Other practitioners, equally respectable, consider them to be produced by the aqueous humor; and our author allows that they cannot, in every case, result from the phenomenon which is the subject of the present paper. He therefore does not attempt to refute the various opinions to which they have given rise. He agrees with M. Demours in stating that these corpuscula volitantia rise with the movement of the eye, but immediately afterwards fall to its most dependent part, whatever may be the precise position of the eye itself. This curious fact may be readily explained in the present patient, but certainly it is not

quite so intelligible in those cases where it is attributed to the development of varicose veins in the humors or internal membranes of the eye. It is alike inexplicable on the supposition that it is the effect of partial paralysis of the retina.

In order that these corpuscles might move about in the vitreous humor, the hyaloid membrane, which forms its cells, must be first destroyed,—the natural consequence of which is a considerable reduction in the density of that humor; and it is well known that this alteration may exist without preventing the other parts of the eye from performing their respective functions. For there is scarcely an oculist in the habit of operating for cataract by extraction of the lens, who has not found, in some patients, the vitreous almost as fluid as the aqueous humor, without preventing the success of such operations. And thus we see that the crystalline humor may, without evident cause, entirely dissolve within its membranous sac, and occasion no alteration in other parts of the eye.

That, in the case of M. Audebert, these corpuscles, which appear to move in the vitreous humor, are not contained in its cells, and do not owe their movement to the undulation of this humor, (if it should be deemed capable of undulation,) is proved by the fact that, when the eye moves, they are seen very distinctly rising from the bottom, and traversing the whole posterior chamber. Again, as soon as the eye is stationary, they are seen descending to their former situation; upon which the eye becomes clear, and the patient no longer perceives the *muscæ volitantes*.

This is certainly a singular phenomenon; but it might, perhaps, have been occasionally observed, if the pupils had been always artificially dilated in the examination of similar cases.

M. Audebert reads with the affected eye, and feels no pain in it; the pupil daily contracts and dilates, and all the parts of the eye, the vitreous humor excepted, present no morbid appearances.

Four days after the first investigation, the eye was again examined, in the presence of MM. Galey and Renand, surgeons, and of Dr. Vidal, member of the medical jury of the department, and head physician of the hospital,—all of whom testify to the truth of the above statement.—*Ib.*

V.

Treatment of Purpura Hæmorrhagica.

MR. E. MOORE, of Islington, has sent us some observations on the treatment of purpura hæmorrhagica, in which he expresses his opinion of the injurious effects of calomel in that disease. "In every case of my own and my friends," says Mr. M., "in which that medicine has been exhibited, the symptoms have put on the same appearances, and been followed by the same results, while those cases which were treated at first with warm baths, saline purgatives, and moderate diet, invariably recovered. In Mr. Head's case, related in No. 292, bloody evacuations, rapid sinking of the pulse, and prostration of strength, almost immediately followed the exhibition of calomel, for which the *post-mortem* examination does not account."—*Lancet*.

 SKETCHES OF PERIODICAL LITERATURE.

ENDOSMOSE AND EXOSMOSE.

THE researches of M. Dutrochet, a distinguished physiologist in Paris, have led to the discovery of a new principle in physics, the modifications of which have received the above designations, and in virtue of which is produced "the reciprocal transmission, through certain membranes, of fluids which are in contact with their opposite surfaces, and which differ from one another in certain physical conditions." An account of some of the experiments, by which the existence of this new principle was ascertained, will render the subject intelligible to our readers.

When the *cæcum* of a chicken was half filled with milk, tied, and then immersed in rain water, it was found to become gradually fuller, and at length very turgid, increasing, in thirty-six hours, from 196 to 313 grains in weight. When a dense fluid was substituted for the milk, such as albumen, or gum arabic in solution, the same phenomenon occurred to a greater extent, the turgescence increasing more rapidly and becoming more considerable; for in eight hours and a half the weight of the *cæcum* and its contents was increased from 58 to 130 grains. This transmission by inward impulse, or *endosmose*, exists to a certain, though less degree, when the *cæcum* is empty. It occurred always when the contained fluid was denser than that surrounding it. When the reverse was the case; when, for instance,

the *cæcum* was filled with water and immersed in the above *active* fluids, as milk or albumen, the water passed outwards through the membrane. In like manner, a weak solution of gum arabic passed outwards toward a stronger. To this principle is applied the name of *exosmose*, or impulse outwards.

But, though the phenomena above described indicate the two opposite relations in the fluids in which they occur, it must not be inferred that each principle is insulated and independent of the other; on the contrary, it is proved that they always co-exist, and that the results to which they give rise are the effects of the preponderance of one over the other, and not of the exclusive action of either. When an organic fluid, such as syrup, is enclosed in a membranous bag, and the bag is immersed in pure water, the water enters the bag; but, at the same time, a part of the syrup passes out into the water, as may be ascertained by the taste. *Endosmose* and *exosmose* are, therefore, always reciprocal; and the former or latter predominates, according as the contained fluid is lighter or denser than the other.

By substituting for the bag mentioned above an inverted funnel, covered with a membranous substance, and connected above with a tube of a fine bore, M. Dutrochet succeeded in forming a convenient endosmometer, by which the action of various fluids on each other might be ascertained. It is found that besides the

substances which produce endosmose in virtue of their density, others have the same power by means of their chemical nature. Nitric, acetic, and still more, muriatic acid; potass, ammonia, and alcohol; sulphate and muriate of soda, are all excitors of endosmose. Two substances, sulphuric acid and sulphuretted hydrogen, are quite *inactive* in this respect.

All organized membranes are active in the sense of serving for the transmission of endosmose. Some inorganic membranes, also, partake of this quality; but all active substances whatever become inactive when they have been penetrated by inactive fluids.

As regards the explanation of the above phenomena, M. Dutochet advances the opinion that they are probably connected with electricity:—that in consequence of the application to the opposite surfaces of the same membrane of substances differing in chemical or physical properties, they acquire opposite electrical states:—and that their mutual transmission is the result of the effort made by this principle to regain its equilibrium. It is at least certain that the transmission of a homogeneous fluid from the positive to the negative pole of a galvanic apparatus, takes place through organized membranes generally, and through the same inorganized laminæ which are capable of being penetrated by endosmose; while those which do not permit the passage of the latter are equally impervious to the former.

The principle of endosmose, the existence and operation of which

are thus demonstrated, affords, according to M. Dutochet, the most plausible explanation for some facts in vegetable physiology, which have hitherto been involved in considerable obscurity, viz., the circulation of the sap in plants, the transpiration of leaves, and the peculiar movements exhibited in the sensitive plant and other curiosities of the vegetable kingdom. Many also of the phenomena of animal life, especially those which occur in inflammation, are referred by the author to the same source. A complete exposition of his views in regard to the production of these phenomena would carry us beyond the proposed limits of these remarks. But it will not be disputed that if a principle, as active in its operation as electricity, be generated in vegetable and animal structures by the presence of two fluids of different densities, separated by a membrane, such a principle must exert a powerful agency in the operations which are going on within these structures; and if phenomena occur capable of being resolved into the operation of this principle, and not clearly explainable in any other mode, it is certainly reasonable to refer them to this new modification of vital energy. For the rest we would refer the reader to M. Dutochet's own explanation of these facts, as given in his works, and to the comments on them published in the journals of the day.

FLOUR IN BURNS.

FROM various reports of cases in the foreign journals, it appears that the application of flour to the denuded surface produced by burns and scalds

is often attended with great relief, and productive of the happiest results; and has sometimes effected a cure when many of the more usual remedies had been employed to little purpose. This remedy acts by shielding the part from the influence of the external air, by checking the profuse discharge, and moreover, as is supposed by some, by the supply of that animal gluten which is essential to the process of incarnation. In many cases in which it was applied, the pain was at once relieved, and the process of healing went on with unusual rapidity. We have known this practice repeatedly tried in this city, with results equally favorable to its reputation. Two cases of this description, by Dr. Storer, will be found in the first volume of this Journal. The remark had previously been made by many persons who had treated ulcerated surfaces caused by burns, that the frequent removal of the dressings, and exposure of the parts to the external air, were productive of unnecessary pain to the patient, and retarded healing; and that such surfaces required a permanent protection. The present plan seems entirely in accordance with this principle. The effort of nature to protect the part by scabbing is seconded by the application, —no unnecessary disturbance is produced, and the sanative process goes on with the least possible interruption.

In order to secure the best effect from the use of the flour in these cases, it ought to be lightly dusted on the surface exposed, either by enclosing it in a bag of sufficiently

open texture to permit its transmission, or by using the common dredging box, in which the article is usually contained. The amount thus applied should be left on; as the discharge oozes through this layer, a second may be added, and thus the part be kept nearly dry.

Blistered surfaces, when they become extremely painful, and prove obstinate under the usual applications to heal them, are greatly relieved by this mode of treatment. Flour, or powdered starch, has been a long known and familiar remedy for frets or erosions of the skin, so common in children, from the friction between adjacent parts; and it forms, in these cases, the best as well as the simplest remedy.

DIABETES.

THIS complaint, which in general seems to bid defiance to all the efforts of art to arrest its progress, will yet, under favorable circumstances of age and constitution, assume a less formidable aspect, and yield with tolerable readiness to the use of remedies. We have before us three cases in which a cure was effected, and which we think possess sufficient interest to entitle them to our notice.

In the first case the patient, who was about forty-five years of age, had been affected by the disease for more than two months. Great thirst and dryness of the fauces were present; he drank about nine pints of liquid daily, and passed ten pints of urine. The treatment consisted in the regulation of his diet, the exhibition of small doses of opium, and the use of Labarraque's solution of

the chloride of soda, of which an ounce was directed to be taken every twenty-four hours. On the third day the quantity was increased to two ounces; but as this amount produced a sense of intoxication, it was again diminished. Great improvement was visible on the eighth day, which continued increasing. On the fourteenth day the solution was diminished to half an ounce daily. The patient gradually recovered, and on the fortieth day from commencing the treatment was dismissed cured.

The second case was of about six weeks' standing, and the quantity of urine passed in the twenty-four hours was twelve pints. It was cured by the use of animal food and opium.

The third case had continued for several months, and was longer in exhibiting symptoms of amendment than the other two. The treatment consisted in purges and sudorific medicine, and a strict adherence to animal diet, to the exclusion of vegetable food and of spirits. To this the disease, after some time, seemed to yield; but the occurrence of a relapse, after some slight irregularity, proved that the predisposition was not overcome; and it was not till two warnings of this sort had convinced the patient of the necessity of entire temperance, that he was induced to adopt such regular habits of living, as at length restored him to entire health and vigor.

In the first case the cure was attributed, by the practitioner, mainly to the use of the chloro-sodaic solution; but, in all of them great advantage seems to have been derived from a properly regulated diet, and particu-

larly from an absolute adherence to animal food. In truth, it is in this matter of diet, simple as it seems, that a great source of the difficulty is to be found. While the malady is still in its incipient stage, and the patient is not prevented from his usual occupation, it is difficult to persuade him to forego his accustomed indulgence; and by the time that he becomes sensible of his danger, and willing to make the required sacrifice, the golden opportunity may have passed, and his constitution have become too seriously impaired to admit of a cure. Independently of this, however, it probably happens, in the majority of cases, that the disease itself is grafted on a decayed and debilitated frame, thus being a consequence of that state which we have regarded as its most formidable effect; and in such it is to be feared that all modes of treatment will prove equally unavailing. In the cases above described, the previous health appears to have been tolerably good; and it is to this circumstance, we conceive, that the success of the treatment employed was in a great measure to be attributed.

RHEUMATISM OF TESTICLE.

It is not an uncommon occurrence to find severe inflammation of the testicle alternating with rheumatic affections of other parts. In a case of this kind, reported in the Medical and Surgical Journal, the disease first attacked the arms and then the legs, from which part it was suddenly transmitted to the left testicle, leaving the limbs free from pain. The

affection of the testicle was relieved by appropriate treatment, on which the ankles and forearms became affected. The patient was then put on the use of *vinum colchici*, with tepid lotions to the parts, and recovered in three days.

DIVISION OF THE TENDO ACHILLES.

A CASE is reported in the Medical Gazette in which this tendon was caused to reunite by keeping up a permanent extension of the foot. A bandage was secured firmly round

the leg, so as to cover the whole calf; a strap was buckled round the thigh, just above the knee, and another passed from the under part of this, down under the foot, and up in front, to be connected with the anterior part of the bandage. This apparatus was kept in place for fourteen days, when the tendon appearing to be reunited, it was allowed to be occasionally slackened. At the end of a month the patient was able to walk a considerable distance, without inconvenience.

BOSTON, TUESDAY, JUNE 16, 1829.

MASSACHUSETTS MEDICAL SOCIETY.

A MEETING of this Society was held on Wednesday, the 3d inst., when a variety of interesting and important subjects received the consideration of the members. Among them we would particularly designate some alterations in the Constitution, and the Report of the Committee on Anatomical Dissections.

It is to be regretted that this Committee have not been able to effect any change in the law respecting dissection. This is to be attributed to a degree of prejudice known to prevail in the community on this subject, and to the want of a clear understanding of it among the framers of the laws. In the course of the discussion, it appeared to be the opinion of every member that the increased difficulties of procuring subjects for dissection, (placing the interests of the profession entirely out of the question,) are pregnant with forebodings of the most solemn and me-

lancholy nature. On the one hand, the price paid for a body is becoming so great, that there is reason to fear it will soon offer an irresistible temptation to wretches hardened in crime, to perpetuate atrocities like those which have agitated, of late, the civilized world. The danger of this result of the present state of things, is most seriously to be apprehended, and calls imperiously on those to whom we look for the protection of our lives from human violence, for some seasonable interference.—If, on the other hand, the Faculty should consent to relinquish dissection, then, evils of a nature more extensive and scarcely less horrible, would be the *unavoidable* consequence. In order to perform any, even the simplest operation on the human body, in such manner as not to endanger life, a minute knowledge of the structure of the body is indispensable. This knowledge can only be obtained from the dead or living subject. If the former is with-

held, then a surgeon, if he operate at all, must first dissect the part to find out its structure—dissect the living body instead of the dead—or else operate in the dark, and, ninety-nine times in an hundred, destroy the life of his patient; if, again, few men would be found willing to assume such responsibility, the quantity of suffering and pain which would result from this extinction of the surgical art, would be still greater and more awful.

Considering these, and many other circumstances which we have no room to touch upon, it was voted, by request of the above Committee, to refer the whole subject to another and larger Committee, composed of members from different parts of the Commonwealth, who should endeavor to enlighten the minds of the people on this subject, and take such measures as they shall deem expedient to remedy existing difficulties, and avert the evils which, without legislative interference, this community may regard as hanging over it even at the present moment. This Committee was directed to report its doings to the Counsellors at their meeting in October next.

The alterations alluded to in the Constitution, were mostly connected with the financial concerns of the Society. It was voted, however, to petition the legislature so to alter the 4th Section of the additional act of incorporation, passed March 8th, 1803, as to dispense with that clause by which three years' practice is made a requisite for admission into the Society; and to confine the right of using the library to the *Fellows*.

At 1 o'clock the Secretary read

the Prize Dissertation, by Dr. Sweetser, on the subject of Intemperance, after which the members dined together at the Exchange.

The following gentlemen were elected Counsellors for the ensuing year:—

For Suffolk—Drs. William Ingalls, John Dixwell, James Jackson, Benj. Shurtleff, John C. Warren, John Randall, Geo. C. Shattuck, John B. Brown, Walter Channing, Jacob Bigelow, George Hayward, Enoch Hale, jr., Solomon D. Townsend, John Ware, Zabdiel B. Adams, David Osgood, Edward Reynolds.

For Essex—Drs. Benj. L. Oliver, James Gardner, Richard Hazeltine, Abel L. Pierson, Andrew Nichols, Thomas Manning, Samuel Johnson, Joseph Torrey, Joseph Kittredge, Jeremiah Spofford, Richard S. Spofford.

For Middlesex—Drs. Amos Bancroft, Calvin Thomas, Abiel Heywood, Rufus Wyman, Thomas Bucklin, John Walton, Abraham R. Thompson, Zadock Howe, John Hart, Wm. J. Walker.

For Worcester—Drs. Stephen Batchelder, jr., John Green, Daniel Thurber, Charles W. Wilder, Benj. F. Heywood, Amos Parker, Edward Flint, Gustavus D. Peck.

For Hampshire—Drs. Elihu Dwight, Joseph H. Flint, Joshua Frost, Alpheus F. Stone, Stephen W. Williams, Reuben Champion, jr.

For Berkshire—Drs. Henry H. Childs, Robert Worthington, Wm. H. Tyler, Charles Worthington, Royal Fowler, Benjamin Rodgers.

For Norfolk—Drs. Amos Holbrook, Nathaniel Miller, John Bartlett, Robert Thaxter, Samuel Bugbee, Jeremy Stimson, Ebenezer Alden.

For Plymouth—Drs. Nathan Hayward, Hector Orr, Cushing Otis, Andrew Mackie, Ezekiel Thaxter.

For Bristol—Drs. Benj. Billings, Alexander Reed.

For Barnstable—Drs. Joseph Samson, Aaron Cornish.

At a meeting of the Counsellors, held on Thursday, June 4th, the following gentlemen were elected officers, viz :—

James Jackson, M.D., President.
Amos Holbrook, M.D., Vice President.
John Dixwell, M.D., Cor. Secretary.
Geo. Hayward, M.D., Rec. Secretary.
Walter Channing, M.D., Treasurer.
Enoch Hale, jr., M.D., Librarian.

Censors.

For the 1st District, and for the Society—Drs. John Dixwell, Rufus Wyman, Walter Channing, Geo. Hayward, Enoch Hale, jr.

For the 2d District—Drs. John Green, Benj. F. Heywood, Edward Flint, Charles W. Wilder, Gustavus D. Peck.

For the 3d District—Drs. Elihu Dwight, Joseph H. Flint, Daniel Collins, Elisha Mather, Job Clark.

For the 4th District—Drs. Alfred Perry, Wm. H. Tyler, Lyndon A. Smith, Hubbard Bartlett, Orren Wright.

New-Hampshire Medical Society.

—At a meeting of the New-Hampshire Medical Society, June 2d, 1829, the following officers were chosen for the ensuing year, viz :—

Amos Twitchell, M.D., *President* ;
Daniel Adams, of Mont Vernon, *Vice President*.

Counsellors.—Drs. Joseph M. Harper, John Rogers, James A. Gregg, Alexander Boyd, Thomas Shannon, John McCrillis, Isaac Tewksbury, Israel Gale, Reuben D. Mussey, Daniel Oliver, Matthias Spalding, Daniel Adams.

Censors.—Drs. Isaac Colby, Elijah Colby, Luke How, Samuel Weber, Matthias Spalding, Daniel Adams, Jabez Dow, James Farrington, Isaac Tewksbury, Israel Gale, R. D. Mussey, Daniel Oliver.

Dr. Moses Long, *Secretary* ; Dr. Isaac Colby, *Treasurer* ; Dr. Samuel Morrill, *Librarian* ; Drs. Amos Twitchell and Isaac Colby, *Delegates to attend the Medical Examinations at*

Hanover ; Drs. John McCrillis and Enos Hoyt, *Orators*.

Lachrymal Calculus. By M. KRIMER.—A woman, in her thirty-second year, having been for nine months affected with fistula lachrymalis, applied to M. Krimer. By introducing a probe into the fistula, he discovered that the nasal duct was not ulcerated, but the lachrymal sac enclosed a hard substance, which he imagined to be an excretion of osseous matter. He vainly attempted to remove the obstruction by forcing a passage with a pointed probe. On endeavoring, however, to withdraw the instrument, he met with a resistance for which he was at a loss to account ; and, when at length he had extricated the probe, he was not a little surprised to find a calculus, of the size of a pea, adhering to its point. The nasal canal, having been explored, was found quite pervious, and was for a fortnight kept free, by the introduction of a bougie. Afterwards the wound was allowed to cicatrize.—*Graefe & Walther's Jour.*

Strangulated Hernia reduced by Fright.—A case of Hernia is related in the Journal of Rust, where, after several ineffectual attempts at reduction, an operation was proposed. The proposal produced great agitation in the patient, and spontaneous reduction instantly followed.

City Medical Officers.—The Common Council have reelected Dr. J. V. C. Smith, Resident Physician at Rainsford Island, and Drs. Welsh, Warren, Shurtleff, Hayward, and Randall, are chosen *Consulting Physicians*.

REPORT OF DEATHS IN BOSTON,

The week ending June 5, at noon.

Of canker, 1—consumption, 8—dropsy in the head, 1—inflammation in the lungs, 1—lung fever, 1—marasmus, 1—old age, 2—typhous fever, 1—scald, 1—unknown, 2. Males, 11—females, 8. Stillborn, 2. Total, 21.

DIED—In Virginia, Dr. Richard Frild.

ADVERTISEMENTS.

CARTER & HENDEE,

Publishers, Booksellers, and Stationers,

CORNER OF WASHINGTON AND SCHOOL
STREETS,

KEEP constantly on hand, a large collection of English, French, Spanish and Italian BOOKS.

A complete assortment of MEDICAL BOOKS, and a supply of the best STATIONARY.

They have also for sale, Gardner's Twelve Inch GLOBES, and a supply of the most approved SCHOOL BOOKS.

All of which they will sell, at wholesale and retail, on the most liberal terms.

DENTAL SURGERY.

THIS day received by CARTER & HENDEE, No. 135, Washington Street,—A SYSTEM OF DENTAL SURGERY. In three parts.

1. Dental Surgery as a Science.
2. Operative Dental Surgery.
3. Pharmacy connected with Dental Surgery.

By SAMUEL SHELDON FITCH, M.D., Surgeon Dentist. *Denticum curam habeto ut bene digeras et diu vivas; laxatis dentibus laxantur et chylaceos officinae; hinc mille malorum occasiones.*—Baglivi XIII.

March 17.

ep6w

CASEY'S APPARATUS FOR THE CURE OF DISTORTED SPINE.

THE Proprietor of the Dormant Balance for the cure of Distorted Spine, gives notice, that he has established an agency in this city, for the convenience of those who may wish to avail themselves of this invention. Physicians having under their care the subjects of this disease, or patients themselves, may have an opportunity of inspecting the apparatus, and examining the testimonials of its efficacy, at Mr. Charles White's, corner of Winter Street. It is recommended, however, that all patients availing themselves of this invention, should do it by the advice, and under the superintendence, of their own physicians, as it is only by medical opinion that the proper subjects of the machine can be deter-

mined, or the other proper measures to be made use of in conjunction with it, can be pointed out. The Proprietor expressly disclaims the idea that a cure is to be effected, in any case, by mechanical means alone. This machine has received the approbation of many of the most eminent medical men in this city and New-York. Upon application to the agent, references will be given, and written testimonials exhibited.

All letters, post-paid, addressed to J. Lincoln, No. 27, Fayette Street, will be attended to.

Boston, Feb. 6, 1829.

NEW BOOKS FOR CHILDREN.

JUST published by COTTONS & BARNARD, 184 Washington Street.

The Waning Moon, by the author of the Rising Sun; The White Palfrey, by the author of Thomas Mansfield; The Kind and Happy Child, by the author of the White Palfrey, &c.

FRENCH WATER COLORS.

COTTONS & BARNARD, 184 Washington Street, have for sale, the following Water Colors, of an excellent quality, manufactured by P. C. Lambertye, (France,) viz: Bistre, Raw Cassel, Burnt Umber, Raw Umber, Egyptian Brown, Vandyke Brown, Brown Pink, Seppia, Violet Lake, Carmine Lake, Sanders Blue, Prussian Blue, Mineral Blue, Indigo, Yellow Ochre, Yellow Mineral, Gamboge, Yellow Orpiment, Yellow Lake, Naples Yellow, Burnt Italian Earth, Burnt Sienna, Raw Sienna, Italian Earth, Crocus Martial, Green Lake, Sanders Green, Sap Green, Mineral Green, Prussian Green, Vermillion, Saturnine Red, Indian Red, Red Ochre, Red Orpiment, Flake White.

Also—a great variety of Newman's, Ackerman's, Reeves's and Osborne's Colors, in boxes and separate cakes.

SUNDAY SCHOOL CONVERSATIONS.

COTTONS & BARNARD, 184 Washington Street, have just published, Sunday School Conversations on some of the interesting subjects recorded in the New Testament. By the author of the Factory Girl, The Badge, James Talbot, &c.

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

I.

CANCER UTERI—OPERATION.

Extirpation of Cancer of the Uterus, performed at the Massachusetts Hospital, and reported by the House Physician for the Boston Medical and Surgical Journal.

MAY 5, 1829.—Mrs. L. S., of S., æt. 38, somewhat more than eight months since, began to notice uncommon feelings in some of the pelvic organs,—pains extending from the uterus, as she supposed, to the right hip, and down the right thigh. Not long after this she had more discharge than usual from the vagina, which, from her description, must have been purely transparent mucus. In about four weeks the discharge began to change in its character, appearing somewhat bloody; its quantity increased in the mean time, and pains were sometimes severe in the small of the back and in the right groin and thigh. She felt herself failing in strength and activity.

Being now alarmed, she applied for surgical advice. An examination was made per vaginam, and the source of all the trouble at once detected. She was apprised of her situation, and of what she might expect to ensue.

On examination at the Hospital, the whole neck of the uterus was found thickened and tender; the *fungus* was connected to the right

side of the neck of the uterus and to the vagina for some distance; considerable hemorrhage was caused by examination. She has had ten children,—the last now three years old, and nothing unusual occurred at its birth,—and has borne them with a great degree of ease. General health has ever been unusually good till the last eight or ten months. She is now pale, lips rather exsanguous, eyes sunken, and the whole countenance expressive of great anxiety. Appetite various and capricious; pulse small and feeble.

May 6.—Ride from S. yesterday has produced a favorable effect; feels stronger than she has for some time before.

R. Pro inject. Decoct. Carotæ, et sepe repetetur.

The above preparation was used several times during the day, but on account of the pain it produced, the following was substituted:—

R. Tinct. Opii, ʒijj.

Infus. Sem. Lin. ʒxij. M. et rep. si. opus sit.

7.—Much more comfortable to-day. Pain was mitigated by the opiated injection.

10.—Strength and appetite have improved since coming into the house.

12.—Consulting surgeons assembled to-day, and after making a careful examination, advised to an operation, as being the only alter-

native that promised the slightest prospect of saving life.

13.—The patient, after being fully apprised of the *danger* and *uncertainty* of an operation, was left to consult her own feelings, and submit or not as she chose.

14.—Patient chose to undergo the operation, which was performed to-day at 11, A.M., by Dr. Warren, in the following manner :—The patient was placed upon the edge of the operating table, having her head and shoulders considerably elevated, and supported by pillows : her legs were flexed, knees separated, as far as they could be without producing too much uneasiness, and firmly supported. All things being now ready, the operator proceeded to dilate the external organs, as the *first step* in the operation : this being fairly accomplished, he then introduced into the vagina the two first fingers of the left hand, which were to serve in directing a *pointed hook* which was introduced with the right, and with which was now transixed the neck of the uterus. Having proceeded thus far in the operation, a gradual force was applied for the purpose of dragging the uterus downward into view. The uterus being drawn down as far as seemed practicable, the operator retained it in this position, and with a common scalpel in the right hand, made a circular incision round the neck of the organ, removing with it about half the body and a portion of the diseased vagina. Just as he was making the last incision to complete this part of the operation, there was a tremendous gush of arterial blood, but the hemorrhage soon moderated. The whole hand being now introduced, some portions of the diseased part were found remain-

ing ; these were removed with a hook and pair of tonsil scissors. No opening could be found through the peritoneum or bladder ; the latter organ sunk into the vagina so as to be distinctly seen. The operation now completed, a sponge was placed in the vagina, and the patient removed to her ward.

After she was here, she continued almost in a state of syncope for two or three hours, after which there was considerable reaction. Pulse 100, and sufficiently full : had some color in the face. At 10, P. M., pulse nearly as before ; rather thirsty ; did not complain of great weakness ; said she had a frequent desire to void urine, and believed she had passed some, two or three times since the operation. An examination was made, and the sponge protruding from the external organs was saturated with urine. A catheter was passed into the bladder, but the organ was empty ; Ordered gruel and diluent drinks ; if faint and low, stimulants and cordials.

15.—Pulse 104 ; abdomen tense and very sensible to pressure ; has some control of the urinary organs ; no hemorrhage ; no dejection ; slept some last night.

R. Infus. Sen. Comp. ζ iv. Statim.
 Pill. Hyd. Submur. Comp. vesp.
 sum.
 Appl. Abdom. Foment. Si opus
 sit.

16.—Pulse 120, small and feeble at the wrist ; countenance much sunken and cadaverous ; one dejection yesterday from the cathartic ; no hemorrhage ; abdomen very tender ; rested but little during the night ; had stimulants.

R. Pill. Hyd. Submur. quaq. hora
 ζ iii.
 Appl. Cerat. Canth. 7 a 9, Abdomini.

Bathe in warm spirit and water.

Drink brandy and water, or wine.

Take for nourishment beef tea or broth.

17.—Stomach was very irritable yesterday,—almost everything was thrown up from it; complained of but little local pain, but of great general uneasiness. Sunk gradually till about 4, P. M., before which time the pulse, at times, could not be felt at the wrist, after which there was some little reaction. At 11, P. M., began to sink again, and continued so to do till she died this morning at about 8.

18.—*Post-mortem Examination* by Dr. Warren, twenty-four hours after death, in company with Dr. Channing and the house Physicians, Parker and Gould. etc.—The abdomen was opened. The serous coat at the upper part of this cavity very slightly inflamed; toward the pelvis the inflammation was severe. No effusion of lymph was discovered, nor any step toward adhesion in any of the parts. Peritoneum, in the neighborhood of the uterus and covering the bladder, considerably inflamed, but not sufficiently to produce death. All the uterus, except the fundus, was removed: this was perfectly free from the disease, no portion of which could be found remaining.

This is the first operation for removing cancer of the uterus which has been practised here; and, though not successful in its termination, it warrants the belief that this very dangerous and terrible operation may succeed. This patient did not die of inflammation, nor gangrene or lesion of the peritoneum, but probably from the effects of the bleeding; yet she survived this for three days, and had she not been greatly exhausted be-

fore the operation by the pain of her disease, and the debilitating discharges accompanying it, she would undoubtedly have recovered.—The operation should be done at as early a period of the disease as possible.

II.

Spontaneous Cure of Cataract.

By J. B. ESTLIN, F.L.S.

ON the 6th of June, 1825, I operated upon a man and woman, (brother and sister), both of whom had been blind for eight years with fully-formed cataracts. From the man, who was 56 years of age, I extracted both cataracts; but in the sister's case, as much difficulty was occasioned by the flatness of the cornea and the smallness of the anterior chamber, and as the operation on the *right* eye had proved more tedious than was desirable, I determined upon leaving the *left* eye untouched for some days. She was 66 years of age, and of delicate constitution. Her recovery, however, was very rapid, and the sight was so good that she declined having anything done to the left eye. In less than three weeks from the operation she returned to her home, in Glamorganshire, nearly fifty miles from Bristol, quite well, and able to read.

The brother's recovery was more protracted. The father of these patients had also been the subject of cataracts.

In a few weeks after her departure, I had the power of visiting the female patient at her own residence, and found her possessed of good vision in the eye which had been operated upon. I had also occasional opportunities of

hearing afterwards that she retained her sight. She was furnished with some *Vin. Opii*, to apply to the eye whenever she found it weak or inflamed.

Some months ago she sent to me for a supply of her drops, in consequence of their having proved of great service to her *left* eye, in which the sight was stated to be returning. Supposing that there was some mistake in this representation, I requested the Rev. E. P. Thomas, the respectable curate of the parish where she lived, to oblige me with some particulars respecting her; and by him I have been favored with the following minute statement:—

“About Michaelmas last (1828) one night, while in bed, Mrs. Lewis was seized with a most violent shooting pain in the middle of the left eyebrow, which occasionally descended to the eyeball; it did not affect any other part of the head, nor did it pass through the head; she has a distinct recollection that the pain was confined to the dark eye and its brow, in consequence of her fears having been excited lest the pain should extend to the eye on which the operation had been performed, and prove injurious to her sight. She has no remembrance of having received any injury, or of having come in contact with any object. She had a cold about the period of the attack, but not a severe one.

“The violent shooting pain before described continued for about a fortnight, when she was induced to apply the drops to the left eye. In a few minutes after the first application the pain ceased, and she continued free from it for some days; it then returned, but in a less severe de-

gree, and she was again relieved by the use of the *Vin. Opii*. A recurrence of the pain at intervals continued, but with diminished severity; and at length it ceased altogether.

“At the end of a fortnight after the first use of the drops to the left eye, she began to see with it. The first objects she discovered were the trees in the garden, which she saw through the window of her apartment. In the course of a week after, while walking in her garden, she could discern the bee-hives, and in a few days more she could perceive the bees. She is now able to read small print,” (whether with or without her cataract glasses is not stated—the former, I presume); “and since about the middle of last November she has experienced no pain. The eye upon which the operation was performed has continued free from pain, but it is at times so dim that she cannot read with it. This occasional dimness, before the recovery of sight in the left eye, also gave her great anxiety, lest she might altogether lose the power of seeing with it. The drops always relieved the inconvenience.

“The left eye has no diseased appearance, looking in all respects like that from which the cataract has been extracted.”

The account of this case affords satisfactory evidence of the spontaneous removal of a cataract. It would be interesting to know whether the lens was dissolved and absorbed *in situ*, or whether an opening in the capsule allowed of its passing into the anterior chamber, and there undergoing solution. The former occurrence is more probable, as the presence

of an opaque lens, with its nucleus undivided in the anterior chamber, generally keeps up a more constant state of irritation than is described in this instance.

Few, I believe, now entertain the idea that any stimulating application to the eye can exert an influence in producing the absorption of a cataract. This case favors no such opinion, as the Vin. Opii was not used until the symptoms accompanying the process of the removal of the cataract had existed for two weeks. The relief of similar symptoms, by the application of this liquid, is a well-known occurrence; and it is not to be wondered at that the patient and her friends should attach an importance to its efficacy to which it has no claim. Medical men, however, do not want examples to show the necessity of extreme caution in judging of the effects of remedies.

As a practical remark, connected with the subject of operations for cataract, I would observe that where *extraction* is performed, I consider the advantage of the patient to be greatly consulted by his not having both eyes operated upon at the same time.—*M. Gaz.*

III.

INFLAMMATION OF THE KNEE.

Treated according to the Plan of Mr. Scott, and communicated to the Medical Gazette.

A YOUNG woman, 28 years of age, applied to me on the 30th of July, 1828, on account of a disease in her left knee. A spot on the inner side of the head of the tibia was so exceedingly tender, that she could not bear to have it touched. There was neither

pain nor tenderness throughout the remainder of the joint, although there was a general fulness and tumefaction over the whole synovial membrane. She could neither straighten the limb nor bend it, without great pain; the slightest motion, or any attempt to bear weight on it, occasioned very great pain in the joint; the thigh and leg were much wasted; and she could find no easy posture for the limb, the half-bent position being that in which it was the least painful. She suffered so much at night as to impair her rest. She was of a fair complexion and delicate appearance. Pulse quick, tongue foul, bowels irregular, and the appetite impaired. She was evidently laboring under considerable disorder of the digestive organs. About a month before she applied to me, she first experienced a pain in the joint, which was tender and extremely painful on exercise. These symptoms increased daily, notwithstanding the use of various remedies, such as embrocations, the application of a blister to the joint, &c. Purgatives, leeching, fomentations, &c. &c., were now had recourse to, and absolute rest strictly enjoined.

8th.—The bowels have been regularly relieved by the medicines, the tongue is less coated, and appetite somewhat improved. The tenderness, pain, and swelling, are so much reduced, that the knee is now in a fit state for mechanical support, agreeably to Mr. John Scott's directions.

Applied the adhesive bandage, and ordered a tonic mixture and laxative pills.

20th.—The joint is much reduced in size; pain and tenderness

very much relieved, and her health improving. The mixture and pills continued; the knee supported with adhesive bandages.

23d.—In consequence of attempting to walk, the pain of the joint has returned.

Removed the dressings. Ten leeches to the knee; fomentations and cataplasms twice a day.

27th.—The pain and tenderness relieved; can move the joint without suffering.

A small quantity of Tartar Emetic Ointment to be rubbed on the knee, previous to the application of the adhesive bandages.

Oct. 2d.—She has felt no pain, except a slight smarting produced by the application of the ointment. The limb can be moved without any uneasiness, and her nights are no longer disturbed.

30th.—Continues to improve.

Adhesive bandages as before.

Dec. 27th.—The joint is now reduced to the natural dimensions; she has not the least feeling of uneasiness in it, and can walk and use it perfectly.

Feb. 6th, 1829.—Continues quite well.

IV.

*Experiments on Living Animals.**

[In transferring to our pages the following allegorical comment on a mode of investigation not uncommon in the profession, we have been influenced more by its ingenuity than its justice.]

I HAVE lately read with much interest a treatise “on the operation of poisonous agents on the

living body.” The experiments therein detailed are of a pleasing nature, and the results strikingly important and valuable. Being myself friendly to the cultivation of experimental physiology, indeed, I may say, zealous in the cause, I have, by the help of persons similarly disposed, performed a great number of experiments on living animals. Some of these I lay with much satisfaction before the profession, inviting, at the same time, such of my brethren as find the subject amusing, to repeat my experiments. The importance of the conclusions I have deduced, renders a repetition of them the more to be desired.

Experiment 1.—Having an ear peculiarly fitted for the nice discrimination of sounds, I had often remarked the very peculiar cry of the dog when suffering exquisite pain. In order to ascertain if this particular sound were modified in the varieties of the canine race, I had six dogs arranged in the following order, at intervals of a yard,—mastiff, hound, spaniel, terrier, setter, pug. The right eye of each being scooped out, and a hot ember put into the socket, the effect was immediate and surprising, and I may add, gratifying. It is difficult to convey an idea of it in words,—this, however, is the less to be regretted, as the experiment is easily repeated. I may just observe that I have discovered that boiling linseed oil poured into the ear elicits the sound in question, to the full as instantaneously.

Experiment 2.—The power of resistance in the valvuli coli has often been discussed, but not, so far as I know, ascertained with precision. To determine this

* Medical Gazette.

point I procured four carriers, nearly of a size, and arranged them thus;—the œsophagus of one, separated and brought out, was inserted into the anus of another, and secured so as to make the alimentary passages of the four into one continuous canal. A forcing pump being adapted to the fundament of the hindermost dog, and a known force employed, I found a column of water, equal to ten pounds, force the valve of the first dog; one equal to forty pounds, the second valve; one hundred and sixty pounds, the third; six hundred and forty pounds, the fourth, and so on,—the force required increasing in a geometric ratio. A few handfuls of small fish-hooks, thrown into the water employed, excited a variety of interesting contortions in the dogs.

N. B.—Coarsely pounded glass may be used instead of the fish-hooks.

Experiment 3.—The degree of heat requisite for separating the hair from the skin of a living animal not having been satisfactorily determined, I procured six rabbits, which I treated as follows:—Two, immersed to the neck for one minute in water at 180 deg., shed only the finer down in consequence. Another pair, completely immersed for the same space of time, at the temperature of 206 deg., easily parted with the whole of the hair, except the whiskers. The remaining couple, immersed at the boiling point, furnished the same result as the preceding two. I now put the entire six into an empty stew-pan, heated to 400 deg., with the view of ascertaining what degree of heat would cause their whiskers to fall off. On taking out the

animals after five minutes had elapsed, I found they were unfortunately dead, with the beard burnt and quite friable, but still adhering at the roots. The latter point, therefore, namely, the degree of heat at which the whiskers of the rabbit fall off, will require further experiments; and I have the gratification to announce to the profession generally, that a series on this interesting subject are now being performed by two able friends and myself, which will be published as early as possible.

In conclusion, I cannot help alluding to the objections which some make to experimental physiology on the score of cruelty. It seems to me doubtful whether the inferior animals are really susceptible of pain in the sense meant by the objectors. At least I think their struggles, and the noise they make in the hands of the operator, may be explained on a very different principle, which I mean to enlarge upon at a future opportunity. S.

V.

TIC DOULOUREUX.

Discussion on this Subject in the Medical Society of London.

DR. RAMADGE related a case of tic douloureux, brought on in a male patient, 40 years of age, by the external application of zinc and copper, for the purpose of producing a galvanic sensation. Most excruciating pain in the cheek, passing across the eye, towards the frontal sinus, was thus produced. There was a spot in the red part of the upper lip, which, upon being touched, the pain was excited. The patient was of a plethoric habit, and had

lived rather freely. For some time he had suffered from dyspepsia. The treatment consisted in extracting blood; the exhibition of laxatives, followed by the use of the carbonate of iron, combined with the carbonate of soda. The complaint was entirely removed. The pain, in this case, did not run along the course of the nerves usually affected, but perpendicularly.

Dr. James Johnson, after remarking that neuralgic affections were much more frequent than they had been, noticed paralysis of the portio dura of the seventh pair of nerves, as an affection that was occasionally occurring. It occasioned drooping of the eye; the drawing up of one side of the face had, in some of these cases, excited fears in the minds of the friends as to the existence of cerebral disease; but the disease was in the branches of the nerve spoken of. The disease was sometimes of long duration. In one case eighteen months elapsed before the power of the nerves was restored. Another case went on for nine months. Dr. J. had seen other cases. Some attention was required to be paid to the eye; for, as the patient could not shut the eye, it remained unclosed during sleep: it required, therefore, to be shut previous to the patient's going to rest; otherwise, the eye remaining open, inflammation of the organ took place. In these cases the sensation of the part was not diminished, the nerves affected being nerves of motion, not sensation. There was another affection of these nerves, or the muscles which they supplied, which consisted in a constant twitching of the part of the face to which the branches of the nerve were distributed. The

disease, in all the cases which had fallen under Dr. Johnson's observation, had been induced by "a draught of cold air;" it was a state of irritation of the muscles, rather than a paralytic affection. No treatment had, in these cases, appeared to be of any use.

Dr. Shearman observed that tic douloureux had, of late years, been much more frequent than formerly, or that transient painful affections had been dignified with "tic douloureux." He (Dr. S.) had found the ext. belladonnæ a very efficacious remedy in the disease in question; the dose he had given was about two grains every eight hours.

Mr. Shearly remarked that he had used, in this disorder, opium, combined with belladonna, externally; exhibiting, also, the carbonate of iron every eight hours. In one case Mr. S. gave, with success, strong camphor mixture, combined with the ammoniated tincture of the valerian and the pilula gummosa.

Mr. Taunton and Mr. Hiff adverted to some cases related by Mr. Bailey, of Harwich, in which belladonna had been given. That gentleman had begun with quarter-grain doses.

Mr. Drysdale mentioned a case of tic douloureux occurring in a lady. After all the usual remedies had been tried in vain, the disease was removed by the use of a hot pillow.

Dr. Ryan related cases of tic douloureux in which he had seen stramonium used internally and externally with benefit. Dr. R. was surprised that contra-irritation at the base of the brain by setons, perpetual blisters, &c., had not been resorted to in neuralgic affections.

SKETCHES OF PERIODICAL LITERATURE.

COLICA PICTONUM.

A WRITER in the London Medical and Physical Journal advances the opinion that this disease indicates inflammation of the intestinal canal, and should be met with remedies calculated for the relief of inflammation, such as general and local bleeding, fomentations, &c., instead of the usual purgative treatment. With regard to the latter, it is said that it excites an ineffectual effort in the canal, productive of increased local determination and aggravation of all the symptoms. In the case adduced in support of this theory, salts, calomel, and rhubarb, had been administered, without producing any cathartic effect; the disease had reached the sixth day, and was rapidly increasing. The medicines were discontinued; ten ounces of blood were taken from the arm, and eighteen more by cupping from the abdominal surface. The appearances were improved by this treatment, but no evacuation followed. Next day the cupping was repeated on the abdomen, to the extent of thirty ounces; and the fomentations and enemata were continued. At the succeeding day's visit it was found that the bowels had been evacuated six times, with relief from the pain. The case afterwards did well.

That the disease called painter's colic is frequently accompanied with inflammation of the intestines, there is no reason to doubt; and where this is the case, the antiphlogistic mode of treatment ought certainly to

be resorted to. Many cases of the disease occur, however, in which no symptom of inflammation is to be found, and in which the same mode of treatment would be useless or injurious. With regard, also, to obtaining evacuations from the bowels, we apprehend that in the majority of instances some of the cathartics in common use will effect this object; and as it is important to avoid delay, the remedies calculated to produce a direct effect on the canal, are preferable to those the operation of which is more uncertain. These considerations ought always to induce practitioners to make trial, in the first instance, of cathartic medicines, properly so called, in conjunction with such other treatment as the circumstances of each particular case may seem to require. Dr. Good, who gives a very judicious view of the disease, proposes three indications in its treatment,—to subdue inflammation, if present; to relieve pain, and to restore the due peristaltic action of the bowels. That this latter object cannot always be answered by purgatives, we are well aware; but those cases in which they fail so to do, are to be at once regarded as alarming in their character, since a large proportion of them resist every mode of treatment which can be devised. Even in the case above referred to, the direct purgative treatment seems hardly to have received a full trial, and might, if persevered in, have proved ultimately successful. For our own part,

we have seldom failed to cure the disease by the free administration of Extr. Hyosciam. and Epsom salts, with cold affusion to the lower extremities.

SUPPRESSED PERSPIRATION.

The Effect of powerful sudden Impressions made on the Surface of the Body.

THE notion that febrile diseases are frequently produced by suppressed perspiration is probably as old as the science of medicine; but the severity of the application of this principle has, we apprehend, rather diminished in later times. To a certain extent the system of most persons is able to sustain the shock of cold applied to the perspiring skin, without injury and even with benefit. The hardy Russian quits his vapor bath, heated to 130 deg., and plunges fearlessly into the snow; and even the most delicate and tender find a cold bath more grateful and more beneficial when a little previous exercise has produced a tendency to the surface. The momentary reaction which is thus produced, so far from disordering the functions, will be found, in most instances, materially to aid their performance. But to infer from these facts that sudden changes may, under all circumstances, be encountered with impunity, would be a fatal error, since in debilitated subjects they are often followed by the most disastrous effects. The following, though an extreme case, will illustrate the danger of this sort of imprudence, better than any reasoning on the subject.

A carpenter, about 40 years of age, was affected with an extensive leprosporiacious eruption. After trying various remedies to no purpose, he at length commenced the use of sulphur fumigation. Having taken a bath at the house of Mr. Green, Surgeon to St. George's Hospital, in London, he walked thence to the Hospital in a cold easterly wind. This was the 17th of December. On the same evening he was attacked with symptoms of fever, which the next morning were found very much increased, and accompanied with those of pulmonary inflammation. Blisters and antimonials were resorted to, with occasional doses of calomel and other medicines which the case seemed to require; but to little purpose. He died on the 24th of the month, the eighth day of the disease. The most remarkable post-mortem appearance was that of half a pint of serum, mixed with pus, contained in the cavity of the left pleura. The corresponding lung bore marks of severe recent inflammation, corresponding to the symptoms which were present during life. The right side of the chest was free from disease.

ERGOT OF RYE.

ACCORDING to Dr. Marshall Hall, this article possesses considerable control over chronic uterine discharges. In a very severe case of menorrhagia, alternating with leucorrhœa, which had continued, with occasional variation in degree, for four years, the ergot was given in doses of five grains, four times daily, beginning just before the expected ap-

pearance of the catamenia. This was retarded in its appearance for four days, was moderate in quantity, and not followed by the leucorrhœa, which in fact entirely disappeared. In several cases in which this last disease existed by itself, the ergot was employed with decided success. The benefit of the remedy is usually experienced at the end of five days, but it is best to persevere in its use for a somewhat longer period.

POISONING BY ENDERMIC MEDICATION.

Two cases are recorded in the journals in which the external use of corrosive sublimate was followed by fatal consequences. Two brothers, affected with a cutaneous eruption resembling itch, attempted its cure by rubbing into the skin the muriate of mercury, previously mixed with hog's lard. The quantity of the sublimate used by each was about an ounce. It produced vesication of the parts to which the ointment was applied, severe pain in the bowels, with other symptoms of extensive inflammation, dysenteric discharges and sanguineous vomiting. Death ensued in the first instance on the eleventh day; in the second on the fifth. On examination of the last, the stomach and small intestines were found highly inflamed, with small spots of ulceration in the former. The lower portion of the colon and rectum were in a state of complete mortification, and there was a great quantity of bloody serum in the cavity of the abdomen.

ACETATE OF LEAD.

SOME interesting facts and speculations, in regard to this substance, are contained in a late number of the Medical Gazette. With the view of ascertaining how far the apprehensions entertained from its use in large quantities were well founded, a medical gentleman administered it to himself, at the rate of ten grains a day for seven days, combined with opium in the proportion of one-eighth part. After he had taken this quantity, pains were produced in the bones, and the mouth became sore, as in mercurial ptyalism. The former symptoms yielded to a moderate dose of sulphate of magnesia, and the latter went off at the end of a few days. The intestinal affection produced in this instance had not the usual symptoms of painter's colic. Indeed it seems to be well established, that the timidity which has been prevalent in regard to the medicinal use of this article, is far from being justified by facts. The result of our experience appears to be that the colica pictonum is produced by a long-continued action of the lead on the system, which gradually deranges the digestive functions, impairs the secretions, and induces costiveness; and never, or very rarely, by its use in decisive doses and for a limited time. Doses of one, and even two drachms of the acetate, have been taken at once, and followed by no effect but purging; and there can be little doubt that, in cases indicating its employment, much larger doses than those in common use may be exhibited with advantage.

FEMORAL ANEURISM CURED WITHOUT
AN OPERATION.

THE Provincial Gazette contains the history of a femoral aneurism which was cured by pressure. The tumor was enormous, and the distressed patient incapable of walking without a crutch. A flannel roller was first applied, so as to produce moderate pressure on the aneurismal tumor. A few days after, on the 27th of September, the swelling had subsid-

ed, and it was discovered that so great was his relief from the bandage, that he had tied a silk handkerchief tight round the thigh, for the purpose of increasing the pressure. Mr. Sy-fred, the Surgeon of the Hospital, applied a tourniquet and splint, and on the 8th of October every vestige of the disease was removed. That this case is related in the March number of the Provincial, is our only evidence that the cure was permanent.

BOSTON, TUESDAY, JUNE 23, 1829.

TRIBUTE OF RESPECT TO MR. COOPER.

OUR readers probably recollect that much excitement was produced, a few months ago, in the British metropolis, by a garbled report in the Lancet of an operation for the stone, performed by Mr. Bransby Cooper. Some difficulties which were unexpected, rendered the operation of greater duration than usual, and the opportunity was not lost by the Editor of the Lancet, to gratify his propensity to vilify Sir Astley and his distinguished relative. Mr. B. Cooper instituted a suit against Wakley, Editor of the Lancet, for a libel, and recovered, with 100 pounds damages. We learn with pleasure that the students of Mr. C. have presented him a silver vase, with their congratulations on the successful result of this suit. Such testimony of respect is alike honorable to both parties, and was unquestionably called for by the peculiar circumstances of the case. Mr. Cooper's cause is that of the profession in general; and his tri-

umph is that of justice and good principle over the mean arts of envy and malice. If the editor of, or the hireling contributor to a medical paper, is permitted to attend the public hospitals for the purpose of laying before the world garbled and obscure accounts of all such operations as have in any way terminated unfortunately, including the most disgusting details, and exaggerating every circumstance which can tend to reflect discredit on the operator, it is evident that from such attacks no reputation, however good, can afford an entire security. The libel is not merely presented to medical men who may make the necessary inquiries as to the facts; it is read with avidity by the ignorant as well as the learned; and the multitude, ever ready to believe the worst, will give it credit almost in proportion to its grossness. The result of this trial, therefore, as warning malicious slanderers that they are not out of the reach of justice, is a benefit to the

whole community; and the proceeding of the students of Mr. C., by at once testifying their contempt for the libeller and their respect for the object of his malice, evinced a sense of what was due to the dignity of the profession and to the cause of truth and justice. For the particulars of the ceremony, which are highly interesting, we refer to the London Medical Gazette, for May 2d, in which the address of the students, and Mr. C.'s reply, are both given entire.

HYPOCHONDRIASIS.

WE are apt to believe a merry companion the happiest fellow in the world, and envy him, perhaps, his light heart and airy spirits; but such men have hours of melancholy, when the spirits sink, and a gloom comes over them, deeper and darker than is ever known to their less excitable companions. A man may be cheerful on paper, though he has a heavy heart, and brilliant in company, though insufferably wretched when left to commune with his own soul.

The extremes of low and high spirits, which occur in the same person at different times, are happily illustrated by the following case, related by Dr. Rush:—"A physician, in one of the cities of Italy, was once consulted by a gentleman who was much distressed by a paroxysm of this intermitting state of hypochondriasm. He advised the melancholy man to seek relief in convivial company, and recommended him in particular to find out a celebrated wit by the name of Cardini, who kept all the tables of the city, to which

he was invited, in a roar of laughter, and to spend as much time with him as possible. 'Alas! Sir,' said the patient, with a heavy sigh, 'I am that Cardini.'"

FOREIGN BODIES IN THE LARYNX MISTAKEN FOR CROUP.

IN our number for May 26th, we inserted a communication from Dr. J. V. C. Smith, giving an account of a child whose vision was affected apparently by the irritation of a foreign body in the larynx. In Dr. Smith's interesting detail of this case, it will be recollected that the difficulty was supposed at first to be an attack of croup, and treated as such. Since the publication of the above, we have remarked several cases described, and others referred to, in which the entanglement of foreign substances in the larynx or trachea, have produced symptoms very much resembling those of croup. Dr. Reiche is of opinion that these symptoms are not only most easily, but also most frequently, mistaken for croup. The practical caution to be derived from these instances needs no illustration.

Dr. R. also remarks that the best diagnostic marks by which the croup may be distinguished from the accident alluded to, is the frequent cough, and the peculiar alteration in the sound of the cough and the voice.—We might add, also, a careful inquiry into the history of the case.

INJURIOUS EFFECTS OF MERCURY ON THE FUNCTIONS OF THE UTERUS.

Six cases are found among the late records of the Paris venereal hospitals, in which abortion was the evi-

dent effect of mercurial treatment. Miscarriages have always been frequent among the inmates of this charity; but they have usually been attributed to the disease rather than its specific remedy. The cases alluded to seem to show very clearly that this explanation is not correct, and that mercury produces an injurious effect on the functions of the impregnated uterus. Dr. Colson, who relates the cases, has also given others to show that this mineral has an effect on the unimpregnated uterus, to interrupt its functions, producing either menorrhagia or amenorrhœa.

PARTIAL DISLOCATION OF THE KNEE.

A COOPER, æt. 64 years, was lately carried to the Hospital de la Charité, who had the knee partially dislocated by a fall from a horse. The bones of the thigh and leg formed an angle with each other, the apex of which was inward. The head of the tibia was slipped inward, and the femur outward. Reduction was attempted by extension, but this not succeeding, the operator placed his knee against the projecting extremity of the femur, and then pulled the head of the tibia toward him with great force. The effort succeeded. Soon after, the limb not appearing quite straight, was confined in the apparatus for fractures three weeks, when a degree of deformity remaining, suspicions were entertained that the internal lateral ligament was ruptured. The apparatus, with bandages, and pressure on the inside of the joint, continued a week, were found to remedy the evil; and at

the time of the report, five weeks after the accident, the leg was in proper form, but the patient was unable to walk without the aid of sticks.

TALIAHOTIAN OPERATION.

THIS operation has been successfully performed at the Glasgow Infirmary. The subject of it, a lady, æt 37, being destitute of one half of that comely and important feature, the nose, desired, more for convenience than appearance, that the surgical art might try its best to accommodate her with the other half. The right ala and columna remaining, the defective portion was very respectably supplied by cutting a flap from the left side of the forehead, and bringing it down into the proper place. A roll of India rubber preserved the rotundity of the flap, the edges of which were secured by four sutures. The cicatrix on the forehead became very narrow, and the twist of the flap was left undivided, as its prominence added to the beauty of the renovated feature.

CANCER OF THE HUMAN MALE BREAST.

A CASE of this description was carried to Guy's Hospital, London. The patient, an unmarried man of 30 years of age, received a blow on the nipple five years before, which was followed by a soft tumor, the size of which gradually increased for two or three years. It was then exposed to several successive blows, became harder, and the seat of lancinating pains. At the time of admission it was the size of a fist, and very hard.

This tumor was removed by Mr. Cooper, and a dissection of it left no doubt of its scirrhus nature. The patient bore the operation ill, and the reporter says he possessed "a womanly disease, a womanly aspect, and a womanly spirit." We object to this declaration, as unjust and ungenerous to the fair subjects of this disease: the reporter would have evinced a more accurate practical observation of such cases, if he had said of this man, he possessed a womanly disease, a womanly aspect, but not a womanly fortitude!

EXTRACTION OF FOREIGN BODIES
FROM THE EAR.

M. DUPUYTREN has invented a very convenient instrument for extracting foreign substances from the meatus auditorius. It is a pair of slender forceps, bent twice at right angles, so as not to obstruct the view of the surgeon into the passage. The extremities of the arms are small and spoon-formed, pierced with fine holes, and roughened with small teeth.

DIFFERENT EFFECT OF POISON ON
CARNIVEROUS AND HERBIVEROUS
ANIMALS.

By a series of experiments, Professor Mayer, of Bonn, has ascertained that the extract of the coriaria myrtifolia, (myrtle-leaved sumach), which acts as a violent narcotic poison on all carnivorous animals, may be swallowed by those that are herbivorous without injury. Large doses of the extract, given by the mouth, or applied to external wounds, produced on the rabbit, e. g., no sensible effect.

Fatal Aneurism of the Abdominal Aorta.—A man, 24 years of age, had occasional fits of vomiting and pain in the belly, and a preternatural fulness was perceptible to the left of the linea alba. He died suddenly. A large quantity of blood was found in the peritoneum; and "in the space between the liver and smaller curvature of the stomach was an aneurismal sac, of the size of a large orange." It had burst anteriorly under the edge of the liver, by an aperture too small to admit the point of the little finger. Dr. Malden is of opinion that the aorta was ruptured during the act of vomiting.—*M. Gaz.*

Medical Publications.—The Editor acknowledges the receipt of the following works:—

Memoirs of the Life, Writings, and Character, literary, professional, and religious, of the late JOHN MASON GOOD, F.R.S. F.R.S.L. Mem. Am. Phil. Soc. and F.L.S. of Philadelphia, etc. etc. etc. By OLINTHUS GREGORY, Professor of Mathematics in the Royal Military Academy, &c. &c. With the Sermon occasioned by his death, by CHARLES JERRAM, M.A. Boston: Published by Crocker & Brewster, &c. 1829.

Journal des Progrès des Sciences et Institutions Médicales en Europe, en Amérique, &c. 1st vol. Paris, 1829.

Also, the last number of the following periodicals:—

The New-York Medical and Physical Journal; The American Journal of the Medical Sciences, Philadelphia; The Western Journal of the Medical and Physical Sciences, edited by Daniel Drake, M.D., Cincinnati, Ohio; The Gazette of Health, edited by Richard Reece, M.D., London.

REPORT OF DEATHS IN BOSTON,

The week ending June 12. at noon.

Of abscess on the lungs, 1—convulsions, 1—consumption, 4—croup, 1—dropsy in the brain, 1—lung fever, 1—old age, 3—scald, 1—unknown, 4. Males, 10—females, 7. Total, 17.

ADVERTISEMENTS.

CARTER & HENDEE,

Publishers, Booksellers, and Stationers,

CORNER OF WASHINGTON AND SCHOOL
STREETS,

KEEP constantly on hand, a large collection of English, French, Spanish and Italian BOOKS.

A complete assortment of MEDICAL BOOKS, and a supply of the best STATIONARY.

They have also for sale, Gardner's Twelve Inch GLOBES, and a supply of the most approved SCHOOL BOOKS.

All of which they will sell, at wholesale and retail, on the most liberal terms.

MANUEL FOR THE USE OF
THE STETHESCOPE.

CARTER & HENDEE have recently published,—A short Treatise on the different Methods of investigating Diseases of the Chest. Translated from the French of M. Collins, by W. N. RYLAND, M.D. From the third London Edition, with Plates, and an Explanatory Introduction, by a Fellow of the Massachusetts Medical Society.

In preparing for the American press the English translation of the well known and highly useful work of M. Collins, which translation has passed through three editions in England, the Editor thinks he can render it more acceptable by dispensing with the various prefaces and introductory remarks which encumber the last edition, and by substituting in their place an entirely new introduction, which is intended to embrace the amount of all that is important in the prefaces alluded to, as well as that which is contained in various abstracts and reviews which have appeared of treatises upon the different methods of investigating thoracic diseases, and in some other works which are not generally before the profession in this country.

C. & H. keep constantly for sale Stethoscopes of the most approved form.

FRENCH WATER COLORS.

COTTONS & BARNARD, 184 Washington Street, have for sale, the fol-

lowing Water Colors, of an excellent quality, manufactured by P. C. Lamber-tye, (France,) viz: Bistre, Raw Cassel, Burnt Umber, Raw Umber, Egyptian Brown, Vandyke Brown, Brown Pink, Seppia, Violet Lake, Carmined Lake, Sanders Blue, Prussian Blue, Mineral Blue, Indigo, Yellow Ochre, Yellow Mineral, Gamboge, Yellow Orpiment, Yellow Lake, Naples Yellow, Burnt Italian Earth, Burnt Sienna, Raw Sienna, Italian Earth, Crocus Martial, Green Lake, Sanders Green, Sap Green, Mineral Green, Prussian Green, Vermillion, Saturnine Red, Indian Red, Red Ochre, Red Orpiment, Flake White.

Also—a great variety of Newman's, Ackerman's, Reeves's and Osborne's Colors, in boxes and separate cakes.

CASEY'S APPARATUS FOR THE
CURE OF DISTORTED SPINE.

THE Proprietor of the Dormant Balance for the cure of Distorted Spine, gives notice, that he has established an agency in this city, for the convenience of those who may wish to avail themselves of this invention. Physicians having under their care the subjects of this disease, or patients themselves, may have an opportunity of inspecting the apparatus, and examining the testimonials of its efficacy, at Mr. Charles White's, corner of Winter Street. It is recommended, however, that all patients availing themselves of this invention, should do it by the advice, and under the superintendence, of their own physicians, as it is only by medical opinion that the proper subjects of the machine can be determined, or the other proper measures to be made use of in conjunction with it, can be pointed out. The Proprietor expressly disclaims the idea that a cure is to be effected, in any case, by mechanical means alone. This machine has received the approbation of many of the most eminent medical men in this city and New-York. Upon application to the agent, references will be given, and written testimonials exhibited.

All letters, post-paid, addressed to J. Lincoln, No. 27, Fayette Street, will be attended to.

Boston, Feb. 6, 1829.

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

I.

Communicated for the Medical and Surgical Journal.

POISONING BY MILK.

History of the Cases of Poisoning by Milk which recently occurred in a Family in this City, by F. J. HIGGINSON, M.D. ; together with an Analysis of the Milk, by CHAS. T. JACKSON, M.D.

History.

ON the 21st of May last, at about 11, A. M., I was called to see a family said to have been poisoned. The family consisted of seven, of whom four, viz., the lady of the family, her child (a girl of four or five years), a young woman who had been maid in the family and who had just recovered from a pretty severe illness, and a little girl, also a servant. The three remaining members of the family were males, and were not at home. About two hours after breakfast, that is, at about 9, A.M., the females, in quick succession and with little warning, were taken with nausea and vomiting. All, with the exception of the little servant girl, who refused, soon got full doses of ipecacuanha, which, by the time of my arrival, had produced its full effect. At this time *the lady* was complaining of violent pain in the stomach, which had come on a few minutes before, the vomiting having previously

ceased. Her countenance was very pale, her skin cool and moist, and her pulse feeble, though not extremely so. She was soon put into bed. Her *child* was lying in the lap, quiet, and unwilling to be disturbed, but not in much apparent suffering. She also was very pale, her lips slightly livid, her skin cool and moist, and her pulse feeble. She had vomited a great deal, and was still occasionally retching. The *young woman* was the greatest sufferer. Her countenance was deadly pale, her lips and eyelids sublivid, and her expression wild. As I entered she was tossing her arms about, and stamping violently on the floor. She was however soon calmed, the fit being evidently of an hysteric character. She had continual and violent retchings, and complained of severe pain at the stomach. The *little girl* was apparently more easy. Soon after her attack she had a slight dejection, which relieved her for some time.

From the mode of the attack, and their being simultaneously and similarly affected, there could be no doubt that the phenomena arose from a common cause, and that, some noxious substance introduced into the stomach. I found, on inquiry, that their breakfast had consisted, as usual, of bread and butter, milk, eggs, and coffee. No fish had been eaten in the fa-

mily for two days previously. Some, but not all of the family, had eaten cheese the preceding night. Whatever the poison might be, there was no question that it had been evacuated, as far as possible, by the vomiting, and the first indication was to check the inordinate action of the stomach, and, if possible, allay the pain. Dr. George Hayward, who had been sent for, arriving soon after me, was of the same opinion; and by his advice, laudanum was administered, in large doses, to all. Where it was not retained, opium pills were given with success.

Very soon our attention was called to the *master of the house*, who had come home on hearing of the sickness of his family. He was seized in the same manner with the rest. Soon after this, one and then the other of the two remaining members of the household came home sick from their places of business. Laudanum was given to all three, and whether owing to this, or some other cause, they suffered far less than those first affected. As soon as the stomach became sufficiently quiet, the comp. infus. sennæ was given, and repeated in moderate doses. Under this treatment they mostly improved. In one or two cases the coldness of the surface increased; in the child it became extreme, and for some time there was no pulse at the wrist;—she came to, however, under the use of warm water and paregoric. Before 2, P. M., they were all well enough to be left. Dr. Hayward saw them again before 4 o'clock; and by that time, the medicine having opened the bowels, they were all decidedly relieved, with the exception of the little girl who was mentioned as less ill than the rest.

She had refused medicine, and accordingly suffered longer than the others. On the next day a good deal of weakness was the only ill effect perceptible. As it was a great object to ascertain, if possible, the nature of the deleterious substance, I brought away about five ounces of water, and as much milk, for chemical analysis. The water I took from the copper boiler, in which the water used at breakfast had been boiled. The vessel had not been cleaned for many days.—So important a matter is this, that it is a regulation both in our army and navy, that the copper cooking utensils shall be inspected once a day by the surgeon or his assistants.—The water came through leaden pipes, but was the same that they had used for a year. The milk was taken from an earthen pan, the same which that used at breakfast had been taken from.

The analysis of the milk and the water was performed by my friend, Dr. Charles T. Jackson, whose familiarity with the processes of analytical chemistry entitle the results of his investigation to the fullest confidence. Not being able to see him when I left the substances at his house, I could give him no clue to his discovery. The next day, he told me that he had detected, in the milk, *subacetate of copper* in very sensible quantities. I have been unable to discover by what means the poison was communicated to the milk. The account of the analysis drawn up by Dr. Jackson, and which is subjoined, puts the fact beyond question. It only shows the necessity of great care, on the part of house keepers, &c., not only as to the vessels in which articles of food are kept and preserved, but also as to the

places where they are deposited.

Three only of the family took milk alone. The quantity taken by the others was, of course, very small, as it was taken in coffee. What is, perhaps, worthy of remark, is that these last took sugar with their coffee,—and this is the substance which Orfila says is the best antidote to the poison of verdigris. He states, to be sure, that large quantities are necessary for it to be of any avail; but in these cases the quantity of sugar must unquestionably have been to the quantity of verdigris, at least, as 30 to 1. Those who took milk alone, however, were the first seized.

F. J. HIGGINSON.

Analysis.

By request of my friend, Dr. Higginson, I made a chemical analysis of the milk and the water which were suspected to have contained some deleterious matter, by which a family of seven individuals were dangerously affected with symptoms such as usually result from the introduction of some virulent and very active poisonous agent into the stomach.

As several accounts in the papers of the day have stated the results of this examination, and there does not appear to be a correct understanding of the case as to the source of the poisonous matter, I have, by desire of Dr. H., consented to publish the following statement from my notes, made at the time of performing the analysis of the articles in question.

The water used by this family being subjected to a strict chemical examination, was found free from any deleterious substance, and will not require any further attention.

The whole quantity of milk sent to me for examination weighed $4\frac{1}{2}$ oz. It had a turbid appearance, though not coagulated, or sour to taste or smell. There was no sediment in the phial in which it was contained.

Process 1st.—A portion of the milk was taken, and being placed in a wineglass, was treated with a drop of diluted nitric acid, to separate the curd and the albumen of the milk, and to retain whatever foreign metallic ingredient it might contain in solution. After the curd &c. had subsided, the clear supernatant fluid was poured off, and then searched, by chemical reagents and tests, for such substances as it appeared probable it might contain. My first suspicions fell upon the oxide of *Lead*, with which coarse earthen ware is generally glazed; but neither sulphuric acid nor phosphate of soda gave any precipitate, whence we may infer it did not contain any salt of lead.

Process 2d.—Another portion was tested for arsenic by ammonia and nitrate of silver, but did not manifest any indications of its presence. The curd was also examined in like manner, without discovering any foreign matter. The only remaining article which could be suspected was *Copper*, and this was, as we shall see presently, the true source of the baneful effects on the family concerned.

A polished lancet blade being immersed in the milk which had not been treated by nitric acid, did not become tarnished; but, when immersed in the solution from which the curd had been separated by nitric acid, the surface of the steel became immediately covered with a coating of metallic copper. Lest the acid itself might be suspected to be impure, a portion of it dilut-

ed with water, was tested by polished iron and by ammonia ; but it was found to be pure.

From the circumstance of the copper not being separated from the milk by the polished iron, it appears that the copper must have existed in the state of an oxide dissolved by the oily matter of the milk, or that it existed in the state of a subacetate, all the acid salts of this metal being incompatible with the uncoagulated state of the milk.

To determine how much copper the milk contained was the next and the last step to complete the analysis. The method pursued was the most simple; and, although it may be regarded by some scientific analysts as somewhat coarse, it is sufficiently correct for toxicological purposes, and has the advantage of being exempt from all suspicion of impurity in the chemical reagents employed. This process was as follows :—

Two ounces by weight of the poison milk was poured into a glass evaporating basin, and gradually evaporated to dryness over the Argand Lamp furnace, and the heat continued until the residuum was converted into a spongy carbonaceous mass, when it was removed, pulverized in a Wedgwood mortar, and placed in a crucible of platina, over a small furnace of charcoal ; the crucible and contents were then heated to ignition by urging the fire with the bellows. After the carbon had been consumed, the ashes contained in the crucible was removed, and treated with diluted nitric acid, which dissolved all but a few specks of carbon that had not been consumed. The solution, which was of a blue color, was then divided into two portions equal by measure ; one of these was treated to excess of saturation by ammonia,

when it became of a fine blue color, without any precipitate. The other half was poured into a conical measuring glass, and a rod of polished iron wire immersed in the solution and allowed to remain all night undisturbed. The next morning the copper had precipitated entirely in a metallic state upon the iron rod, and being carefully removed and dried between folded blotting paper, weighed half a grain, which is equivalent to four grains of the peroxide of copper. The small portions of milk remaining having become sour, I was unable to pursue the investigation further to determine the precise state of the oxide in the milk,—to determine which would be very difficult, unless a large quantity could be consumed.

Whence, and under what circumstances, the milk contracted this poison, it is not my part or intention to determine ; it would certainly be remarkable that so large a quantity of oxide of copper should have been dissolved in the milk, even if it had been kept in a metallic copper vessel, considering the shortness of the time and the circumstance that the milk was perfectly sweet.

CHAS. T. JACKSON.

II.

ACTION OF COLCHICUM ON THE URINE.

PROFESSOR CHELIUS, of Heidelberg, has been making a number of experiments on the urine of those who take colchicum for different complaints, and has discovered a very curious and uniform effect to result from this powerful medicine,—namely, a great increase of uric acid in the urine,—and, consequently, a great

evacuation of it from the system at large. Thus a man, who had rheumatic inflammation and swelling of the joints, was put upon the use of colchicum, his urine being first examined, and found to contain 0,069 of uric acid, free or combined with ammonia. In four days after the colchicum was commenced, and that in moderate doses, it rose from 69 to 76. On the eighth day it was 91, and on the twelfth day it was 102. In short, in the course of a fortnight, the quantity of uric acid was doubled. Experiments were made on a great number of individuals, chiefly laboring under gouty, rheumatic, and neuralgic affections, and all with the same result,—a great increase of the uric acid. Professor Chelius thinks that this operation of the colchicum may lead to some elucidation of the specific efficacy of the medicine in various diseases, and perhaps may throw some light on the nature of those diseases themselves. The Professor appears to employ the colchicum, with great success, in neuralgia of the face, in sciatica, rheumatic ophthalmia, dropsy of the joints, and in certain paralytic affections of the lower extremities connected with the arthritic diathesis. We would recommend the medical practitioners of this country to note the effects of colchicum on the urine, as the increase of uric acid may lead to the useful employment of this remedy in some diseases to which it is not now applied.—*Med. Chir. Rev.*

III.

OLD ULCERATIONS OF THE TONGUE.

M. MAGENDIE, of Paris, has published two cases of old ulcera-

tions of the tongue and pharynx, (considered by some eminent surgeons cancerous, and by others pseudo-syphilitic, and by all as incurable,) which yielded to full doses of iodine.

“The first case was that of a female of lymphatic temperament, who had enjoyed good health till the age of thirty, when menstruation became irregular, and epileptiform attacks supervened. After a time ulcers broke out on various parts of the body and the limbs: some exfoliations of the tibiæ and bones of the arm also took place. Excrescences were now seen on the pharynx and tongue, and the attendant physician, conceiving the complaint to be syphilitic, notwithstanding the positive denial of the woman, she was put upon a mercurial course. Under this treatment the ulcerations of the body and limbs healed; but those of the tongue increased. In the course of time the patient lost her voice, which was attributed to ulceration of the chordæ vocales. In this deplorable condition, M. Magendie ordered a solution of the hydriodate of potash to be exhibited, and the dose to be gradually increased, till it amounted to thirty-six drops in the day. The good effects were soon conspicuous. The surface of the ulcerations cleaned, and, in fifteen days, those of the tongue were completely healed. In a little more than a month the other ulcers were also cicatrized.

“CASE II.—A female, aged forty-one years, had been in the Hospital Saint Louis four years previously for large ulcerations on the legs. She had scarcely left the hospital, apparently cured, when she was seized with difficulty of breathing, pain in the

region of the larynx, and complete loss of voice. These symptoms continued, and, at the same time, large ulcers broke out on the face and neck, as well as on the tongue. Various modes of treatment had been put in practice, but without much relief, and she entered the Infirmary of the Salpêtrière in March, 1827, three years after the commencement of the facial ulcerations. Her nose was now

almost demolished,—various fungous ulcers were spread over the face and tongue,—deglutition was very difficult,—the respiration was impeded,—articulation almost annihilated. On the 27th of June the patient was put on the use of tincture of iodine, and the dose was gradually increased. The ulcerations at last were entirely healed, and a complete cure is now effected.”

SKETCHES OF PERIODICAL LITERATURE.

ARTICULATION INDEPENDENT OF A LARYNX.

THIS occurred in an individual at Toulon, in France, who several times attempted to destroy himself by cutting his throat. The consequence was the complete occlusion of the larynx, and the formation of a fistulous air passage at the place of the wound. Notwithstanding this circumstance, he was able, during the remainder of his life, which was several years, to express himself in such manner as to be distinctly understood without much difficulty.

ANALOGIES IN THE FORMATION OF THE BONES.

IN a late number of the *Bulletin des Sciences Médicales*, we find some speculations, more curious, perhaps, than useful, on the analogies which may be traced in the formation of the bones in different parts of the body. Among the parts thus compared are the scapula with the ilium, the corocoid process with the ischium, and the clavicle with the pubis. This completes the general analogy

between the shoulder and the pelvis. The arm and the thigh, also, offer many points of resemblance, as do likewise the forearm and the leg, the wrist and the instep, the hand and the foot. It appears to have been also contemplated to institute a parallel between the skull and the sacrum, the coccyx and the atlas; but the points of resemblance being unfortunately few and far between, this part of the plan is reluctantly abandoned,—a circumstance ever to be regretted by the lovers of true philosophy. In the other corresponding parts, M. Gerdy's investigations furnish him with abundant proofs of harmony of structure, as well as similarity in design; or when a decided difference occurs in place of the conformity which should have been discovered, the author finds an apology for nature's error by pleading that the end justifies the means; and that if the parts do not correspond it is merely because they happened to be made for very different purposes; and since, *exceptio probat regulam*, the diversities in question confirm rather than invalidate the

soundness of the theory. Independently, however, of this easy method of solving difficulties and reconciling contradictions, it must be confessed that M. Gerdy has illustrated his doctrine with equal fairness and ingenuity. The following is an abridged statement of his parallel between the scapula and the os ilium, and must serve our readers for a sample of the whole production.

The shoulder is formed by the scapula, which has a remarkable process, the corocoid, and the clavicle;—its counterpart, the pelvis, is formed by the ilium, the ischium, and the pubis. The scapula is flattened, the ilium is so likewise; it is hollowed inwardly, and its cavity corresponds to the viscera of the chest, but does not touch them; the ilium is concave within, and by this concavity affords a support to the abdominal viscera. The scapula has three edges connected by angles; one spinal, another cephalic, the third external or axillary. The ilium also presents three,—the first spinal, the second caudal, the third external or inguinal. The spinal edge of the scapula corresponds to the spinal column, and gives attachment to large muscles; the spinal edge of the ilium has also a relation to the spinal column, and gives attachment to large muscles. The cephalic edge of the scapula is short, sloping, and gives origin to the corocoid process; the caudal edge of the ilium is also short and sloped, and gives origin to the ischium, which corresponds to the corocoid. The spinal and cephalic edges of the scapula are separated by the superior internal angle

of the scapula; the spinal and caudal edges of the ilia by their posterior spinous process. The latter are thicker and more extended; but this disposition is in conformity with the functions of the inferior extremities, and permits the ilium to form a solid union with the trunk.

We presume, in his next paper, Mr. G. will point out the analogy existing between the structure of the *allium commune* and the geological formation of the earth; or, perhaps, the strong points of resemblance between the contents of certain human pericrania, and the machine on which the perruquier forms his *péricranes artificiels*.

MEDICAL OFFICERS.

MUCH is said in the London journals of late on the propriety of having medical men in the office of coroner, and in the legislature. The bearing of these propositions on medical jurisprudence and anatomical science, is worthy the attention of the profession and the public. We propose to speak more at large on the latter subject at a future and more appropriate season.

ACETATE OF MORPHINE.

TETANUS and other spasmodic affections have been found to be greatly under the control of the acetate of morphine externally applied to a blistered surface. The following embrocation to the spine is recommended, and said to be efficacious in whooping cough.

R. Solut. Acet. Morph. ℥ss.
 Alcohol. Dilut. ℥iiss.
 Camph. ʒi.
 Acid Pyrolig. ℥ss. M.

 BOSTON, TUESDAY, JUNE 30, 1829.

DR. NATHAN SMITH.

WE have before us an Address, delivered to the medical class of Bowdoin College, (Maine,) by the President of that flourishing Institution. It was occasioned by the decease of the celebrated Surgeon whose name, above written, is very generally known and respected in this country, and whose history is intimately connected with that of several medical schools of standing and respectability. Dr. Smith was one of those enterprising and useful men, who, impelled by the double motive of a love of distinction, and a desire of elevating the character and extending the benefits of a favorite science, regarded personal sacrifices as necessary in effecting any great object, and therefore resolved to submit to them without hesitation or murmuring. In his march to fame, he heeded not toils of body or mind; if danger was to be brooked, or great enterprises undertaken, he was found leading the way with a bold and firm spirit, which was not to be cowered by deferred hope or temporary disappointment; if local attachments or the ties of friendly intercourse were in his path, his mind rose over them, as over obstacles of a less elevated nature. In his practice as a Surgeon, he was judicious, skilful, and successful; in his intercourse with society, he was attractive in manner, entertaining and instructive in conversation, ardent and generous in his feelings; in his family, he was anxious, affectionate, and beloved.

With such a theme, President Allen undertakes not so much an eulogy as a biography,—a species of composition with which he is well known to be familiar. His introductory remarks are unhappy. We regret that he should have undertaken the difficult task of drawing a comparison between the rank of different professions. As medical men we cannot complain of the high place he has so justly assigned the Physician; but this whole subject is treated in a manner far below the estimated talents of the author: it displays, in our apprehension, neither good taste, sound sense, nor moral acumen. What he says of the statesman, for example, evinces a lower estimate of the value of laws than we should have expected from the Principal of a College which is governed by them. It is as follows:—

“The race of statesmen may be of some advantage, although it is understood by the intelligent, that their wisest measures are such as interfere the least with individual enterprise; or, in other words, that they are wisest when they make the fewest enactments,—wisest, generally, when they do nothing. All that man wants from government is protection from injury and freedom of action. The host of laws which encourage immoralities, such as lotteries and many licenses, or which confer monopolies, exclusive privileges, and unparticipated rights, and which lay shackles on industry,—and such are the greater part of human laws,—are worse than useless. Besides, a great statesman is apt to seize upon a great project, and a great project is usually full of mischief.”

Our author next goes on to examine the influence which his professional pursuits must exert on the religious character of the Physician; and this subject, which is pursued at some length, is treated with a clearness and justness of perception, an elevation of thought and sentiment, and an eloquence, which command the feelings of the reader, and set in a strong light the high moral responsibilities which rest on those whose daily occupations urge on them strong and matchless proofs of the existence, power, and wisdom of God, the certainty of death, the shortness of life, and the pervading supports afforded by the religious principle.

In the course of these remarks of President Allen, which every physician will read with benefit as well as pleasure, one opinion is advanced, we think with rather too much confidence. It is this:—"To know anything of the mind, he (the Physician) must lay aside the knife, and must think." By this declaration the learned author intends to express his entire disbelief in the doctrine of materialism; and so far as this goes it answers well its purpose. It is, however, a principle which, carried too far into intellectual philosophy, may lead to some serious errors. That reflection,—a turning of the mind in upon itself,—is necessary to a knowledge of its powers and functions, is undoubted; but that the pursuit of this knowledge is not greatly facilitated and advanced by the simultaneous use of the knife, we apprehend few philosophers at this day will venture to assert.

One reason of the uncertainty

which exists on subjects of intellectual philosophy, may be found in the very doctrine advanced by President Allen. The mind, and the brain its organ, have been studied separately. They have been considered subjects for the investigation of entirely different classes of philosophers. The mind has been the study of metaphysicians, and the brain of anatomists. We agree with Dr. A. that *anatomists* have confined their researches too much to the *structure* of the brain; for the most accurate knowledge of the structure of an organ does not alone teach us what are its functions. An anatomist might dissect the stomach or the liver till his vision and his years were expended, without suspecting the nature of the functions performed by those viscera; and the same is true with regard to the brain. But we believe that *metaphysicians* have erred as much on the other hand, by relying exclusively on their own reflections;—without regard to what they considered the peculiar province of the faculty, without once dreaming of dissections, they have endeavored to find out the laws which regulate the human understanding by an observation of their own minds. Secluded from all but their own contemplations, they have labored to search out the peculiarities of their own intellects, and then given to the world these peculiarities as the fixed doctrines of the mind.

In mental philosophy, as in every other, it must be remembered that there are no two things precisely alike; indeed, there can scarcely be found a greater variety than in the

moral and intellectual manifestations of different men. It is, therefore, just as absurd to draw general conclusions from the study of one mind, as it would be to examine minutely the size, texture, and nature, of a single tree, and declare the result to be a true description of the forest. —In order to pursue this study to advantage, we must go abroad among men; we must exercise our faculties not in the closet, but in the world; and, with a careful and extended observation of the talents, tastes, sentiments, and dispositions of different individuals, (ourselves forming but one of the many,) we must unite a minute examination of the organ which is the seat and instrument of all these various powers and functions. If we are ever to arrive at any true and certain knowledge on this noble subject, it is, we apprehend, by a course of investigation thus freed from the errors of both the anatomists and metaphysicians; it is not by laying aside the knife, but by uniting thought and observation with a careful and assiduous use of it.

Having been led into this digression by a short but expressive sentence in the address, we proceed to give a history of Dr. Smith, as we gather the incidents from his biographer.

This energetic practitioner was born, it seems, at Rehoboth, Mass., on the 30th of September, 1762. His father, who was a respectable farmer, removed soon after to Chester, Vermont. Thus reared at the very foot of the Green Mountains, our youthful genius could not but imbibe a taste for the wildness of the

mountain scenery and the free and bounding pleasures of the woods, as well as for the healthful toils of a farmer's life. It may be that he here contracted that habit of roaming which was distinguishable through his whole life; for he not only flourished, as will be shown, in different towns and States, but was as much in his element when clad in the apparel of the sportsman, as when operating with the needle or the knife.

“In the frontier forests of Vermont,” says our author, “there sometimes lurked a more formidable enemy than the bear or wolf. The prowling Indian occasionally created alarm. It is well known that in the war of the Revolution the work of the tomahawk was purchased with British gold. Burgoyne, in his celebrated proclamation, held forth the terrors of the savage yell and war whoop. Dr. Smith once encountered the hardships and dangers of an expedition against the Indians, and narrowly escaped a bullet, aimed at him by a son of the forest from his place of ambush. At another time, on a hunting excursion in the winter, at a distance from home, a thaw rendered his return impracticable for several days, during which he had no food but the flesh of his game. Feeble and sick, with difficulty he regained his father's house, where he suffered an illness of several months. Such was his manner of life till he was twenty-four years of age.”

The early education of Mr. S. was limited; it was sufficient, however, to entitle him to admission at the University, and it is unfortunate that he did not enjoy the advantages a University education would have given him in a profession for which he had a natural fondness. There is nothing enchanting to a general

observer, in a surgical operation ; yet it was on witnessing such a scene that Mr. Smith first discovered "an irresistible desire of becoming a student in medicine." He pursued his professional studies under the direction of the venerable Dr. Josiah Goodhue, of Putney, and, the usual term having expired, commenced the practice of Physic and Surgery at Cornish, N. H. Soon after this he resorted to Cambridge, for the purpose of attending medical and philosophical lectures at Harvard College ; and in 1790, having received the degree of Bachelor in Medicine, returned to his former residence. It was here, in the intervals of his professional occupations, that he projected a plan for a medical school, to be attached to Dartmouth College ; and having procured the approbation of President Wheelock, he again left Cornish in 1796, and embarked for Europe, with the purpose of procuring the necessary apparatus for commencing the school. Whilst abroad, his time appears to have been spent in attending the lectures of celebrated teachers ; and it was, in those days, so rare a thing for a wanderer from this western wilderness to be seen in the medical schools of Europe, that he received every attention and facility for effecting the objects of his visit. That he was well esteemed is shown by the fact, that after leaving London he was chosen member of the Medical Society of that city ; but of the visible apparatus for a school he was the means of procuring, we have only the following account :—

"From Edinburgh he sent to

Dartmouth medical books to the value of thirty pounds, which books, as he said in one of his letters, he hoped the trustees of the college would purchase, as he could ill bear the expense. At London he procured, also, as far as he deemed indispensable for commencing the proposed medical institution, an apparatus for anatomy, surgery, and chemistry."

The proposed institution was opened in 1798, and was the fourth medical School* ever established in the United States. The first lectures were given by Drs. Smith and Lyman Spaulding, and among the honors conferred that year, was the degree of Doctor of Medicine on Dr. Smith, who was also appointed sole Professor in the medical School. In this responsible station he had no coadjutor till 1810, when Dr. Cyrus Perkins, now of New-York, was appointed Professor of Anatomy.

In 1813 we find Dr. Smith taking leave of Hanover, and accepting the appointment to the Chair of the Theory and Practice of Physic and Surgery in the School then about to be opened at Yale College, where the succeeding sixteen years of his life were passed in lecturing to the medical students, in the active and extensive exercise of his duties as Physician and Surgeon, and in gathering, both as a Professor and practitioner, that enviable distinction which is now generally accorded him.

In 1821, having encouraged the authorities of Bowdoin College in their project of establishing a medical school at Brunswick, and promised to coöperate in its execution, he be-

* There are now twenty.

came the first lecturer in that school also, and delivered a course embracing all the subjects taught in the school, except Chemistry, in which branch Bowdoin College has long enjoyed the able and profound instructions of one of the ablest chemists and mineralogists of the age.* There were but twenty-one young gentlemen who attended this first course, and the biographer attributes the rapid advances of the school, in a great degree, to the reputation, skill and experience of Dr. Smith. Of this there can be little doubt, for his reputation as a Surgeon was so great as to induce the afflicted to seek relief at his hands from different and distant parts of the State. During the first course of lectures, for example, he couched nearly twenty eyes for the cataract. One eye was completely removed; a leg was amputated; and various other surgical operations were performed by him.

After five years he relinquished his connection with Bowdoin College, and again confined the sphere of his labors to New-Haven, where he shortly after sickened, and died of a palsy on the 26th of January last, in the 67th year of his age. In his last hours he was consoled by the anxious solitudes of an affectionate family, by the kind attentions of some of his former pupils, by the retrospection of a life spent in doing good, and by the belief that "he died in the faith and hopes of the gospel."

EXTIRPATION OF THE SPLEEN.

THIS operation has been performed by one individual on twenty-seven

living animals; and to judge from the meagre results which have been obtained, the cause of science has certainly been little benefited by the time and labor bestowed on them: we might say the same of the cause of humanity, did not the word sound strangely to us in such connection.

We gave, last week, some experiments on living animals, which, in their results, and some striking traits of character, are not very dissimilar to those here alluded to; we regret to add, however, that these last were no fiction;—they were really performed, and the results have been as follows:—Death ensued in one instance, and in this animal another operation had previously been performed. In the rest, after the wounds were healed, it was not remarked that the functions were greatly deranged. The stomach continued to digest food, but when the animals had eaten too much or too fast, vomiting ensued with great facility,—a circumstance which was probably owing to the local irritation of the diaphragm from the wound. The bile was secreted, but in rather less quantity than usual, and lymph drawn from the thoracic duct presented the usual properties. If the operation is performed on young animals, it does not interfere with their subsequent growth, and nutrition seems to go on with the same rapidity as ever. The only function which appears to suffer from the removal of the spleen is that of procreation. In those in which this faculty has not yet appeared it develops itself more slowly, and where it already exists is considerably impaired.

Dogs in whom the operation has

* Professor Cleveland, author of an elementary work on Mineralogy.

been performed, seem to acquire increased speed in running.

CURE DES RAISINS.

A CURIOUS mode of treating dyspeptic complaints, induced by high living, irregularity in diet, &c., is adopted at Frankfort, in Germany. It consists in sending the patient into the country during the vintage season, to live on fresh grapes. Lodgings are engaged in favorable situations, with the understanding that the individual is to be furnished with about three pounds of grapes daily. These are taken from the vines at three meals; the second one, or dinner, to be at 1 o'clock. No other article of diet is permitted except a little bread. While under this treatment the patient rises early, and goes to bed at 8 or 9 o'clock in the evening; and the cure is usually completed in about a month.

TANNIN IN UTERINE HEMORRHAGE.

THERE are few practitioners who have not felt the want of some more certain means than we possess, of arresting uterine hemorrhage or protracted menorrhœa. It is therefore worthy of notice that *tannin* has been found particularly efficacious in such cases. Five instances are related by Dr. Porta in an Italian journal, (*Annali Universali di Medicini*), in which it proved curative in a few days, after other remedies had failed.

Dr. Porta states that these are only a few of the numerous cases in which he has employed the tannin with success; and, during three years, he has only met with two cases in which it failed. From the repeated opportunities he has had of observing its action, Dr. P. has drawn the following corollaries:—

1st. That this medicine acts in a particular manner upon the uterus, when that organ is the seat of an irritation which gives rise to hemorrhage, and when this bleeding results from chronic metritis.

2dly. In hemorrhage arising from acute metritis, it is necessary first to combat the inflammation by repeated sanguineous evacuations, and then to have recourse to the tannin.

3dly. It has no beneficial effect in those hemorrhages which are the result of organic alteration of the uterus.

4thly. This remedy ought to be preferred to all others in the treatment of uterine hemorrhage, not only on account of the promptitude with which it causes the symptoms to disappear, but because the dose necessary for this purpose is so small as not to disagree with the stomach even of debilitated and irritable persons. The dose is about two grs.

Disease of the Heart caused by Onanism.—Dr. Krimer, of Aach, has lately published an interesting paper on this subject. Our own experience has furnished us with several opportunities of seeing cases of the kind he describes; and, as the subject has not hitherto been particularly discussed, we shall give the leading points of his communication.

Dr. K. is of opinion that diseases of the heart, which have increased so much within the last twenty years; do not always depend upon organic alteration, but are very frequently produced by the baneful and lamentably frequent practice of the vice of onanism. Headachs, great anxiety, palpitations, faintness, an oppression and unusual sensibility in the epigastric region, are the first symptoms produced. They increase in severity in proportion as the subject gives way to the gratification of his unnatural propensity, and quickly diminish, or cease altogether, if he abandons it. To support his opinions,

Dr. K. states many cases. He enumerates the following symptoms as pathognomic of such affections of the heart; by an attention to which, the practitioner will be enabled to distinguish the train of symptoms from other diseases which are not unfrequently suspected.

1. The hair loses its natural brilliancy, is remarkably dry, and frequently splits at the extremities. It falls off easily and in large quantities, especially from the fore part of the head. In persons affected with consumption, or organic disease of the heart, the hairs appear well nourished, and rarely fall off.

2. The eyes are dull, downcast, frequently full of tears, without expression, and deeply sunken in their orbits. The edges of the eyelids are reddish, and surrounded by a bluish tint. In phthisical patients, and those with organic disease of the heart, the eyes are brilliant, and always preserve their natural expression and vivacity. In young females, at the approach of menstruation, a blue circle is commonly observed around the eyes, but here also their brilliancy is undiminished.

3. The patient appears very timid, and unwilling to look other people in the face.

4. Periodical headach is common, extending from the occiput towards the forehead.

5. The power of sight is diminished, the appetite is lost, and the tongue is usually loaded. A slight cough, short and difficult respiration, are generally present; but still the patient can draw a deep inspiration.

6. Pains in the stomach, with weight and pressure in the epigastric region. Patients with organic diseases of the heart have occasionally these symptoms, but in such cases they are not accompanied by those above enumerated.

7. A general feeling of lassitude and feebleness of the limbs, with pains in the lower part of the back. We would add, also, that pain and

throbbing of the testicles, with uneasy sensations shooting up the spermatic cord, are frequently complained of.

8. The perspiration has a dull and sweetish odor, similar to that of infants at the breast.

9. If the vice of onanism be touched upon in conversation, the agitation and embarrassment of the patient invariably betray him.

10. If the practice be continued, the mind is at length enfeebled, the patient is incapable of mental or bodily exertion, and sinks into a state of somnolency.—*Hufe. Journ.*

Intestinal Worms expelled by Means of Croton Oil.—M. Balby has found the croton oil efficacious in cases of invermication; one of these is as follows:—

—Ginet, aged 24, admitted into La Pitié last March, brought with him a bottle, containing a long piece of the *Tænia vulgaris*, which had been expelled, after much suffering, by means of the pomegranate. He still complained of oppression and uneasiness in the ileo-cæcal region, which he attributed to the remains of the worm. The day after his admission one drop of croton oil was administered, which was followed by seven or eight motions, bringing with them several yards of tape-worm. After a respite of three or four days, another dose was administered, which brought away about two yards more. The portion obtained this time was not so broad, and evidently one of the extremities, in which, however, the characters of the head could not be perceived.

On the 30th of March two drops were given. This was followed by ten motions, with a quantity of the debris of the *Tænia*, and a large female *lumbricus*. Since this time Ginet has experienced no inconvenience.—*Med. Gaz.*

Cartilaginous Bodies within the Knee-joint.—On the 8th of Decem-

ber Mr. Cowan extracted two cartilaginous bodies from the knee-joint of a stout healthy-looking young man, a farm servant. They gave great pain, and much impeded the motions of the joint. The one was about the size of a field bean, the other somewhat smaller. They were cartilaginous externally, but on a section being made, the central part appeared entirely ossified. He had two similar bodies extracted six months previously, and immediately afterwards observed the present two. Knew of no cause. When he left the hospital, a small, hard, immovable tumor, painful on firm pressure, was observed at the upper part of the same joint,—probably a body similar to those extracted, but adherent to the synovial membrane. The incision healed easily by the first intention.—*Ib.*

Egyptian Surgery.—A medical school of considerable promise has been established in Egypt, and it seems that surgery especially flourishes at Abouzabel. The principal surgeon, M. Clot, has tied the external iliac, and performed amputation of the arm at the shoulder-joint, and of the lower limb at the hip: the two former cases had proved extremely successful, and the third was doing well at the end of nine days, when the account is dated. Fifty capital operations are said to have been performed, all with success: among them were twenty-two cases of lithotomy, and not one of the patients died, notwithstanding that M. Clot has tried all the different methods of performing the operation which have ever been described!—*Ib.*

Borax in Cutaneous Diseases.—Dr. Reinhart states that he has used a solution of borax (3ss. to an ounce of water) with great success, as a local application, in various chronic cutaneous diseases. Pieces of linen are to be dipped in the solution, and applied to the part. A slight sense

of heat, and some redness of skin, result: if these be considerable, the application is to be intermitted for a few days.—*Jour. der prakt. Heilk.*

Lithonriptor.—Recent excavations made at Pompeii have stripped our times of the honor of this invention, for in opening the dwelling of a surgeon, among the ruins of that overwhelmed city, the identical dilator and extractor here alluded to, was found among a variety of other instruments with which that dwelling abounded. The Pompeian extractor is made of bronze.—*Weekly Rev.*

Curious Hybrid.—There is now at Berlin an animal produced between a stag and a mare. The appearance of the creature is remarkable: the fore part is that of a horse, and the hind part that of a stag, but all the feet are like those of the latter animal. The king has purchased this hybrid, and sent it to the menagerie at Potsdam.—*Lond. Med. & Phys.*

Method of preventing the evaporation of Spirits.—A mode of preventing evaporation very applicable to anatomical preparations is simply to cover the surface with a stratum of oil of almonds.—*Lond. Med. Gaz.*

NOTICES.

A Communication from Dr. Warren, of Wardsborough, is received, and will be published in an early number.

The reader will please turn to p. 269 and erase the word *pint* in the note at the bottom of the page, and write *quart* in its place. On page 300, Syfred should be Lyford.

REPORT OF DEATHS IN BOSTON,

The week ending June 19, at noon.

Of accidental, 1—consumption, 2—convulsions, 1—croup, 1—cramp in the stomach, 1—infantile, 1—lung fever, 1—measles, 1—old age, 2—teething, 1—unknown, 1. Males, 8—females, 5. Stillborn, 2. Total, 15.

ADVERTISEMENTS.

CARTER & HENDEE

HAVE just received LIZAR'S ANATOMICAL PLATES, in 12 Nos., cold and letter press.

Barton's North American Flora, 3 vols.
do. Medical Botany, 2 vols.

Bonaparte's Ornithology, 3 vols.

A System of Human Anatomy; translated from the 4th Edition of the French of H. Cloquet, M.D. By ROBERT KNOX, M.D. F.R.S.E.

TURNER'S CHEMISTRY,—NEW EDITION.

JUST published, and for sale, by CARTER & HENDEE,—Elements of Chemistry, including recent Discoveries and Doctrines of the Science. By EDWARD TURNER, M.D. F.R.S.E. Second American Edition.

MANUEL FOR THE USE OF THE STETHESCOPE.

CA RTER & HENDEE have recently published,—A short Treatise on the different Methods of investigating Diseases of the Chest. Translated from the French of M. Collins, by W. N. RYLAND, M.D. From the third London Edition, with Plates, and an Explanatory Introduction, by a Fellow of the Massachusetts Medical Society.

In preparing for the American press the English translation of the well known and highly useful work of M. Collins, which translation has passed through three editions in England, the Editor thinks he can render it more acceptable by dispensing with the various prefaces and introductory remarks which encumber the last edition, and by substituting in their place an entirely new introduction, which is intended to embrace the amount of all that is important in the prefaces alluded to, as well as that which is contained in various abstracts and reviews which have appeared of treatises upon the different methods of investigating thoracic diseases, and in some other works which are not generally before the profession in this country.

C. & H. keep constantly for sale Stethoscopes of the most approved form.

FRENCH WATER COLORS.

COTTONS & BARNARD, 184 Washington Street, have for sale, the following Water Colors, of an excellent quality, manufactured by P. C. Lambertye, (France,) viz: Bistre, Raw Cassel, Burnt Umber, Raw Umber, Egyptian Brown, Vandyke Brown, Brown Pink, Seppia, Violet Lake, Carmine Lake, Sanders Blue, Prussian Blue, Mineral Blue, Indigo, Yellow Ochre, Yellow Mineral, Gamboge, Yellow Orpiment, Yellow Lake, Naples Yellow, Burnt Italian Earth, Burnt Sienna, Raw Sienna, Italian Earth, Crocus Martial, Green Lake, Sanders Green, Sap Green, Mineral Green, Prussian Green, Vermillion, Saturnine Red, Indian Red, Red Ochre, Red Orpiment, Flake White.

Also—a great variety of Newman's, Ackerman's, Reeves's and Osborne's Colors, in boxes and separate cakes.

DENTAL SURGERY.

THIS day received by CARTER & HENDEE, No. 135, Washington Street,—A SYSTEM OF DENTAL SURGERY. In three parts.

1. Dental Surgery as a Science.
2. Operative Dental Surgery.
3. Pharmacy connected with Dental Surgery.

By SAMUEL SHELDON FITCH, M.D., Surgeon Dentist. *Denticum curam habeto ut bene digeras et diu vivas; laxatis dentibus laxantur et chylaceo officinæ; hinc mille malorum occasiones.*—Baglivi XIII. March 17.

ep6w

LONDON STATIONARY, &c.

JUST received by COTTONS & BARNARD, 184 Washington Street, Crown and Double Crown Tissue Paper, large thin Bath Letter Paper; Billet Paper, Demy and Royal Bristol Board, do. do. London Board, Newman's Carmine, Music Paper.

A COPY of Bloomfield's Critical Digest of Sacred Annotation on the Gospels, 3 vols. 8vo. "The most learned Commentary in the English language." For sale by COTTONS & BARNARD, 184 Washington Street.

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within theyear. The postage for this is the same as for other newspapers.

I.

ARTIFICIAL URETHRA.

Operations for Artificial Urethra, performed at the Massachusetts General Hospital, and reported for the Boston Medical and Surgical Journal.

Case 1st.

Nov. 13, 1828.—Martin Diederrick, a Swede by birth, of large muscular frame and firm constitution, about twenty years ago had a gonorrhœa. Two years after, he began to have difficulty in passing urine, which has continued increasing ever since. Applied at the Hospital in August last, at which time the urine flowed guttatim from the urethra and from a fistulous opening in the scrotum. A bougie of the smallest size could not be passed. Began the use of caustic bougies, and at the end of a month the urine all passed by the urethra, and the opening in the scrotum closed;—was discharged Sept. 26, and directed to continue the use of the bougies, and also the following:

R. Tr. Hydrarg. Oxy. mur. gtt. xxx.
Spt. Æth. Nitros. gtt. xv. M.
ter in die.

and, if not relieved, to return in about three months.

Has gained about a quarter of an inch by the use of the caustic, the bougie now passing four and a half inches; urine passes more freely

through the urethra than formerly; general health quite poor; appetite small; has daily and very severe chills and rigors; flesh sufficiently good, but muscular strength much diminished. Was directed the Sulphate of Quinine, to which the chills and rigors gave way in a few days.

Dec. 29.—Has continued comfortable, occasionally endeavoring to pass a bougie, which invariably causes inflammation about the bulb of the urethra, and increased difficulty in passing the urine. Now has strong symptoms of approaching fever, for which he was bled, vomited and purged.

Jan. 7.—Health much improved, and is now judged to be sufficiently good to enable him to undergo an operation. Warm bath to-day. Let him have, three times a day, the following:—

Wine, ℥ij. in Decoc. Cascarrillæ, ℥ij.

9.—Active cathartic to-day. Shave perineum.

10.—Cathartic not having operated, an active enema was administered at 11, A.M., which operated before noon.

Operation.—The patient was placed upon the table, and bound as for the operation of lithotomy; a grooved staff was passed into the urethra down to the stricture; a triangular flap was then dissected

from the perineum, beginning just behind the scrotum and extending towards the anus, where the base was about an inch in breadth. Dr. Warren then cut down upon the staff through the bulb of the urethra; he then attempted to seek out the natural passage by means of a probe, and having spent some time without success, he took a probe-pointed bistoury, and thrust it onward in the course of the urethra towards the neck of the bladder, it being guided by the finger passed into the rectum, and thus prevented from piercing its coats. The bistoury was successfully directed and passed into the bladder, and the passage was enlarged as the instrument was withdrawn, urine following it. A small silver catheter was then passed into the bladder, as was certified by a copious flow of urine through it, and was there confined by a ligature passed through its wings and under a bandage secured around the penis. The hemorrhage was slow, but, on account of the length of the operation, was considerable. Two small arteries were tied and the patient put to bed.

R. Tr. Opii, gtt. lx. statim.

Two hours after, the hemorrhage having ceased, the wound was closed by suture and adhesive plaster, and the whole secured by a compress and T bandage. Soon after dressing, the patient had severe chills and rigors,—was ordered warm wine and water and a heater to the feet,—soon got relief, and shortly after fell asleep.

Jan. 11.—Slept comfortably during the night; says he feels better than for a week before the operation. Pulse 120; two dejections this morning; water runs freely from the catheter. Penis and parts

about to be kept moist with hog's lard.

12.—Yesterday complained of pain in the bowels across the umbilicus. Hot fomentations to the abdomen half an hour.

R. Spt. Æth. Nitros. gtt. xxx.

Tr. Opii, gtt. xx. M.

every two hours, till bowels be relieved. This morning pain in the bowels continues, but less severe; slept well in the night; two dejections this morning; pulse 96, more full; tongue somewhat coated; some appetite.

R. Spt. Æth. Nitros. gtt. xx.

Tr. Opii, gtt. v. M.

every four hours.

R. Pil. Hydrarg. Submur. Comp.

every night.

13.—Yesterday much pain in the hypogastrium, with a sensation as if the catheter were passing the bladder. Catheter was withdrawn about three-fourths of an inch, with entire relief to pain. Pulse 90. Wound dressed; union has taken place in some parts; urine passes freely through the catheter, and through the wound when the stopper is in the catheter. Complains of numbness in the thighs and legs; let them be rubbed with warm spirit and vinegar, equal parts, night and morning. Omit drops, unless pain require them.

15.—Pulse 80; tongue more clean; appetite increased; ligatures and sutures have come away, leaving the wound about half united; suppuration free. A large catheter introduced.

17.—Pulse natural; tongue nearly clean; some internal pain in the abdomen; costive; very little urine through the wound. Catheter withdrawn, and a large flexible metallic one introduced without difficul-

ty. Somewhat annoyed by cough. Was ordered a cathartic and cough mixture. Diet, shells in the morning; milk porridge or broth at dinner; tea at night.

20.—Much more comfortable; gains appetite; sleep sufficient.

22.—Cough gone; very little pain, and is annoyed only by weight of the catheter. Omit cough mixture.

25.—Mouth and gums sore; mercurial fœtor. Catheter to be withdrawn and cleaned. Omit pill.

27.—Wound looks well; no urine passes through it; gets up to have the bed made without difficulty; much annoyed by sore mouth; takes but little food.

Feb. 4.—This morning the metallic catheter was removed, and a gum elastic one substituted; urine did not flow readily through this, and burst out through the wound; this was withdrawn and the metallic one replaced.

8.—Doing well; no urine from the wound.

12.—Catheter removed. About an hour after, the patient was in great pain, with a sensation of great distension of bladder, but could pass no water; none, however, came through the wound. The catheter was introduced again with relief, though with some difficulty, as the orifice of the urethra had become contracted and the parts about swollen; also some obstruction was met with at the wound.

15.—A very small portion of the wound remains unclosed; no urine passes through it, though a probe passed into it strikes the catheter. Touch the wound with Argent. Nitrat. daily. Catheter was again removed for an hour: some symptoms occurred as before, but with less severity.

28.—Complains of soreness and stiffness across the perineum; wound quite healed; catheter removed; to be passed daily.

March 18.—Gains strength; gets up and walks by the aid of crutches without complaint, except a pain running down the inside of the thighs, and stiffness of the knees; for which frictions with volatile liniment were used.

April 29.—Discharged well.

Case 2d.

April 23, 1829.—Mr. Patrick Bryan, æt. 26, about seven years ago, was exposed to *venereal infection*, as he supposed, and from an apprehension of evil consequences was induced to employ stimulating injections, hoping by such anticipation to avoid injury. After using such remedies for some time, he thought it safe to lay them aside; from that time he was well till four years since, when he began to feel some uneasiness in the urinary organs,—sometimes a smarting at the end or near the end of the penis; sometimes under the symphysis pubis, and in the bladder. Soon observed that he passed his urine oftener and by a smaller stream than usual. He noticed that the stream gradually diminished in size, that the pain at the end of the penis increased, and that he could not always void urine when he felt an inclination. He went on with more or less inconvenience in these parts till last winter, when he had a gonorrhœa. This he was cured of, by employing injections, in about a month. Three weeks after he thought himself well of the gonorrhœal infection, he had great heat, pain and soreness in the perineum; pain was increased by the passage of the water; the parts thickened and ulceration took

place, making two openings communicating with the urethra, through which openings the water constantly passes. There is now considerable inflammation in the perineum; the prostate, on examination per rectum, is found somewhat enlarged and indurated. Attempts have been made to reach the bladder with a catheter, but without success. The pain produced in these attempts is almost excruciating when the instrument reaches to about opposite the fistulæ. General health good; habits temperate.

24.—Attempted again to pass a catheter into the bladder, but did not succeed.

R. Solut. Mag. sulph. ℥iv.

Vesp. Balneum Tepid. et repetetur in dies.

27.—Some want of success in the use of the catheter as before. Perineum much inflamed.

R. Pulv. Jalapæ,

Hyd. Submur. āā gr. x. M.

Appl. Perineo Hirud. No. xx.

29.—Stream of water better than when he entered the house; inflammation in the perineum greatly subsided; catheter cannot be passed into the bladder, but goes quite to its neck.

R. Solut. Mag. Sulph. ℥iv.

Vegetable diet.

May 7.—Consultation of surgeons to-day. The case was carefully examined and an operation advised.

10.—Patient chooses to submit to the operation, since that all attempts to get into the bladder have proved abortive.

13.—

Sum. Solut. Mag. Sulph. ℥iv.

14.—Operation at 11, A.M., by Dr. Warren.—The patient was

placed upon the table and the hands and feet secured, as for the operation of lithotomy. The perineum having been shaved, the *first incision* was made near the posterior part of the scrotum, and perpendicular to the raphe. This was an inch and a half in length, from the extremities of which two other incisions were made, extending toward the tuberosity of the ischia; the skin and cellular substance were then dissected up, forming a flap which contained the two fistulous openings.

The *next step* in the operation was to cut for the *staff*, which had been before passed into the urethra as far as the stricture. This was accomplished by making an incision through the membranous part of the urethra. Through this a *probe* was passed, coming in contact with the staff; the latter was then removed, and after a few minutes spent in varying the directions of the instrument to trace out the natural course, the probe passed into the bladder, and urine passed in a small quantity by its side. The urethra was tortuous and almost obliterated near the neck of the bladder. A director was now carried into the passage by the side of the probe, but could not enter the bladder till the probe was removed, nor then without much difficulty. The operator now passed in upon the director a probe-pointed bistoury, and succeeded in dividing the stricture, after which a silver catheter of good size was passed into the bladder and secured there. The *flap* was now secured by three sutures, dressings applied, and the patient removed to the ward. In a short time after this, there was very copious hemorrhage from the wound, but it was checked by cold applications;—very little bleeding

during the operation. In the evening fresh dressings were applied.

15.—Did not sleep much last night. Pulse 92; tongue slightly coated; no tension of the abdomen; no swelling of the scrotum; has had no hemorrhage since yesterday. Have no meat nor bread.

R. Sol. Mag. Sulph. ℥iv. et rep. in hor. 4ta si opus sit.

16.—Has been very comfortable; slept some yesterday and last night; no hemorrhage; no constitutional sympathy; water passes by the wound and by the side of the catheter.

17.—Last evening water passed through the catheter for the first time, but not very freely.

18.—Catheter removed, cleaned, and replaced without difficulty. Sutures removed yesterday. Wound healing rapidly.

23.—Less urine by the wound daily. Appetite good; no pain; sleeps well; slight excoriation of the scrotum produced by the water. Besmear the parts with simple cerate daily.

27.—Wound in the perineum is quite closed; catheter is removed and replaced without difficulty; cellular membrane of the scrotum over the right testis considerably inflamed, and productive of much uneasiness.

Scrotum cum. Decoc. Artemis.
Absinth. foveatur.

28.—

Appl. Scrot. Hirud. No. vi. Postea foment.

June 2.—Inflammation continues; no water now by the wound; catheter left out for three hours, then replaced easily. Repeat leeches.

6.—Warm bath, afterwards poultice to the scrotum.

R. Sol. Mag. Sulph. ℥iv.

8.—Appetite not so good as it has been; suppuration is going on in the scrotum; mucous discharge from the catheter, though he complains of no pain in the bladder.

R. Spt. Æth. Nitrosi, ℥i.

Tr. Opii, ℥i. M. sum. ℥i. quaq. hor. 4ta.

Continue poultice to the scrotum.

10.—Catheter left out eight hours; passes water well, and has perfect control of the discharges; catheter replaced without difficulty.

12.—Abscess is formed; fluctuation of matter distinct; no mucous discharge now from the bladder; appetite returned. Continue poultice.

14.—Abscess opened; discharged freely. Catheter is left out for some hours daily.

17.—Abscess in the scrotum healing fast. Catheter is now removed in the morning. Patient walks about anywhere, passes his water with ease, and in all respects seems about ready for discharge.

II.

Communicated for the Medical and Surgical Journal.

PURPURA HÆMORRHAGICA.

A Case of Purpura, or as it is called by Dr. Good, Porphyræ Hæmorrhagica, or Land Scurvy, successfully treated.

By JOHN P. WARREN, M.D. of Wardsborough, Vermont.

It is not, I am aware, from the unfrequent occurrence of insulated cases of a disease, that we

should, on common occasions, attempt to illustrate new principles in its pathology, or establish facts of general application in regard to its treatment. This is not designed in the present instance. My object is simply to present a statement of facts in the following imperfect report of an interesting case of *Porphyra Hæmorrhagica*. The curious and striking phenomena which the case presented, rendered it one of intense interest to me, and it did not, of course, fail to make a strong and deep impression.

On Monday evening, the 3d of last November, I was requested to visit Hollis Towne, aged twenty one years, a laborer, of temperate habits and good constitution. He informed me that on the Saturday preceding, while walking at night, he accidentally slipped and fell to the ground, which jarred him very considerably, but from the effects of which, he felt no material inconvenience, and next day (Sunday) rode from home on horseback, a distance of fourteen miles, in the enjoyment of apparently perfect health. Within an hour or two after performing this journey, without any of the ordinary recursive symptoms of indisposition, he was attacked with hæmorrhage from the nose. During the night and a part of the subsequent day it was profuse, but at this time, had, in some measure, abated. Cold water applied to the head, and numerous astringents in popular esteem snuffed up the nostrils, had been perseveringly tried, and with only temporary benefit. Early on the morning of the 4th his attention was drawn to a singular sensation in his mouth, an inspection of which, to his surprise, discovered numerous dark

spots resembling portions of coagulated blood. From these, blood was continually oozing.

On examination of my patient, I found the appearances corresponding with his description of them. The inner surface of the cheeks, lips, the gums and tongue, were studded with spots resembling blood-blisters, most of which had ruptured, and around which, as to nuclei, coagula had formed. Every part of the body, not even excepting the face and hands, was sprinkled over with purpurous spots. They were vesicular, varying in size, some being of the bigness of a split pea, others no larger than a pin's head, distinct, and containing black blood. I did not detect any upon the hairy scalp. They resembled precisely the inky petechiæ which I once noticed in an exhausted state of a patient from measles. On the arms and lower extremities, patches of the skin appeared analogous to parts from the effects of a bruise, or, not unlike examples of *Porphyra Senilis*, occurring on the hands and forearms of elderly people. In addition to these symptoms there was pretty profuse Hæmaturia; the urine deposited, on standing, a nearly equal proportion of blood. The patient estimated the quantity of blood lost at about four pounds, but this could not be exactly determined. The appetite was but little impaired, and the bowels were regular. He complained of head-ach over the orbits, and his face, notwithstanding the loss of so much blood, was flushed. Pulse feverish, full, but without hardness. Tongue moist and but slightly furred. There was an expression of anxiety in his countenance.

Reflecting on all the circum-

stances of this, to me at least, novel and interesting case, I was embarrassed to determine what were the leading indications. A question arose whether the hæmorrhage in the present instance was occasioned by the violence of the fall, or whether it was indeed spontaneous; whether it was in fact an entonic or atonic hæmorrhage. Had it been the result of the shock from the fall, it would, doubtless, immediately have supervened, and by the use of appropriate remedies, would soon have ceased. If we admit the existence of a rupture of vessels merely, which in spontaneous hæmorrhage has not, we think, been proved, how shall we account for those extravasations of blood in the dermoid and mucous membranes? Those appearances cannot perhaps be reconciled in any other way than by supposing that a general disease of the exhalants existed, and that the hæmorrhage was induced by anastomosis, or dilatation of the mouths of the vessels, as is maintained by Bichat and others. The absence of symptoms indicative of entonic action, or of inflammation of visceral organs, and the hue of the blood, did not at first view authorize the employment of farther depletion. On the other hand, the irritated full pulse, headach, flushed face, the hæmorrhage not profuse, together with the comparative inefficiency of the means employed to check it, determined me to adopt the antiphlogistic plan of treatment. Accordingly, I took twenty ounces of blood from a large orifice. Slight faintness was induced. The blood exhibited a thin buffy coat. The hæmorrhage entirely ceased for a few hours. Refrigerants to the

head and astringents to the nose and mouth, the principal of which were a saturated solution of alum in water, sulphate of zinc, borax and infusion of marsh rosemary, were, in the meantime, unremittingly applied. A low diet was enjoined. On Tuesday morning, the 5th, the symptoms of excitement had, measurably, subsided. The hæmorrhage recurred, though less profusely than on the preceding day. The number of purpurous spots upon the skin had diminished. The gums and interior of the mouth presented much the same dark, bleeding, fungous appearances as before. On the 6th was visited again; the above mentioned symptoms continuing, was bled to twelve ounces. Some aperients were administered, together with the use of gargles. The hæmorrhage now ceased entirely, the mouth and surface cleared up, and the patient was gradually restored to health.

The occurrence of cases of the species of *Porphyra* in question is, it is believed, extremely rare in warmer latitudes, and in the crowded cities of Europe; and in this country especially, amongst the hardy yeomanry of Vermont, "the bone and muscle" of our nation, it is presumed to be without parallel.

The young man, the subject of this memoir, had previously enjoyed uninterrupted health, with the comforts of life. Hence the obscurity of the pathology of the disease. The real pathology of the genus *Porphyra* is conceded to be congestion of the liver or adjacent viscera; and dissection, says Dr. Plumbe, has proved this to be no uncommon cause of the disease. The treatment of *Porphyra Hæmorrhagica* by venesection is no

new treatment. Dr. Parry of Bath, (Eng.) cured two patients speedily by two bleedings from the arm; and the distinguished Editor of the *Medico-Chirurgical Review*, states that during the last year, a man in St. Bartholomew's Hospital, under the care of Dr. Latham, was cured by "one bleeding and a few doses of aperient medicine containing calomel." Drs. Bateman and Good accord in recommending the same plan, "for," says the former, "if marks of febrile irritation are considerable, and the spontaneous hæmorrhage not profuse, local and general bloodletting may, doubtless, be employed with great benefit."

III.

MEDICAL MEMORANDA.

Anatomical Dissection.

THE following memorandum was written by the late Major Cartwright, of London, and found among his papers about a fortnight after his death. It shows an ardent and disinterested zeal for the welfare of mankind, which is highly honorable, and forms a strong contrast with the grovelling ideas on this subject displayed by some modern legislators.

"The importance to society of medical knowledge is obvious. Medical knowledge must be founded on anatomical knowledge; and, in proportion as physicians and surgeons are skilled in anatomy, will be their usefulness. That all students in surgery should *practically* study anatomy is doubtless necessary, since the mere *theory* to be learned from books cannot qualify a surgeon to perform difficult and delicate opera-

tions; nor can those who study medicine expect to improve their science unless they shall add to books a practical study of anatomy.

"Reflecting on the foregoing considerations, and also recollecting that the separation of the atoms of our bodies by worms is unavoidable, it seems desirable, for the benefit of society, that they should previously be dissected by the teachers of medicine and surgery.

"It is therefore my wish, that, very soon after my decease, my corpse may be committed to the care of my friend, Dr. Harrison, (if at that time in London), or to Mr. Cline, or to the last attending physician, to be removed to Surgeons' Hall for dissection, in a regular lecture, and then immediately deposited in its coffin, ready for being conveyed to the place of interment. But all this, relative to dissection, to be on condition of Dr. Harrison, Mr. Cline, or such last attending physician, engaging for the punctual observance of what I wish to be done, to the entire satisfaction of my executors, on whose consent the whole must depend. My own wish is simply that my body, after death and before its decomposition, may be instrumental in promoting the good of mankind."

The Oath of Hippocrates.

I SWEAR by *Apollo* the Physician, by *Æsculapius*, by *Hygiæa*, and *Panacca*,* and by all the *Gods* and *Goddesses*, that, to the best of my power and judgment, I will faithfully observe this oath and obliga-

* The daughters of *Æsculapius*, and esteemed Goddesses of Health.

tion. The *master* that has instructed me in the *art*, I will esteem as my parents, and supply, as occasion may require, with the comforts and necessaries of life. His *children* I will regard as my own brothers ; and, if they desire to learn, I will instruct them in the same *art* without any reward or obligation. The *precepts*, the *explanations*, and whatever else belongs to the *art*, I will communicate to my own children, to the children of my master, to such other pupils as have subscribed the *Physician's Oath*, and to no other persons. My *patients* shall be treated by me, to the best of my power and judgment, in the most salutary manner, without any injury or violence ; neither will I be prevailed upon by another to administer pernicious physic, or be the author of such advice myself ; nor will I recommend to women a *pessary* to procure abortion, but will live and practise chastely and religiously. *Cutting for the stone* I will not meddle with, but will leave it to the operators in that way. Whatever house I am sent for to, I will always make the patient's good my *principal aim*, avoiding as much as possible all voluntary injury and corruption, especially all *venereal matters*, whether among women or men, bond or free. And whatever I see or hear in the course of a cure, or otherwise, relating to the affairs of life, nobody shall ever know it, if it ought to remain a secret. May I be prosperous in life and business, and forever honored and esteemed by all men, as I observe, and not confound, this solemn *oath*; and may the reverse of all this be my portion, if I violate it and forswear myself.

Prayer of Dr. Good.

We subjoin to the above the following form of Prayer, which was habitually offered every morning by the late Dr. Good. It was his particular desire that it should close the future editions of his Study of Medicine.

“O THOU great bestower of health, strength, and comfort ! grant thy blessing upon the professional duties in which this day I may engage. Give me judgment to discern disease, and skill to treat it ; and crown with thy favor the means that may be devised for recovery ; for, with thine assistance, the humblest instrument may succeed, as, without it, the ablest must prove unavailing.

“Save me from all sordid motives, and endow me with a spirit of pity and liberality towards the poor, and of tenderness and sympathy towards all ; that I may enter into the various feelings by which they are respectively tried ; may weep with those that weep, and rejoice with those that rejoice.

“And sanctify thou their souls, as well as heal their bodies. Let faith and patience, and every Christian virtue they are called upon to exercise, have their perfect work ; so that in the gracious dealings of thy Spirit and of thy providence, they may find in the end, whatever that end may be, that it has been good for them to have been afflicted.

“Grant this, O heavenly Father, for the love of that adorable Redeemer, who, while on earth, went about doing good, and now ever liveth to make intercession for us in heaven. Amen.”

 BOSTON, TUESDAY, JULY 7, 1829.

PERSONAL DEFORMITIES.

WE present to the readers of this number Mr. Cooper's dissection of the foot of a Chinese lady, and a case, from one of the French Hospitals, of pulmonary hernia from tight lacing. As the two seem connected by a very natural association, we give the articles consecutively. The tyranny of fashion is limited to no region, either barbarous or civilized. However severe or unnatural the penance she enjoins, none dare resist or even murmur at her authority; and the variety of torture to which man and womankind willingly subject themselves in compliance with absurd customs, is truly marvellous. The degree of surprise, however, with which this universal propensity is calculated to inspire us, cannot but be influenced by the degree of knowledge and cultivation with which it is accompanied. That the savage islanders should tattoo their skin, or the Caribs flatten the heads of their children, seems to us less wonderful than that a comparatively refined nation should doom the fairest of their numbers to deformity and lameness; while the folly of this is again eclipsed by that which under advantages of education so much superior, we occasionally witness nearer home. We will not however pursue this topic farther, convinced as we are by experience how little is to be gained by moralizing on the follies of fashionable life; and could it be useful under any circumstances, it would still be out of place in this

connection. The articles themselves seem to us to merit an attentive perusal.

Anatomical Description of the Foot of a Chinese Female. By BRANSBY BLAKE COOPER, Esq.

THE foot, of which an account is here given, was obtained from the dead body of a female found floating in the river at Canton, and had all the character of deformity consequent upon the prevailing habit of early bandaging, for the purpose of checking its natural growth. To an unpractised eye, it has more the appearance of a congenital malformation than of being the effect of art, however long continued; and appears at first sight, like a club foot, or an unreduced dislocation. From the heel to the great-toe, the length of the foot measures only four inches; the great toe is bent abruptly backwards, and its extremity pointed directly upwards, while the phalanges of the other toes are doubled in beneath the sole of the foot, having scarcely any breadth across the foot, where it is naturally broadest. The heel, instead of projecting backwards, descends in a straight line from the bones of the leg, and imparts a singular appearance to the foot, as if it was kept in a state of permanent extension. From the doubling in of the toes into the sole of the foot, the external edge of the foot is formed, in a great measure, by the extremities of the metatarsal bones; and a deep cleft, or hollow, appears in the sole, across its whole breadth. The author gives a minute anatomical description of all these parts, pointing out the deviations from the natural conformation. He remarks, that from the diminutive size of the foot, the height of the instep, the deficiency of breadth, and the density of the cellular texture, all attempts to walk

with so deformed a foot must be extremely awkward ; and that, in order to preserve an equilibrium in an erect position, the body must necessarily be sent forwards with a painful effort, and with a very considerable exertion of muscular powers.

Hernia of the Lungs from tight Stays.—A girl, sixteen years of age, who had menstruated regularly, lately presented herself to Mr. Breschet, at the Hôtel Dieu, requesting his advice with regard to a tumor in the region of the neck. This tumor, the dimensions of which varied, equalled when at its maximum the size of the fist. It occupied the right side of the neck ; extending from the clavicle, behind which it arose as high as the thyroid cartilage ; it was larger beneath than above ; the skin which covered it was unchanged. On examination of the tumor it was found to be of soft consistence and elastic ; it disappeared entirely when pressed from above downwards, and without inwards ; it reappeared when the pressure was removed. It was also found on inquiry that it became particularly prominent when the young woman wore *tight stays*. It was perfectly indolent, and no beating was felt in it. What was the nature of the tumor ? The lobes of the thyroid gland were perfectly distinct ; it had neither the character of a phlegmon nor of an abscess, nor of an aneurism. The stethoscope became of much assistance in this case, for on applying the instrument to the tumor the respiratory murmur was distinctly heard. No doubt therefore existed of its being formed by the upper part of the lungs forced out of the cavity of the chest. What is to be considered as the cause of this pulmonary hernia ? Doubtless it depended on the habit which this patient participated with many young persons, of wearing very tight stays, which prevent the lungs from dilating, except at the upper part.

M. Breschet directed the girl to

leave off wearing stays, and intended to apply pressure over the tumor.

To the above we will only add the following paragraph from the Baltimore American. It announces a case of hepatic hernia from the same cause.

Sudden Death.—A colored woman died suddenly on Thursday last, while standing at a table ironing clothes. The body was opened by a physician who had been called in. It appeared that the deceased had been in the habit of *tight lacing* to such a degree, as to force the liver from its natural seat. The more immediate cause of her death was the rupture of a bloodvessel near the heart.

QUARANTINE LAWS.

LATE researches have given rise to an opinion that quarantine laws, as they exist in most countries, are founded in a false notion of the propagation of diseases, and are productive of injury rather than advantage. There is no proof, say the supporters of this doctrine, that any of the diseases which it is the object of these regulations to keep at a distance, are contagious in any proper sense, or can be conveyed from the locale where they are produced, and sown in distant and different regions. The yellow fever, they add, when carried into England, does not spread there. Hospitals at Constantinople have been filled with the plague imported from the Levant, and a free communication kept up with the citizens, and not one in twenty of those exposed received the disease. Again, while the same pestilence was raging in Turkey, a free intercourse was continued with Persia, yet the inhabitants of the latter remained unaf-

fect. The inference is therefore drawn, that these diseases cannot be propagated except under those circumstances of soil and climate by which they are produced, and that when conveyed to other countries by persons suffering with them, they remain limited to these individuals, and are not communicated by them to others with whom they chance to come in contact.

If these views are correct, the laws imposing quarantine on vessels coming from infected parts are equally unjust and impolitic; since it would follow that they cause embarrassment, delay, and expense, without any countervailing advantage. Unfortunately, however, there are too many facts yet unexplained, and too much uncertainty hanging over the doctrine of contagion, to permit us to acquiesce implicitly in these conclusions. It is an acknowledged ignorance of the laws which govern disease, that has dictated the existing systems of quarantine as measures of precaution against possible evils; and until this ignorance has been enlightened by an accumulation of evidence, we may do well to err on the safe side rather, than by adopting new theories, to incur unnecessary danger.

IMAGINARY DISEASES.

THAT hypochondriacal feeling which leads men to magnify trifling complaints into serious disorders, and even to imagine themselves sick when enjoying excellent health, is often a cause of great perplexity to the physician consulted. If he attempt to convince the patient of his

delusion, and to persuade him that no disease is present, he is met with obstinate incredulity, and his judgment or skill is at once called in question. Some treatment therefore seems to be absolutely necessary, and the use of a placebo of some medicinal substance which can do no harm, and will quiet the nerves of the patient, becomes almost inevitable. On the whole, however, these pious frauds should be opposed, as should deception of every other kind;—the ingenuity of the physician will be much better employed in bringing the *malade imaginaire* back to a correct mode of thinking, than in encouraging a delusion at the hazard of losing the esteem and confidence of the patient whenever time shall dispel it. If the disease be of a surgical character, the threat of an operation will perhaps cure it, on the same principle that the tooth-ach is so often relieved by the mere sight of the dentist or his ugly instrument. This expedient however is not always successful. But if the disease is of such a nature as we usually find it, plain dealing will be more expedient than deception; here, as every where else, unless it be perhaps in political life, honesty is certainly the best policy.

SEA-SICKNESS.

WE presume that few discoveries in science would be hailed with more pleasure by that numerous class of persons obliged to cross the ocean, than that of a remedy for sea-sickness; it is a little singular that not only no cure has been pretended to be found for it, but that

not even any plausible means have been suggested for alleviating its symptoms. Among the various diseases, including even consumption in its last stages, cancer, scrofula, and almost old age itself, which have been *certified* as cured by various quack medicines, the malady in question is not to be found. By the faculty also, sea-sickness has been altogether too much overlooked, and we are glad to find in the late publication of a medical traveller, an instance in which its occurrence appeared to be prevented by medical agency. The patient, a lady of rank, was a fellow-passeger with Dr. Grenville on board the packet from Dover to Calais. Knowing that she had suffered greatly from sea-sickness in former voyages, the doctor administered to her, just before embarking, forty-five drops of laudanum. She remained perfectly well, without vomiting or even nausea, during the whole passage. On his return to England Dr. G. tried the remedy on himself, and met with equal success.—We notice this case in the hope that others may be induced to try the same experiment. Some medical student will doubtless cast his eye over this article, and if it is his happy lot to enjoy the prospect of a visit to the European Hospitals and Schools, let him note this case for the future benefit of himself and his friends; and those even who have only in view a short excursion around Point Judith, may seize the opportunity to try an experiment which, if successful, will give them the glorious distinction of being the first to ruin the sale of one of the choicest Scraps of Mr. Johnston.

Subjects for Dissection.

The English bill for preventing the unlawful disinterment of human bodies, after discouraging any further provisions for that purpose, enacts that persons convicted of such disinterment shall be liable to be punished by six months imprisonment for the first offence, and two years for the second. The Secretary of State for the Home Department is to appoint annually not fewer than seven Commissioners, (the majority not being physicians, surgeons, or apothecaries,) empowered to license schools of anatomy for dissection. The commissioners are to hold meetings once a quarter, and may meet, if they think fit, at other periods. They are, at all meetings, to choose a chairman, who, in case of an equality of votes, is to have a double vote. The Home Secretary to appoint a treasurer and clerk to the commission. Persons applying for licenses are to give notice, eight weeks before the quarterly meeting. The license is to continue in force 13 calendar months, and a fee of £5 must be paid on receiving the same.—The Secretary of State may appoint commissioners or persons visitors to inspect schools of anatomy. Visitors are empowered to summon persons before them to give evidence respecting the execution of this act, and persons so summoned neglecting to appear, or refusing to be examined, are liable to a fine not exceeding £50. The commissioners are empowered to make rules for the regulation of dissecting schools. The bodies of persons dying in prisons, hospitals, or workhouses, if unclaimed within 72 hours, to be delivered for dissection to licensed teachers. It is made lawful for executors, administrators, &c., to deliver up the bodies of persons who may have bequeathed their bodies for dissection. Special licenses for dissecting may be granted to individuals, for which the fee is 2*l*. Bodies to be decently buried after dissection.—

Among the penalties are the following, namely,—for keeping a school of anatomy without license, 100*l.*; for removing a body without license, 50*l.*; for dissecting at unlicensed places, 50*l.*; for not complying with the regulation of the commissioners, 50*l.*; for neglecting to register certificates, 50*l.*; for omitting to bury bodies after dissection, 50*l.*; for delivering bodies to unlicensed persons, 20*l.*—Persons considering themselves aggrieved by a judgment under this act, of any justice or justices of the peace, may appeal to the quarter sessions within four calendar months. The act is to commence from the 1st of July next, and is not to extend to Ireland.

Artificial Limbs.—A London paper states that a poor lad, named Thomas Cargill, who had been bitten by a shark whilst bathing in the river at Sierra Leone, was brought before the Lord Mayor by Mr. Laundry, the Surgeon's Instrument maker of St. Thomas's and Guy's Hospitals, that his lordship might see what could be effected by mechanical aid. The lad had lost both his hands, and was perfectly helpless. On his return to England a benevolent gentleman interested himself in his behalf and gave him a letter to the Lord Mayor, who sent him to Mr. Laundry, with directions to do all he could for him.

He exhibited a pair of instruments by which he was enabled to dress and undress himself, buttoning and unbuttoning his own clothes; another set by means of which he could lift and carry great loads; another by which he could carve his own food and help himself to anything he wanted. But the most extraordinary of all, was an instrument that enabled him to write, and also to teach others to write. The poor fellow with this instrument wrote his name in the presence of the Lord Mayor, and astonished every body in consequence of the facility with which he

did it—and it was the opinion of every one that he was not only capable of writing himself, but of teaching others.

Glass Teeth.—The proprietors of a Belgian Journal have offered a reward of 1000 florins to any person who will make known a composition, used in Austria, or an equivalent one, against decayed teeth. This composition, when in a phial, resembles glass infusion, but when poured into the cavities of the carious teeth assumes the hardness and permanency of cold glass.

Diseases of Children.—An infirmary has been established in New-York for the treatment of diseases of the bowels. The object is to collect facts relative to the best mode of treating those bowel complaints of children, which are so prevalent and fatal in the summer season in most parts of the United States. The institution is under the counsel and inspection of Drs. Pascalis, Osborne, Mitchell and Reese. All Physicians in the Union are invited to forward to the Infirmary a statement of such practice as may prove successful during the present season, in the various bowel complaints they may have to manage. The gentlemen contemplate publishing the result of their observations in a volume, and offer a copy to any Physician who shall furnish any important information on the subject. All communications to be sent to No. 316 Broadway, N. Y.

Feigned Diseases.—A man became notorious in the British army for possessing a powder, which given to a man would produce symptoms exactly resembling those of diseased heart. By means of this medicine great numbers procured exemption from duty. The trick was discovered, and the powders examined. The substance proved to be the helleborus albus; and it appeared that the enormous dose of $\mathfrak{z}i.$ had been

sometimes administered without fatal consequences.

Vicarious Menstruation.—A woman, 19 years of age, was carried to the Hôtel Dieu, with an extensive burn upon the arm, the skin of which was almost entirely destroyed. Her catamenia had been previously suppressed; and for five months after the accident a sanguineous discharge took place regularly from the burned surface, at the periods of menstruation. The treatment was directed to restore the function of the uterus, but, at the time the case was reported, had been unsuccessful.

Fatal Error in the Diagnosis of a Tumor.—A peasant boy received a blow on the left temple; a tumor was developed, which was supposed to be encysted, and extirpated. The excision was immediately followed by profuse hæmorrhage, which was arrested by compression, and Dr. Krimer sent for, who found the patient in convulsions which soon terminated in death. The extirpated tumor was an aneurismal sac communicating with the middle meningeal artery, by an opening situated between the squamous border of the temporal and the corresponding portion of the parietal bone. The middle meningeal artery was of the size of a finger fifteen lines lower than the opening. A depression in the brain under the aneurismal dilatation existed, which contained one and a half ounces of bright blood.

Journ. fur Chirurg.

Extirpation of a Wen.—M. Lisfranc has recently extirpated a very large wen from a negress, situated above the clavicle, and having prolongations under this bone. The external jugular vein, which passed through the whole vertical diameter of the tumor, was dissected and preserved; the subclavian artery and vein were laid bare; the pleura was visible at the bottom of the wound.

The patient recovered without any unfavorable occurrence.—*Jour. Générale de Médecine.*

Reduction of a Luxation of five months standing.—M. Lisfranc has succeeded in reducing a luxation of the head of the humerus forwards, of five months standing. To avoid the accidents that have lately occurred from attempts at reducing old luxations, M. L. commenced by making at first slight extension, and gradually increased it.—*Ibid.*

Aneurism by Anastomosis, successfully treated by tying the Carotid.—Dr. Arendt, of St. Petersburg, has successfully treated a case of aneurism by anastomosis on the right side of the head, by applying a ligature to the right carotid artery.

Aneurism of the Right Primitive Carotid, successfully treated.—There is an account in the *Annali Universali di Med.* for September, 1828, of a case of aneurism of the right primitive carotid, successfully treated by Dr. A. Molina, of Pavia, by means of the ligature. The operation was performed in the manner recommended by Professor Scarpa.

Medical School of Yale College.—Drs. Thomas Hubbard and William Tully have been unanimously nominated by the corporation of Yale College, as Professors in the Medical School attached to the Institution, to supply the vacancy created by the decease of Dr. Smith.

REPORT OF DEATHS IN BOSTON,

The week ending June 26, at noon.

Of brain fever, 1—consumption, 8—croup, 1—drowned, 1—dropsy on the brain, 2—inflammation, 1—infantile, 1—old age, 1—unknown, 2. Males 6.—females, 13. Total, 19.

DIED.—In Westford, Dr. Horace Parker, of Gardner, æt. 33.—In Norwich, Con., Dr. David Rogers, æt. 88, an active Surgeon in the Revolutionary War.—In Plainfield, Dr. Jared Fuller, æt. 48.—In Tolland, Con., Dr. Gurdon Thompson, æt. 62.—In Lancaster, Dr. Abijah Phelps.

ADVERTISEMENTS.

CARTER & HENDEE

HAVE just received LIZAR'S ANATOMICAL PLATES, in 12 Nos., cold and letter press.

Barton's North American Flora, 3 vols.

do. Medical Botany, 2 vols.

Bonaparte's Ornithology, 3 vols.

A System of Human Anatomy; translated from the 4th Edition of the French of H. Cloquet, M.D. By ROBERT KNOX, M.D. F.R.S.E.

TURNER'S CHEMISTRY,—NEW EDITION.

JUST published, and for sale, by CARTER & HENDEE,—Elements of Chemistry, including recent Discoveries and Doctrines of the Science. By EDWARD TURNER, M.D. F.R.S.E. Second American Edition.

MANUEL FOR THE USE OF THE STETHESCOPE.

CA RTER & HENDEE have recently published,—A short Treatise on the different Methods of investigating Diseases of the Chest. Translated from the French of M. Collins, by W. N. RYLAND, M.D. From the third London Edition, with Plates, and an Explanatory Introduction, by a Fellow of the Massachusetts Medical Society.

In preparing for the American press the English translation of the well known and highly useful work of M. Collins, which translation has passed through three editions in England, the Editor thinks he can render it more acceptable by dispensing with the various prefaces and introductory remarks which encumber the last edition, and by substituting in their place an entirely new introduction, which is intended to embrace the amount of all that is important in the prefaces alluded to, as well as that which is contained in various abstracts and reviews which have appeared of treatises upon the different methods of investigating thoracic diseases, and in some other works which are not generally before the profession in this country.

C. & H. keep constantly for sale Stethoscopes of the most approved form.

FRENCH WATER COLORS.

COTTONS & BARNARD, 184 Washington Street, have for sale, the following Water Colors, of an excellent quality, manufactured by P. C. Lambertye, (France,) viz: Bistre, Raw Cassel, Burnt Umber, Raw Umber, Egyptian Brown, Vandyke Brown, Brown Pink, Seppia, Violet Lake, Carmined Lake, Sanders Blue, Prussian Blue, Mineral Blue, Indigo, Yellow Ochre, Yellow Mineral, Gamboge, Yellow Orpiment, Yellow Lake, Naples Yellow, Burnt Italian Earth, Burnt Sienna, Raw Sienna, Italian Earth, Crocus Martial, Green Lake, Sanders Green, Sap Green, Mineral Green, Prussian Green, Vermillion, Saturnine Red, Indian Red, Red Ochre, Red Orpiment, Flake White.

Also—a great variety of Newman's, Ackerman's, Reeves's and Osborne's Colors, in boxes and separate cakes.

DENTAL SURGERY.

THIS day received by CARTER & HENDEE, No. 135, Washington Street,—A SYSTEM OF DENTAL SURGERY. In three parts.

1. Dental Surgery as a Science.
2. Operative Dental Surgery.
3. Pharmacy connected with Dental Surgery.

By SAMUEL SHELDON FITCH, M.D., Surgeon Dentist. Denticum curam habeto ut bene digeras et diu vivas; laxatis dentibus laxantur et chylaceos officinæ; hinc mille malorum occasiones.—Baglivi XIII. March 17.

ep6w

LONDON STATIONARY, &c.

JUST received by COTTONS & BARNARD, 184 Washington Street, Crown and Double Crown Tissue Paper, large thin Bath Letter Paper; Billet Paper, Demy and Royal Bristol Board, do. do. London Board, Newman's Carmine, Music Paper.

A COPY of Bloomfield's Critical Digest of Sacred Annotation on the Gospels, 3 vols. 8vo. "The most learned Commentary in the English language." For sale by COTTONS & BARNARD, 184 Washington Street.

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within theyear. The postage for this is the same as for other newspapers.

I.

Communicated for the Medical and Surgical Journal.

ANOMALOUS ERUPTION.

History of a very rare and anomalous Eruption which appears to be connected with important Changes in the System.

By CHANDLER ROBBINS, M.D.

IN his excellent treatise on Cholera Infantum, Dr. Dewees enumerates among the symptoms which mark a fatal issue of the disease, an eruption of a very peculiar character. His words are these:—

“As death approaches, a gradual aggravation of symptoms takes place; and there is one, which, as far as we have observed, has always proved fatal: it is a crystalline eruption upon the chest, of an immensity of watery vesicles, of a very minute size. The best idea we can convey of the appearance of this eruption, is to imagine a vast collection of vesicles, apparently produced by flirting an equal number of very minute drops or particles of boiling water, and each particle producing its vesicle. We first pointed out this appearance to our friend Dr. Physick, in the year 1794, in the disease now under consideration; and subsequently, under like circumstances, to Dr. Rush; both of whom acknowledged the eruption new to them.

“This symptom may readily escape observation, if not looked for; it requires that the surface on which it has spread itself should be placed between the eye and the light, and viewed nearly horizontally.”

The eruption thus minutely described by Dr. Dewees, and not, I believe, by any other author, I have seen once. It was in every particular precisely the same, but occurred under circumstances so different, that a record of the case may be useful in warning us not to be too precipitate in founding our prognosis on this single symptom.

On the 17th of August, 1821, I was called to S. C., a little girl 4 years of age. She was laboring under symptoms of decided Hydrocephalus, in its second stage. She sat in a chair as I entered the room, moving her head and body backward and forward slowly but constantly, and continued to do this during the whole of my visit. I learnt that for the last day or two she had done the same thing, without ceasing, from morning till night, and manifested great unwillingness to move or be moved from her position, to speak, eat or drink. Her bowels were costive, countenance pallid, and pupils permanently dilated. It was a case, in fact, which bore itself more distinctly from a case of worms, than any

one of the same disease I have ever seen.

This little girl was several weeks under treatment, but grew slowly worse, until at last she was unable to move herself in bed. Not able to construct any further plan of treatment which could promise any good, I requested a consultation, the result of which was a perfect agreement as to the hydrocephalic nature of the case, and a decided opinion that she was no longer a subject for medical treatment.

In this state the case was left, and no alteration for better or worse was discernible in the patient for several weeks. At length, I received a message from Mrs. C. that her daughter had spoken, and a request that I would call and see her. She replied to several questions, and the eye looked less lifeless than when last visited. On examination, I found the whole chest covered thickly with an eruption, most accurately described in the foregoing extract from Dr. Dewees. It was first discovered by the touch, and on admitting a strong light, the chest had such an appearance as would be given it if hundreds of pearls, about half the size of a pin's head, had been cut in halves and placed thickly on the skin; no redness or soreness was distinguishable. This eruption, to me so novel, continued to spread till the neck, shoulders and arms were entirely covered with it; and the symptoms of the disease gradually abated from the morning of its appearance.

This girl I saw, about six years afterwards, as strong and healthy a child as any we meet.

Remarks.

In this history I have not enumerated the symptoms, nor detail-

ed the modes of treatment, for the former were so decided as to leave no doubt of the character of the disease, and the latter so varied and unsuccessful, as to be of little interest or importance. Nature effected the cure. What agency the eruption had in promoting this cure, and how this agency was exerted, are points which, after much reflection, are yet to me exceedingly indefinite.

Very little attention appears to have been given to the precise modes in which natural cures are effected. The only attempt at a classification of these modes has been made very recently by Mr. Mackenzie, of Glasgow, who divides the processes of what we may call Nature's Therapeutics, into five classes.*

The first class of means employed by Nature to remove disease, act with such rapidity as to elude our notice of their *modus operandi*,—we cannot detect the processes by which the cure is effected. Thus pain ceases, spasm is relaxed, and so on. This, therefore, is regarded by Mr. M. as the cure by "cessation."

The second mode is by "revolution of functions." This is illustrated in measles, vaccinia, and in intoxication. The alcohol first stimulates the circulation, stupor succeeds, and then comes on free excretions by the kidneys, lungs, and skin, by which the alcohol is eliminated, and the system relieved from its stimulus.

The next method is effected by the "revolutions of time," as illustrated by periodical occurrences in the system.

The fourth class is denominated "natural surgery," as in the union

* A sketch of Dr. Mackenzie's views was presented in this Journal, No. 13, vol. 2.—ED.

of wounds by the first intention, the restoration of parts by granulation, and the removal of injurious substances by suppuration or absorption.

The last method enumerated, is "the conversion of one disease into another" which is more easily or speedily relieved,—as the conversion of dropsy into diarrhœa, head-ach into hemorrhage, &c.

In this last class, (which is, perhaps, the one illustrated in the case I have related,) Nature has already been imitated with infinite advantage. How far a closer observation, a clearer division, and a more systematic study of Natural Therapeutics, might aid the profession in the good work we have undertaken, is a promising subject for reflection and inquiry.

II.

Abridged from the Edin. Med. and Surg. Jour.

DISFIGURING THE COUNTENANCE WITH SULPHURIC ACID.

By R. CHRISTISON, M.D. F.R.S.E. &c.

THE disfiguring or maiming the countenance by the throwing of corrosive liquids over it, is a crime of recent origin in this country. It appears to have been first practised in the manufacturing districts during the disputes which took place a few years ago between workmen and masters regarding the rate of wages; at least, it was first heard of in Scotland under these circumstances. Several deplorable instances having occurred at Glasgow of this malignant and cowardly mode of gratifying revenge, the present Lord Advocate, in applying for a bill to extend to Scotland the Ellenborough act against wounding and maiming, also introduced a clause which classed

with such crimes the offence in question, and awarded for it the punishment of death.

In Glasgow, since the passing of this act, no instance has occurred of the crime against which it is directed. But besides the case I am about to relate, which happened at Edinburgh, it appears from the London newspapers for October and November last, to have been twice committed during these months in the metropolis; once out of revenge, and again by a shoplifter for the purpose of blinding the shopman and preventing pursuit. It is a crime, indeed, which, now that its existence is generally known, I fear the authorities may often have to deal with; for it presents several peculiar temptations to the unprincipled and revengeful to commit it. There can be but one opinion as to its enormity and the fitness of the punishment which will now await it in this part of the kingdom.

Hugh Macmillan, and his wife, Euphemia Lawson, were indicted under the statute alluded to, on the 17th of December, 1827, for maiming, disfiguring and disabling Archibald Campbell, by throwing sulphuric acid over him on the 17th of the previous October. The indictment likewise contained a separate charge of murder against them; but for reasons to be mentioned presently, this charge was afterwards departed from by the public prosecutor.

The facts of the general evidence by which the crime was brought home to the female prisoner, were the following:—The Macmillans, who lived in the same stair with Campbell, had long been on bad terms with him; and a few days before he met with the accident the woman was bound over to

keep the peace towards him ; on account of which both she and her husband had been repeatedly heard to vow vengeance in the most malignant language. The female prisoner was proved to have obtained, shortly before the commission of the crime, information concerning the corrosive properties of sulphuric acid ; and in consequence hinted that she would some night try its effects on Campbell's cloak after her husband was asleep. Early on the evening of the 17th of October, she was seen to carry out and return with a particular jug, which she placed under her bed, cautioning her children not to meddle with it. Towards midnight, Campbell, on his way up stairs to his lodgings, had approached Macmillan's door, when, the door opening a little, he observed a female arm thrust out, holding something white ; and, under the impression that some mischief was intended him, he was in the act of turning round to retreat down stairs, when a liquid was thrown over him, which, by the intense burning pain it caused, he at once suspected to be oil of vitriol. The alarm being instantly given, the police in a few minutes entered Macmillan's room, where the woman was found dressed, and her husband only dressing himself, as if just raised out of bed. No trace of sulphuric acid could be discovered in the room. But between the alarm in the stair and the arrival of the police, a person who lived in the floor under the Macmillans heard their window open, and something immediately break on the pavement below. Accordingly, in the *close** under the

window were found the fragments of a jug like that which the woman had been seen carrying early in the evening ; and these fragments had a sour taste and smarted the tongue. A large quantity of sour tasted liquid was also found on the stair and wall between Macmillan's door and the spot where Campbell stood at the moment of receiving the injury. By a complete chain of circumstances, therefore, though not by any direct proof, the act of throwing the deleterious liquid was traced to Macmillan's wife.

Campbell was without delay transported to the Infirmary, where he arrived about two in the morning. His state at this time, and the progress of the symptoms till his death, twelve days afterwards, were described by Dr. Hunter, the surgeon, and Dr. Nesbitt, the surgeon's clerk of the hospital, in a report which was libelled on in the indictment, and from which chiefly the following particulars have been derived:—The skin on the left side of the face was partially removed, and the whole presented at first a white disorganized appearance. The eyelids of both eyes were much inflamed and swollen, and the left eyeball was also severely involved in the mischief, but the right eyeball was uninjured. The skin of the inside of the lips was

Edinburgh are from five to ten stories high. Narrow passages, from three to ten feet wide, lead from one street into another, or form courts or cul-de-sacs ; from these passages, which are generally very filthy, doors open occasionally on the lower step of a narrow staircase, which winds up almost perpendicularly to the top, and from this staircase other doors open on each story into the apartments of the poor. These passages and cul-de-sacs are called in Edinburgh *closes*.—En.

* The buildings in the old town of

also white and swollen, and on the back of the left hand, as well as between the fingers, there were white excoriated streaks. In the course of sixteen hours the white marks turned brown. The pain of the face and eyes, which was at first excruciating, became easier under the use of suitable applications. But as at the time of the visit, about twelve hours after the accident, the pain of the left eye, extending to the head, evidently threatened a severe ophthalmia, he was bled from the arm; and next day the operation was repeated. From these measures he derived great relief. The inflammation and disorganization of the eye, however, went on increasing, and soon ended in the bursting of the cornea and discharge of the aqueous humor and crystalline lens. Towards the close of the fifth day, namely, on the evening of the 22d, while apparently doing well, he had a shivering fit, and next morning complained of acute pain at the bend of the right arm, where he had been bled. Inflammation immediately sprung up around the orifice, general swelling of the arm came on, and progressively increased for the three following days. Severe febrile symptoms ensued, and afterwards also difficult breathing, with other signs of pulmonary inflammation. Under these complicated disorders he gradually sunk, and died on the morning of the 30th of October. The report concluded with ascribing his death to the inflammation of the arm and concomitant fever.

The body was examined on the following day by Dr. Hunter and the late Dr. Cullen, whose report of the appearances is here given in detail.

“On Saturday, the 31st of October, we inspected the body of Archibald Campbell, who died in the Royal Infirmary on the morning of the 30th.

“The right arm was carefully examined and anatomized. We found the vein from which he had been bled very highly inflamed at the wounded part at the bend of the arm. From this point the inflammation had extended upwards to the great vein of the arm and shoulder, and downwards to the small veins of the forearm. These vessels were almost filled with purulent matter, and partly obliterated. The great veins at the upper part of the chest were natural.

“There was a small quantity of serum in the cavity of the membrane which invests the heart, but that organ was itself sound.

“The membrane which covers the lungs and ribs, called the pleura, was inflamed, and covered at the back part with the usual product of inflammation. Seropurulent fluid was found in both cavities of the pleura. Both lungs, when cut into, were found very highly inflamed, and particularly in the upper and lower lobes.” [I may here add in explanation, that both lungs were most extensively consolidated by serous effusion, red hepatization, and diffuse tubercles, intimately intermingled; and that the last morbid deposition was distributed in irregular masses, some of them of the size of a pigeon's egg, so as to occupy not less than a third part of the entire volume of the lungs.]

“The left eye had its anterior part entirely destroyed. Some of the humors, [the aqueous humor and crystalline lens,] had es-

caped, and the whole organ was disorganized, and absolutely incapable of recovery.

“Water was found in considerable quantity on the surface, in the cavities, and at the base of the brain. That organ itself was natural. No other morbid appearance was anywhere observed.

“Upon the whole, we are of opinion that Archibald Campbell died of inflammation of the veins of the right arm, and of inflammation of the lungs, the former caused, according to the best of our judgment, by the wound of the vein in bleeding.” *Signed, &c.*

To complete the medico-legal investigations in the case, it only remains to mention that the chemical analysis of various articles of the man Campbell's dress was undertaken, at the request of the authorities, by Dr. Turner, now professor in the London University, and myself. The nature of the corroding fluid employed by the prisoner, might perhaps have been presumed from the foregoing particulars of the evidence; but the public prosecutor considered it right not to leave any part of so novel a case without throwing all the light possible on it.

The result of this analysis was, that the fluid used was sulphuric acid; and a short report was accordingly drawn up to that effect.

I need hardly add that the female prisoner, Euphemia Lawson, was found guilty, her husband not guilty. She was consequently condemned to be executed; but as it was the first condemnation under a new statute, her sentence was afterwards commuted for perpetual banishment.

III.

CASE OF SINGULAR TUMOR, &c.

Case of singular Tumor in the Jejunum, preceded by Symptoms resembling Colic.

By E. A. LEONARD, M.D., of Albany.
Communicated by A. H. STEVENS, M.D., Professor of Surgery, &c., for the N. Y. Med. and Phys. Jour.

I WAS called, on the 23d of November, 1828, to Mrs. H., aged 40 years, of good constitution, but whose health for the last few months has been declining. Found her laboring under the usual symptoms of colic; bowels constipated, which she attributes to the use of opium in a recent similar attack; no tension or tenderness in any part of the abdomen. She had a full dose of opium, followed by calomel and other purgatives, by which she was so much relieved on the 27th, that I did not again see her till the 11th of December. During the interval she had repeated alvine evacuations, but on the morning of the day last mentioned, was attacked again with pain in the bowels, which was severe, and not confined to any one portion of the abdomen, but passing up and across from the right iliac to the left hypochondriac region, in the course of the colon. This attack was attended, like the preceding one, by vomiting soon after anything was received into the stomach; she was again ordered an anodyne, succeeded by repeated doses of croton oil, castor oil, calomel, and other purgatives, some of which were retained, and others almost immediately rejected. Five days after taking the calomel, her mouth became excessively sore; this was relieved by

a gargle containing pyroligneous acid. Fomentations were applied, and enemata of various kinds, stimulating, anodyne, &c., administered, and tepid water was also thrown up in large quantities. None of the means made use of produced any decided effect. On the 23d she vomited a considerable quantity of fluid, in which the smell of assafœtida was strongly manifest; a portion of the tincture of that substance had been given in injection on the morning of that day. At this time, very careful examination discovered a small space in the left hypochondriac region, somewhat tender upon pressure; this was quite limited, not more than two inches in diameter. On the 24th the change was exceedingly great, the pain had almost entirely abated, and the pulse, which previously at all times had been nearly natural, had now become extremely weak, and scarcely to be enumerated; there was also delirium. Ordered tinct. quinine and wine ad libitum; she continued to grow worse, but did not

expire until the 27th at evening. —Dissection at 2, P. M., 28th.—Body much emaciated; parietes of the abdomen very thin; vessels of the omentum slightly injected; large intestines sound in every part; some old adhesions, but no marks of recent peritoneal inflammation: on examining the smaller intestines, the inferior portion of the jejunum was found highly inflamed, and on exposing its cavity, a firm, fleshy, or semicartilaginous tumor was discovered, arising from the muscular and covered by the mucous coat, entirely filling it, and even putting its coats very much on the stretch; being in length about two and a half inches. Below the tumor the gut is slightly inflamed and somewhat thickened, but above it the preparation is beautiful, showing the different results from mere irritation to that excessive inflammation, terminating in death of the part. The whole diseased portion of the gut is, in length, about twelve inches. The other viscera of the abdomen were in their natural condition.

SKETCHES OF PERIODICAL LITERATURE.

EXPULSION OF TAPE-WORMS.

DR. SCHMIDT, of Berlin, has lately sold to the Prussian government, for the sum of 200 rix dollars per annum, a new and certain mode of curing tape-worm,—the effects of which had been previously exhibited to the satisfaction of a committee appointed to investigate the subject. The following is the prescription with which Dr. S. commences his operations:—

R. Rad. Valerian, ℥vi.
 Fol. Sennæ, ℥ij. M. et infus. in
 Aq. Bull. ℥vj. Adde
 *Natr. Sulphur. Crystal. ℥iij.
 Syr. Mannæ, ℥ij.
 †Elæosacch. Tanacetii, ℥ij. M.

Of this mixture, two tablespoonfuls are to be taken in the morning fasting, and repeated every two hours.

* We take this to mean the Sulphate of Soda.

† A saccharine preparation of the Oil of Tansy, not introduced in our pharmacopœias.

In the mean time, the patient drinks freely of coffee well sweetened with sugar, in order to deprive the worm of its mucous envelop, and to chase it to the lower part of the canal. The mixture is continued until 7 in the evening. At noon the patient takes a "potage clair à la farine," and a few morsels of herring with the roe; at 8, P. M., a salad of herrings hashed up with ham, an onion, and plenty of oil and sugar. The above treatment always causes, during the first day, the expulsion of numerous fragments of the worm, and in some instances has expelled the whole. At 6 the next morning, Dr. S. commences the use of the following pills:—

R. Assafoetid.
 Extr. Gramin. āā ʒij.
 *Pulv. Guttæ,
 " Rad. Rhei,
 " " Jalap. āā ʒij.
 " " Ipecac.
 " Fol. Dig. Purp.
 †Sulph. Stib. Aurant. āā ʒss.
 Subm. Hyd. ʒij.
 Olei Tanacet. Æth.
 " Anisi Æth. āā gtt. xv. M. fiant
 pil. pond. gr. ij.

Six of these are to be taken hourly, with a tablespoonful of castor oil during the first interval, and coffee well sweetened in the following ones. This is continued till the worm is expelled, which usually happens by two o'clock in the afternoon. If the expulsion takes place very slowly, the oil may be repeated at other intervals after the first. At noon the patient takes only broth, and at evening "un potage au pain ou à la

farine," with fresh butter and sugar. To prevent relapse, there is subsequently ordered, from time to time, a salad of herrings, with horseradish, vinegar and sugar; and a few doses of the pills may be taken every week. After the treatment, the patient is directed to adopt a diet of good soup, chickens, pigeons, &c., and to take daily a few doses of some bitter medicine.

If the presence of tænia is suspected merely without being proved, the patient takes in the evening a salad of herrings, which is followed by a copious draught of sweetened water; and the next morning fasting the following powder:—

R. Pulv. Rad. Jalap. gr. xv.
 " *Sem. Cinæ, ʒss.
 " Guttæ,
 Hyd. Mur. Mit. āā gr. vi.
 Elæosac. tanac. ʒi. M.

This powder is followed by coffee taken as above, or by rich soup. These means produce abundant stools, in which are found fragments of the worm, if any exist, and sometimes the worm entire. If, however, the existence of this is ascertained, recourse is had to the treatment above mentioned, with a view to its complete removal.

This treatment is contraindicated in pregnancy, at the menstrual periods, in phthisis, hemorrhoids, and extreme debility from old age or other causes. Of 166 persons treated by Dr. Schmidt, only 15 were men. The cases of a single worm amounted to twenty; while in the others

* The whole officinal title of this article is Pulv. Resin. Gambog. Guttæ. It is a drastic purgative.

† Perhaps the Sulphuret. Antimon.

* This article is introduced into the Pharmacop. Lond. as Semin. Santonici, but not considered as entitled to much confidence.

the number varied from two to nine. The largest number in any one case was *seventeen*. These occurred in a female 18 years of age, and were of considerable size.

CONSEQUENCES OF A FALL,

Or a Specimen of German Physiology.

A GERMAN doctor tells a story of himself, which, if not intended for a hoax, is a very curious one. By a fall on the floor from a small height, he bruised the great trochanter of the right side. There was neither fracture nor luxation, yet, after seven months had elapsed, he was still able to walk only by the aid of crutches. Immediately after the fall, he experienced a marked aversion for many articles of diet of which he was previously very fond, such as sugar, milk, and wine; while others, which he had before disliked, became at once agreeable,—as beer and vegetable acids. The fall was also followed by obstinate constipation. The author attributes these phenomena to a concussion of the spinal marrow, which might have resulted from the fall.

IMPERFECT VISION.

An Account of two Cases of Insensibility of the Eye to certain of the Rays of Color. By HUGH COLQUHOUN, M.D.

IN the first of these, the individual was incapable of distinguishing between red and a certain shade of green, while other shades of the latter color were easily recognized. By candle light all yellows appeared white; crimson had the appearance

of scarlet; pale green of blue; orange of a dirty red. In the second case, the vision was equally inaccurate, and this inaccuracy extended itself to nearly all the varieties of color. When these were removed to a considerable distance, the power of discrimination seemed to cease entirely, except so far as the individual was able to feel that they belonged to yellow among the light, or to blue among the dark colors. Persons were not easily recognized by their features, though readily known on speaking. In neither of these cases was the disease hereditary.

COLICA PICTONUM.

EIGHT cases of this disease are reported by M. Jacobi, physician to a white lead manufactory at Strasburg, who appears to have paid particular attention to its symptoms and treatment. In the *first* of these cases, castor oil and purgative clysters having been employed to no purpose, tartar emetic was prescribed in conjunction with cream of tartar, so as to produce free vomiting, which was followed by purging. In the *second* case, the treatment consisted in the exhibition of calomel and opium,—ten grains of the former to one of the latter every two hours. This produced some evacuations after the third dose. The *third* was cured in like manner. In the *fourth*, croton oil was given,—first one and then two drops,—but without active purging. A clyster, containing two drops of the oil, was then given, which brought away some scybala. Next day the croton was again given, with the addition of opium; and this, as-

sisted by clysters, speedily produced evacuations. A return of the colic made it necessary to repeat the clysters on the following day; after which, permanent relief followed. In the *fifth* case, calomel and opium were given as above, but did not affect the bowels till after the seventh dose, that is, when seventy-two grains of the former had been taken, and seven of the latter. Some evacuations then followed; but the symptoms returning next day, the same treatment was adopted, and carried again to the same extent. Some ptyalism followed, but disappeared again in a few days, and he had no more colic. In the *sixth* case, two grains of opium were given daily, with purgative clysters. An anodyne plaster was also employed, but with what effect on the symptoms is not stated. The *seventh* case was complicated with incomplete paraly-

sis. After the colic had been removed by calomel and opium, the weakness of the limbs was treated by tepid bath and purgatives, and disappeared in twelve days. The *eighth* was a case of neuralgia, producing acute pain, which extended from the sacrum to the foot, following the peroneal edge of the leg. Calomel and opium were ordered as above, and the neuralgia ceased on the second day.

In all the above cases, constipation of several days continuance had preceded the colic. The facts stated seem to warrant a conclusion in favor of combining opium with cathartics in the treatment of this disease. The circumstance mentioned in connection with the sixth case, of 144 grains of calomel taken in the course of two days, and followed only by slight ptyalism, is not a little remarkable.

BOSTON, TUESDAY, JULY 14, 1829.

EPIDEMIC ECZEMA.

AN eczematous eruption is now extremely prevalent in this city and vicinity. It made its first appearance during the past summer, when it yielded to remedies with tolerable readiness. As the cool weather advanced it became gradually more rare, and almost escaped notice in the winter. For the last four months it has reappeared with increased violence, and affects equally persons of every age and of every class. Cleanliness and good living are assailed as often as poverty and personal neglect; nor do external agents of any

description appear to have much effect in promoting or removing the disease.

The eruption generally appears in the form of small pimples surrounded by an inflamed base, and without any previous derangement of the system. The itching is so intense as entirely to deprive the patient of the command of his hands, and scratching does not appear to be productive of that satisfaction which it gives in ordinary cases; on the other hand, it is followed by a sense of smarting scarcely less disagreeable than the previous formication. Many

persons afflicted with this epidemic are obliged by it to pass night after night in walking their chambers, and in other fruitless endeavors to alleviate the cutaneous irritation.

When the heads of the pimples are abraded, a thin dark-colored scab is formed, which is closely attached to the skin, and removed by very slow degrees, leaving a slight discoloration that disappears in a few weeks or months, according to the violence of the disease. This eruption is seen in various stages in the same individual at the same time,—new vesicles coming out as former ones disappear. The general health is not usually affected; the *primæ viæ* are not deranged; and were it not for the terrible and uncontrollable itching which torments the patient at all hours, he would scarcely think it worth his while to seek medical assistance.

The seat of this disease is usually the trunk, particularly around the abdomen and chest, and the neck. The extremities are sometimes affected, and still more seldom the face. In one very bad case, however, which is now under our charge, it extended over the face pretty copiously, and was very fully and thickly developed on the tongue and internal lining of the mouth, throat, and fauces. In a short time a diarrhoea came on, attended with considerable pain and producing great debility; and it was altogether probable that this symptom was occasioned by an extension of the eruption to the mucous coat of the stomach and bowels. This patient is in the ninth month of pregnancy,

and is doing well. No case has come to our knowledge in which the palms of the hands, or the analogous structure on the feet, have become the seat of this eruption.

It will be easily imagined that the intense itching which characterizes this complaint from its earliest stages, renders it extremely difficult for the physician to discover a pimple at so early a stage as to judge what is the precise nature of the complaint. The heads are usually torn off long before the patient has time to exhibit himself; hence the doubt which exists with many practitioners whether the disease be a Lichen or Eczema. In some cases it may perhaps assume the form of the one, and yet be distinctly vesicular in others. In several instances, however, in which we have examined the eruption as it began to show itself, a drop of semi-limpid matter has been discerned in each pimple; and, placing this fact in connection with the usual course of the disease, and its frequency among children as well as adults, we may set it down with tolerable confidence as an Epidemic Eczema.

In some cases it has appeared to be contagious, and in others frequent contact has failed to communicate it. The evidence on this point is, so far as our own observation and that of our friends has gone, insufficient to warrant any decided opinion.

With regard to the treatment we have little to offer. The predominant symptom has frequently given rise to the suspicion, in the mind of the patient, that his disease was the itch, and sulphur ointment has been resorted to; but whenever the erup-

tion has disappeared by the use of this or any other local application, the consequence has been a greater or less degree of nausea, vertigo, and general febrile excitement. Such applications should therefore be discarded from the treatment of the disease, or used only with such precautions as the judgment of the physician will suggest.

Such very general and brief notice of this distressing epidemic, which is not confined to the city, but spreads widely in the neighboring country, we have considered due to our readers, many of whom are aware of the obstinacy with which it resists the most powerful remedies. When further experience has thrown more light on the subject, a more detailed account may be expected. Medical history furnishes us but little information respecting it, the only notice we have been able to find of any similar epidemic being contained in the works of Hoffman, published in the year 1729.

THE SENSES

Subject to a Variety of Functional Modifications.

AMONG our Sketches will be found an account of two persons in whom the power of distinguishing different colors from each other is defective. This kind of deviation from perfect vision is by no means rare, and many cases are on record where it existed in greater degree than in the cases of Dr. Colquhoun. Mr. Haddard mentions an instance of a Mr. Harris who confounded all the dark colors with black, and all the light colors with white, so that he knew in fact only

black and white. A brother of this Harris always mistook orange for green, and in another brother the defect was still greater.—The history of a case may be found in the Philosophical Transactions, in which full reds and full greens appeared always alike.—In Dr. Brewster's Encyclopedia there is an account of a Mr. Tucker, who had no power of distinguishing orange from green or blue from pink;—Mr. Dalton, the chemist, has the same incapacity for distinguishing blue from pink, and the red in the solar spectrum is scarcely visible to him; and a celebrated historical painter, in our own city, has a peculiarity in judging of colors, which is equally remarkable and inconvenient.—In the memoirs of the Royal Society of Edinburgh, is described the case of a gentleman who could see but four colors, viz. white, yellow, grey, and light blue; and Dr. Nichols relates an anecdote of a soldier, who, having purchased a uniform coat and waistcoat of *blue*, selected breeches of *red*, thinking them a perfect match. These and other cases come to us with the best authority, and in many of them the defect has appeared to be hereditary.

Touching an explanation of these phenomena, different philosophers have viewed the subject in different lights; an explanation which has been perfectly clear to some minds, others have not been able to comprehend; and defects of reasoning have been easily distinguished by one philosopher, which another has had no power of discerning.—The vitreous humor has been supposed by some to have a shade of blue, by

which the red light is absorbed before it reaches the retina, and so on. The fibres of the retina which perceive certain colors, are thought by others to be partially or wholly paralyzed; and a third class, who suppose that rays of light pass through the retina and are reflected back, before perception, by the choroid coat, attribute the phenomena we have alluded to, to a modifying shade of color in the retina itself. Whichever theory we adopt, the explanation appears plausible, and whether we regard the supposed cause of the defect in question, or the analogy of the other senses, it is on the whole somewhat remarkable that these peculiarities of vision are not more frequent.

The same articles *feel* hot to some persons that feel cold to others, and there is every grade of this perception between the two extremes. The peculiarities of *taste* are proverbial; what to some is agreeable, is nauseous to others, and what is decidedly pleasant or disgusting to the palate of one, is often perfectly tasteless to another. So also with the sense of *hearing*. The perception of sounds differs greatly in different individuals. Even among those laboring under ordinary *deafness*, some will hear a *shrill* voice scarcely raised above its usual tone, whilst a *louder* voice is scarcely audible, although raised very considerably; and vice versâ. The note of the common *tick*, or death-watch, as it is tremblingly called by the superstitious, is distinctly heard by some ears, whilst to others equally near, and having an equal acuteness of hearing ordinary

sounds, it is wholly inaudible on the closest attention. Dr. Wollaston says he has met with several persons "who never could hear the squeak of a bat; with some who never heard the chirping of the house cricket; and with one gentleman who never heard the chirping of the common house sparrow;" although their companions could perceive these sounds very distinctly.

Thus do the capabilities of the other senses differ in different persons; and this fact would seem to favor the explanation which appears, at first view, the least probable of the three spoken of, viz.: that the defect of perceiving certain colors must depend on some modification, perhaps paralysis, of the nerves originally designed to receive the impression. This subject is, however, but very imperfectly understood, and offers a wide and an inviting field for the observation and ingenuity of the physiologist.

PRESCRIPTIONS.

THE following prescriptions are from the Provincial Medical Gazette.

Nervous Toothach Liniment.

Aromatic spirit of ammonia, 2 ounces; gum opium, 1 drachm. Dissolve the opium in the spirit by maceration. The affected tooth, as well as those in the upper and lower maxilla, to be well rubbed with the liniment every two or three hours during the paroxysms.

Or,—

Camphor, 2 drachms, dissolved in spirits of terebinth, 1 ounce; to be applied as the former liniment.

Or,—

Camphor, 1 drachm, dissolved in

spirit of wine; rectified æther, 1 ounce; oil of cajeput, 2 drachms. Mix to make a liniment; to be applied as directed above.

Toothach with Caries and Exposure of the Nerve.

Powder of gum arabic, half a drachm; tincture of myrrh; compound tincture of benzoin; of each half an ounce: oil of cinnamon, five drops; wine of opium, three drachms. Mix to make a liniment, to be introduced into the cavity of the affected tooth.

The resinous gums of this composition being separated, form a complete coating to the exposed surface, which protects it in a great degree from the irritation produced by extraneous substances. This liniment should likewise be extensively and freely applied to all the teeth and gums.

Rheumatic Toothach unconnected with Caries.

Powdered leaves of pyrethrum, 1 drachm; mucilage of gum arabic, a sufficient quantity to make a paste. Divide it into twelve portions. Take one into the mouth occasionally, and let it remain till dissolved. To be used in conjunction with the liniment, and an aperient dose with colchicum.

Liniment.—Camphorated spirit of wine, 3 drachms; liquor of ammonia, 10 drops; wine of opium, 1 drachm. Mix to form a liniment, to be rubbed on the outside of the cheek of the affected side three or four times daily.

Inflammatory Toothach, with Caries.

Hydrocyanic acid, 1 drop; to be placed in the carious excavation after lancing the gum freely.

The following remedy has obtained great repute on the Continent:—

Extract of henbane, 1 drachm; gum opium, half a drachm; extract of belladonna, and camphor, of each 6 grains; oil of cajeput, and tincture of cantharides, of each 8 drops. To be mixed into a paste, with which the decayed tooth is to be filled.

Ruspini's Tincture.

Florentine iris root, 8 ounces; powdered cloves, 1 ounce; ambergris, 1 scruple; spirits of wine, 2 pints. Macerate for fourteen days, and strain for use.

This application we have used with great relief where the teeth have evinced tenderness on inhaling atmospheric air, or on the application of cold liquids, such as occasionally takes place after the operation of scaling.

Chevalier's Unguent for Cancer.

Flowers of digitalis, one-sixth part; fresh butter, five parts: to be prepared by boiling until the leaves are crisp, and then strain. Mr. Chevalier has found this application very efficacious in diminishing the activity of cancerous ulceration.

Chevalier's Unguent for Acute Rheumatic Inflammation.

Extract of belladonna, from an eighth to a fourth; oil of lavender, six drops; lard, two ounces: mix. The parts affected to be rubbed with this ointment *only* until the pain begins to abate, and left upon it afterwards *only* while the pain continues to be present.

Sir Henry Halford's Ointment for Hæmorrhoids.

Ointment of nitrate of mercury, almond oil, of each equal parts; mix in a porcelain mortar: to be applied to the parts two or three times daily.

Sir Gilbert Blane's Mixture for Red Gravel.

Cinnamon water, two ounces; mucilage of gum arabic, two ounces; clarified honey, one ounce and a half; solution of potash, three drachms; wine of opium, forty drops; to which may be occasionally added two drachms of the compound spirit of juniper: take two large spoonful three times a day in a cup of barley water. Sir G. Blane has prescribed this, we understand, with great advantage, for a high personage.

Sir William Knighton's Pills for Red Gravel.

Dried carbonate of soda, hard soap, of each a drachm; extract of uva ursi, one scruple: mix to make thirty pills. Two to be taken three times a day.

Vance's, (late of Haslar Hospital,) Stomachic Mixture for Dyspepsia.

Sulphate of quinine, twelve grains; diluted sulphuric acid, two drachms; tincture of orange peel, one ounce and a half; tincture of hops, half an ounce: mix. A dessert spoonful to be taken in a glass of tepid water half an hour before breakfast and dinner daily. It is an elegant and grateful preparation, and very beneficial when a sense of distension and flatulence is experienced after eating.

Dr. Middleton's, (late of Southampton,) Aperient for Children.

Take of senna leaves, one drachm and fifteen grains; manna, one ounce; supertartrate of potash, forty-five grains; boiling water, eight ounces: macerate for two hours, and strain. This mixture, in the dose of three or four spoonfuls, is moderately aperient, and, from its being extremely palatable, it may be conveniently administered to children where there is difficulty in getting them to take medicine that may be somewhat nauseous.

Menorrhagia.—The leaves of the red holyhock, made into a conserve, are said to be an effectual remedy for this complaint. This is the proper season for gathering them.

Power of the Will over certain Muscles.—It is said of Fuseli, a celebrated painter, that he had the power of ejecting the contents of his stomach at will, and without nausea. When a dinner or any particular article of food disturbed his digestion, he would retire and throw it off with great facility. There are few persons who possess such power over

the muscles concerned in the process of vomiting.

Journal of Humanity.—A weekly newspaper with this title has been recently commenced at Andover, in this State. It is devoted to the Suppression of Intemperance, and contains many interesting and useful essays on topics connected with this subject. The numbers which we have seen of this journal, contain more original matter, we should judge, than any other newspaper printed in this country. We recommend the work to the profession, as containing many good prescriptions for preventing the use and removing the effects of one of the most noxious poisons which can be introduced into the animal system.

TO THE FACULTY.

The Editor will be happy to receive more frequent Communications on subjects interesting to the Profession. As this Journal is not connected with, or devoted to the interest of any school, party or institution, this invitation is intended to be universal. It is addressed, however, more particularly to the Subscribers, and to the medical and surgical officers of Hospitals and other Public Institutions; for among the former are the most intelligent and talented members of the Profession in New England and many other States—and at Public Medical Establishments peculiar opportunities are offered for extensive experiment and observation, the result of which must be particularly valuable to the Medical Practitioner.

REPORT OF DEATHS IN BOSTON,

The week ending July 3, at noon.

Of abscess on the brain, 1—consumption, 2—dropsy, 2—dropsy in the head, 1—infantile, 2—inflammation in the bowels, 1—intemperance, 1—lung fever, 1—measles, 2—palsy, 2—rupture, 1—typhous fever, 1—suicide, 1—unknown, 3. Males, 12—females, 9. Stillborn, 1. Total, 22.

ADVERTISEMENTS.

NOTICE.

BOOKSELLERS, PUBLISHERS, and AUTHORS, are informed, that by transmitting to the Editor, free of expense, a copy of such works as they may write or publish on subjects interesting to the medical profession, they will be entitled to a notice of such works in the pages of this Journal.

CARTER & HENDEE

HAVE just received LIZAR'S ANATOMICAL PLATES, in 12 Nos., cold and letter press.

Barton's North American Flora, 3 vols. do. Medical Botany, 2 vols.

Bonaparte's Ornithology, 3 vols.

A System of Human Anatomy; translated from the 4th Edition of the French of H. Cloquet, M.D. By ROBERT KNOX, M.D. F.R.S.E.

TURNER'S CHEMISTRY,—NEW EDITION.

JUST published, and for sale, by CARTER & HENDEE,—Elements of Chemistry, including recent Discoveries and Doctrines of the Science. By EDWARD TURNER, M.D. F.R.S.E. Second American Edition.

MANUEL FOR THE USE OF THE STETHESCOPE.

CA RTER & HENDEE have recently published,—A short Treatise on the different Methods of investigating Diseases of the Chest. Translated from the French of M. Collins, by W. N. RYLAND, M.D. From the third London Edition, with Plates, and an Explanatory Introduction, by a Fellow of the Massachusetts Medical Society.

In preparing for the American press the English translation of the well known and highly useful work of M. Collins, which translation has passed through three editions in England, the Editor thinks he can render it more acceptable by dispensing with the various prefaces and introductory remarks which encumber the last edition, and by substituting in their place an entirely new introduction, which is in-

tended to embrace the amount of all that is important in the prefaces alluded to, as well as that which is contained in various abstracts and reviews which have appeared of treatises upon the different methods of investigating thoracic diseases, and in some other works which are not generally before the profession in this country.

C. & H. keep constantly for sale Stethoscopes of the most approved form.

FRENCH WATER COLORS.

COTTONS & BARNARD, 184 Washington Street, have for sale, the following Water Colors, of an excellent quality, manufactured by P. C. Lambertye, (France,) viz: Bistre, Raw Cassel, Burnt Umber, Raw Umber, Egyptian Brown, Vandyke Brown, Brown Pink, Seppia, Violet Lake, Carmine Lake, Sanders Blue, Prussian Blue, Mineral Blue, Indigo, Yellow Ochre, Yellow Mineral, Gamboge, Yellow Orpiment, Yellow Lake, Naples Yellow, Burnt Italian Earth, Burnt Sienna, Raw Sienna, Italian Earth, Crocus Martial, Green Lake, Sanders Green, Sap Green, Mineral Green, Prussian Green, Vermillion, Saturnine Red, Indian Red, Red Ochre, Red Orpiment, Flake White.

Also—a great variety of Newman's, Ackerman's, Reeves's and Osborne's Colors, in boxes and separate cakes.

DENTAL SURGERY.

THIS day received by CARTER & HENDEE, No. 135, Washington Street,—A SYSTEM OF DENTAL SURGERY. In three parts.

1. Dental Surgery as a Science.
2. Operative Dental Surgery.
3. Pharmacy connected with Dental Surgery.

By SAMUEL SHELDON FITCH, M.D., Surgeon Dentist. Denticum curam habeto ut bene digeras et diu vivas; laxatis dentibus laxantur et chylaceos officinæ; hinc mille malorum occasiones.—Baglivi XIII. March 17.

ep6w

A COPY of Bloomfield's Critical Digest of Sacred Annotation on the Gospels, 3 vols. 8vo. "The most learned Commentary in the English language." For sale by COTTONS & BARNARD, 184 Washington Street.

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

THE BOSTON
MEDICAL AND SURGICAL JOURNAL.

VOL. II.]

TUESDAY, JULY 21, 1829.

[No. 23.

I.

SICKNESS OF DOMESTICS.

To whom, in these Cases, should the Physician make his Charges?

THERE is great diversity in the customs of different families, both in the manner of nursing their servants during illness, and in discharging the various expenses incidentally incurred at such periods. This diversity is a source of embarrassment to the physician and the family, and is not unfrequently the cause of serious and permanent misunderstanding. Some rule ought therefore to be established, which may be observed in such cases by all families; and we would propose that the Faculty adopt a regulation to this effect, viz.,—*that all charges for attendance on domestics be made to the head of the family in which such domestics reside.* It is extremely cruel and dishonorable, in my apprehension, for the master of a house to allow his servants to pay their physician's bill. The payment of the wages should cease during medical attendance, but all further loss belongs to the family whose misfortune it is to have any of their domestics taken sick. Should any one, however, entertain a different opinion, the above regulation will leave him at liberty to settle the affair with his servants to his own liking. It only points out to the physician the course which he ought to take.

With these sentiments I request, Mr. Editor, that you would publish in the Journal the following extract from a work recently published, entitled "Domestic Duties,"—a work which contains many useful lessons on the medical, as well as domestic, management of the Lying-in room, and the diet and diseases of children.

"A.—In case of illness among our servants what ought we to do?"

"B.—In illness, immediate attention and medical advice should be afforded to them, and the healthy servants, generally, should be encouraged to pay as much attention as their time will permit to their invalid fellow-creatures. Unless the state of the family and the nature of the disease peculiarly demand it, I think that it is cruel to send a sick servant either to poor, confined, and dirty lodgings, where poverty and misery stare him in the face, at the very moment he needs those comforts which his master's house might have afforded him; or to have him carried into a hospital, where, finding himself surrounded by fellow-sufferers, in various stages of disease and mortal decay, his heart sinks within him at the sight, and his recovery is, perhaps, retarded by the gloomy impression made on his mind. A little expense, a little inconvenience in the family, and a little feeling shown by a master or mistress to a sick servant, would generally be

well bestowed, and might be equally well repaid by his future faithful services.

“A.—I am surprised to hear you hint any censure on hospitals; I have always thought that, in case of the illness of a domestic or of any poor neighbor, an hospital is the very best place to which he can be sent.

“B.—It is far from my intention to object to hospitals generally; on the contrary, there are many cases that could not receive the same degree of attention, or have such advantages in medical consultation, as in the hospitals; where also, I believe, great care is bestowed on the comfort of every patient, and convalescence is promoted by good nursing. By the observation I had previously made, I did not mean to extend the censure beyond the cases of servants who are, too frequently, sent from the habitations of splendor and luxury into such dissimilar scenes; and sent, too, when their spirits are least able to endure the reverse. But while I recommend every kindness to be shown to your domestics during illness, I should not neglect to caution you against listening too frequently to all their little complaints. There is not, perhaps, any class of persons more fanciful, or inclined to imagine themselves more indisposed than they really are, than the one of which we are speaking. When a servant, however, falls into disease, the master is not only bound to see that he is properly attended and nursed, but the expense of such attendance is as much a debt of his own, as are the sums incurred for the maintenance of the servant. Nothing displays greater meanness than obliging a servant to defray the expense of medical attendance out of his wages.”

Yours, &c.,

XX.

II.

NITRATE OF SILVER.

On the Efficacy of Nitrate of Silver, applied to Aphthæ of the Mouth, in a Letter to Dr. A. H. STEVENS, Professor of Surgery in the University of New-York.

SIR,—I had the pleasure of being present at your lecture on Friday, the 14th inst. Among a variety of interesting remarks you then made, were several in relation to the use of *lunar caustic* in aphthous affections of the mouth,—ascribing, however, the first use of the article to a French gentleman. Without laying claim to much originality in medical practice, I take this opportunity to state my own experience with the nitrate of silver in the disease above mentioned.

About four years ago I had under my care a case of cholera infantum, which yielded, in part, to medicinal agents. The child became, however, very weak and reduced. Aphthæ of the mouth and throat made their appearance, and finally covered the inside of the mouth and tongue, and obstructed the throat so that it became impossible to get down either nourishment or medicine.

Under these circumstances I had recourse to a strong solution of *lunar caustic*. It is sufficient to state that an immediate alteration for the better was perceived. In twenty-four hours the crust was entirely removed. Flakes as large as a shilling in three or four hours became loose, and were picked out by the child. A very thin crust appeared after the first was removed, in distinct patches; but they were removed in three or four days, and the child very soon wanted food; and what was singular, it ate with the greatest avidity *cucumbers, pickles, &c.*, and apparently with benefit, or, at least,

without injury. As the recovery went on rapidly, considering the extreme prostration of the system, no precaution was taken to prevent the solution from getting into the stomach; on the contrary, it was rather to be desired than otherwise.

Another interesting case was treated by me last spring in the same manner, and with equal benefit. It was an infant about a week old, extremely weak and feeble; so much so, that it was unable to draw the breast. Astringent and other applications were first used, as alum, borax, goldthread, pyrola, &c. Laxatives, as magnesia, castor oil, and even calomel and rhubarb, were administered, but the aphthæ increased daily, until I resorted to the use of a strong solution of the nitrate of silver. By this article the crust was removed, leaving the surface beneath of a florid red, and in some places slightly ulcerated, or rather in a state that is termed a *raw surface*.

This article seems to be superior to every other for two reasons: 1st, the rapidity with which it removes the aphthæ; 2d, its altering the action of the surface to which it is applied. The above mode of practice is my own. I was led to adopt it from having seen repeatedly its good effects in indolent ulcers of the legs, and in some cases of inflammation of the eye. It is likewise my whole dependence in a peculiar *ulcer of the nipple*, which has a resemblance to aphthæ of the mouth. To conclude, I remark that there are four surfaces to which lunar caustic may be applied, viz., the surface of the eye, the mouth and fauces, the nipple, and the glans penis. I think I am warranted in making this conclu-

sion, from my experience of the article in question, and from a similarity of structure which I think exists in these parts.

Yours, sir, with the highest esteem,
E. EMMONS.*

III.

VACCINATION AND RE-VACCINATION.

The prize recently offered for the best dissertation on Smallpox, Varioloid, and Vaccination, has been awarded to Dr. Stephen Brown, of New-York. This dissertation contains as compendious and clear a statement of the established laws observed by these diseases, and is on the whole as valuable a treatise on the subject, as we have seen. The following conclusions of Dr. Brown are of sufficient importance to claim the particular attention of the profession.

Conclusions.

“1st. THAT the smallpox is a disease of very ancient date, and had its origin in the *east*.

2d. That the character of this terrible disease, in its unmodified state, has undergone no change, since its description by Rhazes.

3d. That the successful mode of treating the smallpox, during the pustular stage, by puncturing the unripe pustules, as practised from the earliest times by the *Brahmins*, was never adopted by European practitioners.

4th. That the varioloid is a modification of the smallpox, and excited, in the system of those persons who have received but a *partial impression* from vaccination, by variolous poison.

5th. That those persons labor-

* N. Y. Med. and Phys. Journal.

ing under the varioloid will communicate the genuine, unmodified smallpox to those who have no protection either by previous smallpox or by vaccination; and that it is capable of exciting the varioloid in persons who have received but a *partial impression* from vaccination.

6th. That the smallpox virus is capable of affecting the inferior animals, especially during those *epidemic periods* when *atmospheric causes* give a more virulent character to the disease, and occasion a more rapid and general extension of its poison.

7th. That in some, at least, of the feathered tribes, it puts on a more severe and fatal character than in man, and that in quadrupeds a much milder form.

8th. That the *kinepox* in the cow, and the *grease* in the horse, are diseases produced in these animals, originally, by the operation of the variolous poison through their system, and that both impart their respective diseases to the human subject, and that each proves *equally* effectual in protecting the system against the smallpox.

9th. That the modifying effect which the smallpox virus receives in passing through the system of these animals, appears to be permanent; as no change in its mild character is perceptible, after a successive operation through the human system for more than thirty years.

10th. That the kinepox has proved a complete preventive of the smallpox, in the majority of cases, where vaccination has been performed by regular practitioners, even in the ordinary way of vaccinating in all seasons, and

with lymph obtained by disturbing the regular progress of the vaccine vesicle, which may be regarded as a dangerous interference with vaccination.

11th. That those cases where smallpox has supervened to vaccination, have, in the great majority of cases, been a very mild disease, and seldom, if ever, death has occurred under its influence; and had we no means of lessening this comparative number of susceptible cases, it could afford not a shadow of an argument against the practice of vaccination.

12th. But we aver that these cases can be diminished even to an insignificant number, by attending properly to their true causes, *two* of which, viz., the *laceration* of the vesicle and the *phlegmatic habit*, have heretofore been entirely overlooked, therefore,

13th. The dry crusts should always be employed for the purposes of vaccination, and great caution enjoined that the vesicle be not lacerated in its forming stage.

14th. The months of November and December present the finest season for vaccinating; and the summer months should be avoided.

15th. All children of phlegmatic parents, and all persons of the phlegmatic habit particularly, should be *re-vaccinated*, or have a *second insertion*, agreeably to the method proposed by Mr. Bryce, and *repeated* until a full impression be made upon the system; and if it be necessary at any time to take lymph from the vesicle to vaccinate others, as when exposed to the smallpox, a second insertion should be made in the opposite arm.

INFALLIBLE CORDIALS :

Or, which shall we consult, Dr. Swaim or Dr. Potter?

THE twin stars, says the London Spectator, in the curative world of our Transatlantic brethren at the present moment, are Dr. Swaim and Dr. Potter. Swaim is inventor of the Panacea, Potter of the Catholicon. The former hoists as his sign in the New-York Advertiser, three bottles modestly ticketed "Swaim's Panacea, Philad—a." The more learned and ambitious Potter has called mythology to his aid, and sports on his shield a *Hercules slaying the Hydra*. Half a dozen of heads are twisting and hissing on the ground, and three or four most truculent looking fellows are cresting and cursing, but of course to no purpose, against the Catholicon, or rather its emblem, the club of the demigod, that is about to light on their crowns and stretch them alongside of their comrades. Swaim has but one case, but that is a thumper. The patient, a female, about thirty or thirty-two years of age,—perhaps thirty-three,—had lost the whole of one eye and three-fourths of the other, all the nose, and the better part of the mouth; the tongue luckily was uninjured. Dr. Swaim was introduced to this fragment of humanity; and, with the modest intrepidity of a great man, exclaimed, "I cannot restore the lost eye nor replace the lost nose,—but I will cure the other eye and the mouth in a twinkling!" He said it, and he did it, as old General Fawcett of the *Invincibles* has it,—the woman was cured! Potter's cases make up in number what they lack in length,—

he has three to Swaim's one. The first is that of Betty Battle, who had fought with a tickling cough for—sixty-five years! She was cured by the time she finished her third bottle. The second case is Dolly Bender's. Dolly had stooped under the *rheumatiz* for fifteen years, until she was so bent by its inflictions, that a trundling hoop was a straight going Christian compared with Dolly's obliquity. A couple of bottles made Dolly as straight in the back as a Prussian grenadier. The last case is that of Thomas Topkins, whose sore throat had kept him from eating for—a twelvemonth. Topkins topped it over inflammation, and starvation, and a *nation* of other evils, by the time he had topped a bottle. It might at first seem a matter of indifference to which of these great benefactors of the human race a fellow who had a mind to live for four or five hundred years had resource,—but here comes the rub: POTTER'S patients had swallowed, heaven knows how many, bottles of the Panacea, to no purpose; and SWAIM'S had gulped down as many measures of the Catholicon with equal effect: so that even Swaim may fail, and Potter does not always succeed. There is still, however, a comfort in store,—if the one cannot cure you, the other will; so our readers, who wish to enjoy the mellow wisdom of the Spectator to the year 2076, (when it is our intention to resign the management of it,) must as speedily as possible send to the original venders for a due supply of both cordials, and keep to that which, on a fair trial, shall best suit itself to their respective stomachs.

 SKETCHES OF PERIODICAL LITERATURE.

BLISTERS IN ABORTION.

FEW practitioners are aware of the extreme frequency of abortions. Let any one direct his attention to the

subject, and make inquiries as often as proper opportunities offer, and he will be surprised how few women who have been a number of years

married, can tell him they have never miscarried. It is usually to such cases as are attended with some alarming symptoms, or where a desire to have living children has been often disappointed, that medical aid is called. Of these, it is chiefly the latter in which we can entertain much hope of answering the full expectations of our anxious patients.

Among the means which have been from time to time proposed for breaking up this morbid habit of miscarriage, we notice in the *N. Y. Med. and Phys. Journal*, a suggestion by Dr. Belden, which is altogether novel in character, and has been, in the opinion of Dr. B., successful in practice. It is the establishment of an issue from a blistered surface, to be continued through the period of habitual miscarriage. The case related in which this application was made, is a strong one, but many such would be necessary to prove the efficacy of the practice. The patient, a lady of enfeebled health, had undergone several successive abortions before coming under the care of Dr. B. During part of the period in which they occurred, she was subject to the efforts of judicious and distinguished practitioners to prevent them. All their expedients failed of success, as did also those of Dr. B., until he advised her a blister, about the size of a half-dollar, on the leg near the patella. This was directed to be dressed with cabbage leaves, and subsequently to be kept open by savin cerate. As the blister discharged, the bearing down pains and uneasy sensations about the uterus disappeared.—By want of

care, the blister was allowed after a time to dry up. The pains now returned, and were again removed by the reapplication of the blister: keeping this open and freely discharging, the lady had the satisfaction, at the expiration of her full time, of presenting her husband with a fine healthy son.

Dr. B. supposes the blister in this case acted as a counter-irritant; and we should say his single illustration is just enough, (and it is all the Doctor seeks,) to encourage a trial of the expedient in other similar cases. So small a blister is required, that its inconvenience cannot be a very serious objection to the experiment.

REMARKABLE HERNIA.

A CASE is recorded in the *Provincial Gazette* in which the whole of the intestines were protruded into the scrotum. The hernia was caused by an accident which befel the patient,—a laborer, *æt.* 50. He had been knocked down in the street, and a cart laden with bricks passed over the abdomen. His scrotum, on inspection, was found to be of an enormous size, extending two-thirds downwards between the thighs; and the skin over it was black, and so exceedingly thin by over-distension, as to threaten rupture on the slightest manipulation. The abdomen was empty and its integuments flaccid, and a line of ecchymosis across the umbilicus marked the exact course of the wheel over the body. Retching, vomiting, syncope, cold extremities and cold sweats, accompanied the severe pain suffered by the patient.

This hernia was reduced, and after about three weeks judicious treatment, the patient was discharged from the hospital cured. He was subsequently subject to occasional attacks of diarrhæa, and was obliged to wear constantly a double truss.

IODINE AND MORPHINE.

IN the Journal de Chemie Médicale, we find several cases of glandular enlargements which yielded to a persevering use of the Iodine and Morphine combined, after the separate use of the Iodine had failed to excite the action of the absorbents. By this combination, a larger quantity of the Iodine may be introduced into the system than it would be proper to administer in its simple state.

OBSTINATE SINUSES.

MR. SYME, a Surgeon and Lecturer at Edinburgh, has published in the Edinburgh Med. and Surg. Journal, an opinion that those sinuses which sometimes prove so obstinate in the vicinity of the pelvis, are occasioned not by caries, but by exfoliation of the bone. In many cases he has detected such exfoliation, and given

great relief by removing the osseous pieces. Surgeons would do well to keep these facts in view, since, if the true cause be that assigned by Mr. S., they may, by dilating the external openings of such sinuses, ensure an easier and speedier exit for such pieces of bone as may have separated.

INTERMITTENT FEVER,

Cured by Endermic Administration of Sulphate of Quinine.

A LATE Italian Journal contains a very satisfactory evidence of the efficacy of this new method of soliciting the virtues of remedial agents. Fifteen cases of tertian agues were treated by applying the Sulphate of Quinine to blistered surfaces, and in all of them the disease was overcome. The arm was the place chosen for the blister, and the skin was previously rubbed with concentrated vinegar, in order to secure the speedy and thorough action of the vesicator. Eight or ten grains of the medicine, mixed with a small quantity of simple cerate, were then placed on the denuded surface. In a few cases only was a second dose necessary.

BOSTON, TUESDAY, JULY 21, 1829.

MALARIA.

THIS is a subject of high practical importance. It is a subject generally but little understood; one which has recently excited great interest in the medical profession, and is, for very obvious reasons, growing in importance and interest among ourselves. A late and highly valuable

work on this subject, by Dr. M'Culloch, exhibits a summary of the facts and principles considered as previously established in regard to it, together with some new and ingenious speculations by the author himself. We propose to present our readers with a brief analysis of this work, together with such other

remarks as the topics introduced may suggest to us. If we find it impossible to do this without covering several pages, the importance of the subject will be ample apology for our prolixity.

That causes of disease exist in the atmosphere, is a proposition so clearly established by our daily experience, that when stated in terms, it comes to us with the air of a truism. In many conditions of the atmosphere when it comes in contact with the mucous passages, it is well known to be capable of producing local inflammation; its agency in the production of catarrh, for example, quinsey, and bronchitis, is universally familiar. It was well known, however, to the ancients, and their experience has been confirmed by that of modern times, that the air might be, and in certain situations was, *impregnated* with noxious qualities, which enabled it to produce effects equally certain, though by no means less obvious; and among these effects the most familiar was intermittent fever or ague. The term MAL' ARIA, borrowed from the language of a country which abounds in unhealthy districts, means, in its common and popular acceptance, that kind of air which produces intermittents; and since this disease is most prevalent in the vicinity of marshes, it has been considered to mean little more than air charged with the miasma generated by these marshes, and capable of communicating a malign influence evidenced by the occurrence of a regular intermittent. The researches of later inquirers, however, and among others of our author himself, serve to

show that this view of the subject is altogether a narrow and restricted one; that in the first place, marshes properly so called, are not the only sources of miasma; and, secondly, that the effect of this miasma is not confined to the production of intermittent fever, but extends to a great variety of disease. The most familiar sense of the word *marsh*, is that of a tract of low meadow land incapable of, or not having received, any drainage, and having been inundated by the rains of the winter and spring, gradually dries during the heat of summer. But in fact the immediate cause of miasma is one which is not peculiar to the state of things just described. This cause is no other than *the contact of decaying vegetable matter with water, under a certain elevation of temperature*. The prevalent notion that fresh water alone aids in the decomposition of vegetable matter, and that this process is prevented or retarded by the presence of salt, is proved to be ill founded, and therefore does not impair the universality of the above expression.

We have then three circumstances only which are requisite in order to produce miasm, viz., warmth, the presence of water, and vegetable matter tending to decay. Now these causes may be combined in other situations than those to which, by popular consent, is attached the title of *marsh*. In the first place, their union may occur on too small a scale and for an extent too limited for such a title. Again it occurs, as intimated above, in meadows overflowed by salt water, which, if they

can be considered as marshes at all, are not so in that sense in which these are regarded as the niduses of miasm. Ponds also, though kept permanently at the depth of several inches or even feet, will, if sustaining a luxuriant vegetation, become sources of miasma. Another class of situations, including all the requisites mentioned are, moist grounds or collections of water in situations elevated considerably above the water-level, yet not high enough to secure to them an exemption from heat. Such situations not being marshy in the common sense of the term, have generally been viewed as healthy. But that the fact is otherwise, besides being demonstrable upon the principle assumed, is also ascertained by experience. Again it may be shown, contrary to the prevalent opinion on this subject, that the margins of running streams alternately covered and left bare by the rise and fall of the tide, are not exempted from malaria.

An important question connected with this subject, relates to the existence of miasm in the vicinity of the drains of houses, in which, while there is no living vegetable, the putrefying remains of vegetable substances are always present. That these should be sources of malaria might naturally be expected under these circumstances; and that they are so is shown in the history of every city when neglected, and by the necessity which has been experienced of enforcing the most rigid rules for their due regulation.

Another inference of no small moment, derived from the same principles, relates to the unhealthi-

ness of artificial ponds formed in pleasure grounds for the purpose of ornament. This indeed is among the improvements in ornamental gardening which we have adopted from England; and if it be proved beyond doubt that they have produced disease in that country, the effects which may be traced to them here is surely a subject for serious investigation.

One singular fact is mentioned by Mr. M'Culloch as having been observed in Italy, which seems at first difficult to reconcile with the general results of observation on this subject,—that in many instances where marsh lands have been laid dry by drainage, perhaps for the very purpose of removing malaria, they have in consequence become more noxious than before. Something in these cases is no doubt due to the effect of the drains themselves; but the fact probably is, that the lands thus drained are imperfectly dried, and that certain portions of the surface are exposed, in the state of mud, to the action of the sun's rays: and although from this very circumstance such parts might be expected to become dry, yet if they formed the *lowest* portions, sufficient water might collect in them during each winter, for the process to be renewed the following summer.

The *propagation* of malaria, or its extension in other places, than those in which it is generated, is a fact well known, and its phenomena correspond to the notions commonly*

* We say commonly, because among the new theories of the present day, we notice an attempt to disprove the existence of malaria, in any proper sense, and to refer the effects attributed to its agency,

entertained concerning its nature and mode of existence. It is a curious circumstance connected with this branch of the subject, and only to be explained by the influence of the winds in conveying contagion, that in many instances a spot of marshy ground will produce disease at a distance, while its nearer vicinity either escapes entirely, or at least is but very partially affected. Several examples of this kind are related by our author.

Another and more familiar fact with regard to malaria, is its disposition to seek a certain level or situation in the atmosphere, leaving the other strata comparatively free. With few exceptions, the portion of the air thus affected is that nearest the soil, particularly where no current of air exists to disturb its natural tendency; and it is also noticed that in some instances, ditches too dry to be the sources of malaria have become its receptacles, which would seem to imply that it possessed a specific gravity greater than that of common air. A few instances indeed are on record, which militate against this supposition, and in which the portion of air nearest the ground has appeared more healthy than that above; they are rare, however, and can only be accounted for by the prevalence of some peculiar current of air, as adverted to above.

With respect to the prevention of the effects of malaria, the best gene-

to the direct agency of heat and moisture. Such is the theory advanced by Dr. Jones in his late essay on this subject; which essay will form the subject of a subsequent analysis.

ral rule is undoubtedly the avoidance of the cause. Exposure however, though always hazardous, is more or less so according to certain circumstances. A very prominent modification of its influence arises from the circumstance of sleep and watching, since all causes of disease are far more active during the former state.—That diet affects the susceptibility to disease, does not admit of dispute; but some difference exists among the authorities in regard to its regulation. Repletion is undoubtedly injurious; but even moderation may be carried too far, and the practical rule on this as on other subjects, seems to be that a medium is the safest course. Mr. McCulloch thinks that a better diet and the constant use of wine, give to military officers that advantage which they possess over the men in every description of service. With respect to the former cause, it need not be disputed; but the benefit derived from the wine is not a direct benefit,—it may be attributed, doubtless, to the fact that the place of this beverage is supplied among the men by the use of distilled spirit.

The question whether malaria acts upon the system through the medium of the lungs or of the skin, is one of considerable interest, but, as our author remarks, not easy to determine. In fact, with respect to the common cold or catarrh, produced by external cold acting on the body when unusually susceptible, it is not always easy to say whether the lungs become affected by sympathy with the skin which is acted on by the atmosphere, or whether they are more susceptible

of the influence of this agent *because* the usual functions of the skin are deranged. The effect of malaria, however, presents a case less favorable to the supposed exclusive mediation of the skin; because this effect may be produced, however well the general surface is protected from the atmosphere. Furthermore, we are reminded by our author that the lungs present a surface more extensive, more susceptible, and one by which the air is constantly acted on and decomposed; all which is an argument in favor of that view of the subject which makes them the principal medium through which the miasma produces its effects.

With respect to the conveyance of malaria to places at a distance from the localities where they are generated, it has been frequently ascertained that this may be done to a certain extent, through the medium of winds. Miasma has repeatedly been known to pass from an infected port to a vessel anchored at some miles distant, and this so suddenly on a change in the direction of the wind, as to leave no doubt of the vehicle. The author, however, is disposed to carry this doctrine of the influence of aerial currents much farther; and maintains that the intermittents which appear on the eastern coast of England in the spring, are imported on the wings of the wind from the fens and marshes of Holland.

Passing over some topics of inferior interest, we come to the last inquiry suggested by our author, viz.,—what are the effects produced upon the constitutions of those who are

exposed to malaria. This field of investigation, as above mentioned, is thought by him to have been but very imperfectly explored; men of science, in common with the multitude, having been content to refer the occurrence of intermittent fever to this cause, without troubling themselves with the investigation of other maladies, remote and immediate, which are justly attributed to its influence. The manifestations of ill health exhibited by the unfortunate inmates of these infected districts, are such indeed as cannot be mistaken. Their sallow skin at once attracts the notice of the traveller; and when subjected to examination, the cellular texture is found œdematous, and the muscles soft and devoid of elasticity. Should their appearance indicate the presence of fat, it will be found, on closer inspection, that this appearance is deceptive, and results from an hydropic secretion. The eye is dull and yellow, the hair of a pale hue, and the beard scanty; and a tumefied abdomen, with a peculiar enlargement of the right side, suggests a diagnosis often confirmed by the subsequent discovery of diseased structure of the liver, spleen, and mesenteric glands. In the Pontine marshes this aspect of the abdomen, combined with that of the emaciated extremities, gives to the inhabitants an appearance peculiarly hideous.

None of the effects of malaria are more striking than the premature old age which it induces in those who grow up under its noxious influence. Even the children are frequently wrinkled; women at twenty have the appearance of forty, and

those who have arrived at the last period appear to have reached the borders of the grave. It is remarked, however, that the most hazardous portion of life to these miserable beings is that from thirty-five to fifty, and that those who have passed safely through this, seem to have become eliminated as it were, and enjoy, during the rest of their lives, which sometimes last many years, a comfortable existence.

But did malaria belong to that class of morbid agents which, while they impair the physical nature, elevate and improve the intellect, there would still be some compensation, if not to the sufferers, at least to the cause of humanity. But it is said that the reverse is the fact. While the body is wasted by the slow progress of disease, the mind is weakened and the moral sensibility impaired. A proof of the former fact is thought by our author to be found in the apathy with which they regard their own situation, in their attachment to their own soil, and their unwillingness to believe in the existence of the fatal miasma of which they are the victims. That this obstinacy is proof of weakness, we readily admit; but it is a weakness by no means peculiar to the subjects of malaria. We are all slow to feel, and still slower to acknowledge, the defects of that country which we recognize as our own; and although we may not all carry this feeling to that degree of infatuation which induces the unhappy Italian to persist in wearing the poisoned cloak which has already sent its venom into his veins, we can still find a sympathy

in our own hearts for the love of country which glows in his.

“The shuddering tenant of the frigid zone
 Boldly proclaims the happiest spot his
 own,
 Extols the treasures of his stormy seas,
 And his long nights of revelry and ease.
 The naked negro, panting at the line,
 Boasts of his golden sands and palmy
 wine;
 Basks in the glare or stems the tepid wave,
 And thanks his gods for all the good they
 gave.”

But unhappily there are far better proofs than this blind devotion to his native soil, that the intellectual powers of these unfortunate persons are sacrificed to the Bœotian atmosphere in which they live. In Tuscany it is said that even idiotism is a frequent effect; and farther, that this may be propagated from one generation to another, whenever connections take place under circumstances so revolting.—In regard to the moral degradation which exists in these districts, the crimes imputed to them by travellers are, if truly charged, the best testimony of the fact. We need not recount the black catalogue of these enormities, but will only add that debauchery and murder each find a place among them, and that when the latter is committed, it is always in the mode of cautious assassination; all their vices, according to the authority quoted by Mr. M'C., being of a mean and dastardly character. We hope there is exaggeration in this picture; at any rate, there is neither pleasure nor profit in dwelling on it, and we gladly return to the more interesting as well as more useful field of purely medical inquiry.

Of the specific diseases produced by malaria, fever, intermittent, re-

mittent, and continuous, of course stand preëminent; the first being only the most frequent, and by no means forming the only one arising from this source. Another class of these diseases includes dysentery, cholera, and diarrhœa; diseases formidable at all times, but peculiarly so when rendered epidemic by a prevailing miasma. The sequelæ of these also deserve a place in this connection, as they are nothing less than apoplexy, palsy, visceral obstructions, and dropsy, the two last being those to which may be attributed those frightful instances of personal deformity which have been described above.

Lastly, it is the effect of miasma in producing nervous diseases, which our author deems to have been most overlooked by previous writers, and to which he therefore invites our especial attention. Under this head he includes tic douloureux, itself remarkable for often appearing in an intermittent form, together with other affections hitherto regarded as obscure, but which, together with the above, properly constitute the species of the genus Neuralgia. The prosecution of this interesting part of the inquiry, the author defers to a subsequent volume, the character of which is to be more strictly medical than that of the present, and which will embrace the results of his researches upon a class of diseases which have particularly engaged his time and attention.

WEN CURED BY IODINE.

THE Editors of *la Clinique* have published a case of unusually large

wen, in which the tincture of iodine, administered in the dose of ten drops twice a day, succeeded in effecting a cure. The patient, (Benjamin Chavie, a native of Savoy,) was eighteen years of age. When he was received into the hospital of Paris, (Hôtel Dieu,) the tumor occupied the whole space between the middle of the neck and the collar-bones, and its mechanical effects on the windpipe occasioned great difficulty of breathing, and, in some positions, frequently a sensation of suffocation. A few weeks after commencing the tincture of iodine, a diminution of it was evident; and it continued gradually to decrease till it totally disappeared.

Prevention of Measles.—The following account of the effects of sulphur in affording security against the infection of measles, has been lately published by the Medical Society of Tours:—"In a family of four children, two took the flowers of sulphur night and morning, and were entirely preserved from the contagious influence of the disease, although they continued to live in the same atmosphere, and were allowed to communicate freely with the other children who had the disease. Two of five adults, who lived in the same house, contracted measles; one had before had the disease. They had employed no precautionary means. In another family, one child had measles. Three other children were not separated from the patient: they took, night and morning, sulphur mixed in sugar, and escaped the disease. The dose of the sulphur should be from two to six or eight grains, according to the age.—In another case, an infant took the sulphur as soon as the disease had clearly manifested itself in his brother. In eight days, however, the measles appeared, but the malady ran so favorable a course that it was probable the preservative effects of the remedy had some influence. Four other children were treated in a similar manner: they

were designedly exposed to the contagion, but entirely escaped." Sulphur being an aperient and sudorific, given at the time of sickening, and continued during the progress of measles, is very likely to render the disease mild, and to protect the lungs against the serious mischief, which, in scrofulous subjects, frequently takes place during measles and hooping-cough, and to prevent secondary fever.—*Gaz. of Health.*

The Patent Thomsonian Practice of Physic.—The above dignified title is used to designate the administration of certain vegetable preparations, and the employment of the steam bath, in the cure of a number of disorders. To these medicines, and the mode of administering them, an exclusive privilege is claimed, under a patent from the United States. Several instances have been narrated in the public papers of the fatal effects of this practice, while those interested in its favor assert that these accounts have been falsely misrepresented by the medical faculty, who, they aver, have risen in arms against it, because it is destroying their practice. The support of a number of intelligent and disinterested persons, has given currency to the claims of these Thomsonian practitioners; and, under this sanction, their business has become very extensive, particularly in some of the western States. Without intending to express an opinion on the subject, we will observe that it is the fate of every popular medicine to obtain the kind of support which the practice in question has received. Such preparations are usually active, and, when properly administered, they are beneficial; their indiscriminate employment, therefore, will ensure their occasional usefulness. Whenever they are successful, the cured and their friends, naturally enough, praise the medicine; while the patient, the disease, or the physician, bears the blame, when their

effects are injurious.—*New-York Med. and Phys. Journal.*

Mercurial Pediluvium in Syphilis.—Dr. Verducci substitutes a foot bath of corrosive sublimate, instead of the common method of administering mercury, in syphilis. He dissolves forty-eight grains of corrosive sublimate in a mixture of an ounce of alcohol and a pound of distilled water. A fifth or sixth of this solution is added to a sufficient quantity of tepid water, in a proper vessel for bathing the feet. Warm water should be occasionally added during the bathing, to keep up a proper and agreeable temperature, and the feet should be continued in the bath half an hour at a time. A bad case is mentioned, which was cured after a trial of the foot bath ten or twelve days. How often the pediluvium is to be repeated is not stated, but we presume it is once in twenty-four hours, at bed-time.—*Ib.*

Fungus Hæmatodes.—Dr. Schutte, a German physician, has lately published a case of this morbid production, in which a composition of alum and red oxyde of mercury succeeded in destroying it. He first employed it in the proportion of six parts of finely powdered alum to one of the red oxyde of mercury, the latter of which he gradually increased till the proportions were equal.

Diseases of the Eye treated at the New-York Eye Infirmary.—Inflammation of the conjunctiva, 226; do. do. with purulent discharge, (adults,) 11; do. do. do. (infants,) 13; strumous inflammation of the conjunctiva, 62; do. do. with pustules, 77; granulated lids and vascular cornea, 32; excrescences of the conjunctiva, 1; inflammation of the cornea, 56; ulcers of the cornea, 28; opacities of the cornea, 24; pterygium, 1; staphyloma, 3; iritis, 59; scleritis, 4; closed pupil, 3; cataract, 19; amaurosis, 71; strabismus, 1; tinea,

54; lippitudo, 35; hordeolum, 3; inversion and eversion of lids, 5; tumors of lids, 18; abscess of lids, 8; ptosis, 4; diseases of lachrymal passages, 24; wounds and injuries, 71; tumors of orbit, 2; exostosis, 1; burn, 2; pediculi ciliarum, 1; anomalous, 6. Total, 925.

Diseases of the Ear.—Otitis, 24; otitis, 8; otalgia, 2; ulcer of the external auditory passage, 1; indurated wax, 8; increased secretion of wax, 2; defective secretion of wax, 5; tympanitis, 1; caries of the temporal bone, 3; paralysis, 1; closure of the eustachian tube, 3; fistulous opening into the mastoid cells, 1; scrofula affecting the ear, 2; contusion of the ear, 1; fungus auri, 2; deafness, unaccompanied with any external symptom, 27. Total, 91.

We have in this city a similar Institution to the above, which is in successful operation. Dr. REYNOLDS, who is at the head of this Infirmary, is a man of skill and experience in treating diseases of these important organs.

Remarkable Case of an Insect supposed to be hatched in the Human Body.

Ballston Spa, July 5, 1829.

DEAR SIR,—The following recital of a phenomenon which happened about a year since, will be a subject of inquiry among naturalists and physicians. A young woman, the daughter of a respectable farmer in Edinburgh, Saratoga county, in this State, while in a field of new mown hay, felt the sting of a large green grasshopper, as she then expressed it.—Some time in the winter following, she discovered a tumor on the shoulder, between the coracoid and acromion process, attended with some pain and uneasiness. After about three weeks continuance, it disappeared from the shoulder, and she felt a pain along the course of the clavicle; and in May it appeared at the side of the neck, partly under the sterno-clio-mastoideus muscle.

Her physician treated her for scrofula with apparent success, for it again disappeared until July, when it was felt once more at the shoulder (the tumor) about the size of a hen's egg, and with evident fluctuation, when it was opened with a small discharge of unhealthy pus, and along with it a living grasshopper, two inches in length and breadth proportionate. The only conclusion is, that the egg must have been deposited the year before, and arrived to maturity by a process of incubation. Should you think this narrative worthy of being generally known, you are at liberty to do as you may think advisable.

I remain your friend. &c.,

ELIPHALET ST. JOHN.

SAM'L L. MITCHELL, M.D. LL.D. &c.

Dislocation of the Knee-Pan.—

A few weeks since, Messrs. Broughton and Mayo, eminent surgeons of London, published an account of a "dislocation of the knee-pan *outwards*," in which, after all the methods usually employed had failed, they had recourse to a "*sudden* and a *complete* flexion of the knee-joint," when the knee-pan, being thus disengaged from the condyle, spontaneously returned to its place. The patient was a very stout dragoon. This practice is, of course, only recommended in those cases which resist the more gentle attempts at reduction. Such cases however are rare, as most dislocations of the patella are reduced with comparative facility.

REPORT OF DEATHS IN BOSTON,

The week ending July 10, at noon.

Of accidental, 2—apoplexy, 1—consumption, 3—croup, 1—disease [of the chest, 1—dropsy in the head, 1—drowned, 1—fractured knee, 1—gravel, 1—hip complaint, 1—measles, 3—scurvy, 1—unknown, 3. Males, 16—females, 4. Stillborn, 1. Total, 21.

DIED,—In Charleston, Cecil co., Md., Dr. Francis Le Barron, Apothecary General of the U. S. Army during the last war.

ADVERTISEMENTS.

NOTICE.

BOOKSELLERS, PUBLISHERS, and AUTHORS, are informed, that by transmitting to the Editor, free of expense, a copy of such works as they may write or publish on subjects interesting to the medical profession, they will be entitled to a notice of such works in the pages of this Journal.

CARTER & HENDEE

HAVE just received **LIZAR'S ANATOMICAL PLATES**, in 12 Nos., cold and letter press.

Barton's North American Flora, 3 vols. do. Medical Botany, 2 vols.

Bonaparte's Ornithology, 3 vols.

A System of Human Anatomy; translated from the 4th Edition of the French of H. Cloquet, M.D. By **ROBERT KNOX**, M.D. F.R.S.E.

TURNER'S CHEMISTRY,—NEW EDITION.

JUST published, and for sale, by **CARTER & HENDEE**,—Elements of Chemistry, including recent Discoveries and Doctrines of the Science. By **EDWARD TURNER**, M.D. F.R.S.E. Second American Edition.

MANUEL FOR THE USE OF THE STETHESCOPE.

CA**R**T**E**R & **H**E**N**D**E**E have recently published,—A short Treatise on the different Methods of investigating Diseases of the Chest. Translated from the French of M. Collins, by **W. N. RYLAND**, M.D. From the third London Edition, with Plates, and an Explanatory Introduction, by a Fellow of the Massachusetts Medical Society.

In preparing for the American press the English translation of the well known and highly useful work of M. Collins, which translation has passed through three editions in England, the Editor thinks he can render it more acceptable by dispensing with the various prefaces and introductory remarks which encumber the last edition, and by substituting in their place an entirely new introduction, which is in-

tended to embrace the amount of all that is important in the prefaces alluded to, as well as that which is contained in various abstracts and reviews which have appeared of treatises upon the different methods of investigating thoracic diseases, and in some other works which are not generally before the profession in this country.

C. & H. keep constantly for sale Stethoscopes of the most approved form.

FRENCH WATER COLORS.

CO**T**T**O**N**S** & **B**A**R**N**A**R**D**, 184 Washington Street, have for sale, the following Water Colors, of an excellent quality, manufactured by P. C. Lambertye, (France,) viz: Bistre, Raw Cassel, Burnt Umber, Raw Umber, Egyptian Brown, Vandyke Brown, Brown Pink, Seppia, Violet Lake, Carmined Lake, Sanders Blue, Prussian Blue, Mineral Blue, Indigo, Yellow Ochre, Yellow Mineral, Gamboge, Yellow Orpiment, Yellow Lake, Naples Yellow, Burnt Italian Earth, Burnt Sienna, Raw Sienna, Italian Earth, Crocus Martial, Green Lake, Sanders Green, Sap Green, Mineral Green, Prussian Green, Vermillion, Saturnine Red, Indian Red, Red Ochre, Red Orpiment, Flake White.

Also—a great variety of Newman's, Ackerman's, Reeves's and Osborne's Colors, in boxes and separate cakes.

NEW LONDON WORK.

JUST received, by **CARTER & HENDEE**, corner of Washington and School streets, A Chemical Catechism; in which the Elements of Chemistry, with the recent discoveries in the Science, are clearly and fully explained. Illustrated by Notes, Engravings and Tables, and containing an Appendix of select Experiments, &c. By **THOMAS GRAHAM**, M.D. Member of the Royal College of Surgeons in London, &c. &c.

C. & H. have also just received, Elements of Chemistry. By **ANDREW FYFE**, M.D. F.R.S.E.

A **C**O**P**Y of Bloomfield's Critical Digest of Sacred Annotation on the Gospels, 3 vols. 8vo. "The most learned Commentary in the English language." For sale by **COTTONS & BARNARD**, 184 Washington Street.

THE BOSTON
MEDICAL AND SURGICAL JOURNAL.

VOL. II.]

TUESDAY, JULY 23, 1829.

[No. 24.]

I.

Communicated for the Medical and Surgical
Journal.

STRICTURE OF THE RECTUM

*In which the Calibre of the Intestine
was wholly obliterated.*

By Dr. JOHN STEVENS, Lic. Mass.
and N. Y. Med. Soc.

Mrs. D., of Charlestown, aged 48 years, had, for the most part of her life, enjoyed good health. In July, 1828, she was taken with pain in the bowels, accompanied with constipation, vomiting, rigors, &c. The pain was rather unusual, coming on at intervals, and very nearly resembling the pains which take place in the last stage of labor. I made an examination per vaginam, and found the uterus enlarged and apparently pressing hard upon the rectum. She had not menstruated for more than four months, and was persuaded that the womb was affected. I pushed the uterus backwards and upwards, as far as possible, and requested her to keep in a recumbent posture,—bled her freely, gave her an infusion of senna, and blistered the abdomen. On the fourth day she had an evacuation, which gave partial relief, but the pain still continued very severe. I gave Pil. Hyd. with Extract Conii, a pill every six hours, and she gradually recovered; since which time Mrs. D. has suffered much from constipation of the bow-

els, having had a similar attack as often as once in every five or six weeks, which has lasted from five to eight days, but finally yielded to the same mode of treatment.

June 16th, 1829, I was again called to visit Mrs. D., and found that she had had no fecal evacuation for some days, probably ten or twelve. The precise time could not be ascertained. Her pulse were good, and there were no febrile symptoms; her pains were severe, and as above described, similar to travail pains, but there was no enlargement of the uterus. She had taken a dose of the Sulph. Magnesia, and also a dose of the Compound Tincture of Aloes, without effect; but after retaining them on the stomach for some hours, had thrown them up. I gave a decoction of senna, manna, and jalap, and enemas of the same.

17th.—No better. Gave Hyd. Subm. gr. x., Pulv. Jalap. gr. xx., and continued enemas.

18th.—No better. Much rumbling in the bowels, as has been usual in every attack. Gave Ol. Ricini et Ol. Terebinth.

19th.—No better. Continued enemas and used warm bath.

20th.—No better. Gave Sulph. Soda, as much as the stomach would bear, through the day.

21st.—No better. Gave pills of Hyd. Subm., Jalap and Colocynth; continued enemas and used friction.

22d.—No better. I informed Mrs. D.'s friends that I considered her in great danger, and wished for a consultation. They made choice of Dr. Brown, of Boston. He saw her in consultation this day, and continued to visit her daily with me during the remainder of her life. He entered into a minute examination of her case, and perfectly agreed with me as to its nature and mode of treatment. A large blister was immediately applied to the abdomen, and two ounces of the Infus. Sennæ Comp. directed every two hours, and enemias continued; also the warm bath.

23d.—We saw the patient again. No relief had been obtained. Gave Subm. Hyd. et Pulv. Jalap. in large doses; continued enemias.

24th.—No better. Applied an emollient cataplasm over the whole abdomen, and gave a pill composed of Pulv. Jalap. et Subm. Hyd. et Ol. Croton, minim one, every four hours. Continued enemias.

25th.—No better. Pills had been retained. Gave an injection of the Infus. Tabaci: it was retained but a short time; it however caused a slight degree of nausea and dizziness. A solution of the Sulph. Soda was given through the day, as the stomach would bear.

26th.—No better. Directed Hyd. Subm. ζ i.— ϑ i. to be given every four hours, and enemias continued of senna and salts.

27th.—No better. Gave Ol. Ricini et Ol. Terebinth. equal parts, as much as the stomach would bear, and enemias of the same through the day.

28th.—No better. Much irritation; abdomen somewhat enlarged and tense; sphincter ani relaxed; pulse upwards of 100. Gave enemias of flaxseed tea with Tinct. Opii.

29th.—Worse. Symptoms of inflammation strongly marked; pulse 120 and hard. Bled freely; continued enemias, and gave Tinct. Opii, to procure temporary relief, as the pain was intolerable; gave also an injection of Decoct. Tabaci.

30th.—Considered the case as perfectly hopeless, and recommended a palliative course merely, which was continued until July 2d, when she died in great agony.

Post-mortem Examination.

Previous to her death, being perfectly aware of her situation, she very judiciously and composedly requested me to examine her body, and ascertain the cause of her extreme suffering and death. Accordingly, on the 3d of July, about ten hours after her decease, I proceeded to an examination, assisted by my friend Dr. Sprague. Dr. Brown was also present.—On opening the abdomen, the whole intestinal canal, together with the omentum, was obviously in a state of high inflammation: it was very much distended with flatus and liquids of different kinds, which had been taken; it also contained, dispersed throughout its whole extent so far as traced, a large quantity of green mucus, blended with feculent matter in a liquid state. The intestines were carefully dissected from the mesentery, and accurately examined from the stomach down to the rectum; but no cause of obstruction was met with, until we entered the pelvis. We then discovered a firm stricture of the rectum: the part appeared precisely as though a ligature had been passed tightly round the intestine. On further examination, it was found that the calibre of the rectum was entirely obliterated; a small probe could not be passed through it. This stricture could

not have been of recent origin, as there were no symptoms of recent inflammation, either about or below it; in fact, this part of the intestinal canal was the only part free from inflammation.

Query,—was this stricture occasioned by an occasional enlargement of the uterus, or did it arise from accidental and unknown causes?

Charlestown, July 13th, 1829.

II.

Communicated for the Boston Medical and Surgical Journal.

CAROTID ANEURISM,—OPERATION.

Performed at the House of Industry at South Boston,

By WINSLOW LEWIS, Jr., M.D.

THE subject of the following operation was a colored female of 26 years of age, married, of very intemperate habits, and of an excessive irritable temperament. Her ordinary occupation was that of a domestic, but her labors were severe, and she was accustomed to carry heavy weights on her head. During an exertion, about five months since, to raise a large body for the purpose of placing it on her head, she thinks she "felt something give way," was immediately faint, and soon after perceived a tumor on the left side of her neck. This increased slowly, and at times caused great pain in the head and eyes, with vertigo; and for some time past she has expectorated a bloody mucus. For the relief of these distressing symptoms, she entered the House of Industry February 25th, 1829. I found, on examination, a tumor of the size of a pigeon's egg on the left side of the neck, under the angle of the jaw, pulsating and exhibiting the usual characteristics of aneurismal disease.

I waited for some weeks, to observe if any effect might be produced on the tumor by the total deprivation of ardent spirits, which must have so much increased the circulating force. I also, during this time, applied over it a moderate compression, and put her upon the lowest diet. This was wholly ineffectual as regarded the disease, but her general health became much improved. With Dr. Warren in consultation, the operation was advised, but during the examination to determine the nature of the disease, the necessary pressure on the tumor for the purpose of emptying it, caused such excessive pain and excitement that it could not be effectually done. However, enough could be ascertained to show the true character of the tumor, and to distinguish it from ordinary swellings in that part; for the tumor did not move with the larynx or trachea, and other indications were evident of aneurism of the common carotid.

Operation, March 9th.—The patient was placed in a chair, with the head inclined to the right and a little bent backwards. The incision was made over that spot where the sterno-cleido-mastoideus muscle crosses the omo-hyoideus, in the direction of the fibres of the tracheal portion of the first named muscle. After the common sheath was exposed, the patient fainted. The operation was completed without difficulty, except that the internal jugular would occasionally interfere with and cover the artery. The patient did not complain of any peculiar sensation on tying the ligature. The pulsation above immediately ceased.—Half an hour after the operation, she suffered from pain on the left side of the head and in the region of the tem-

poral muscle; and then, and for some time after, asserted that a tooth was drawn during the operation.

March 10th.—Still pain as above, and also *very severe in the two first molar teeth*, extending to the occiput; very restless and irritable; has had, since last evening, a difficulty of swallowing.

11th.—Slight delirium yesterday; pain in the head constant; saliva from the affected side; deglutition painful; pulse 104.

12th.—Better; but while swallowing feels great vertigo.

13th.—Ptyalism diminished; expectorated some bloody mucus. Examined the wound, which had healed with the exception of the place kept open by the ligature.

25th.—Endeavors to withdraw the ligature cause great pain in the above-mentioned teeth.

April 1st.—Ligature removed without further pain in the teeth.

4th.—Discharged.

July 1st.—The above patient is now in good health, nor has she experienced any inconvenience since she left the House. The tumor has entirely disappeared.

La Grange Place, Boston.

III.

Communicated for the Boston Medical and Surgical Journal.

IRREGULAR GESTATION.

A Case exhibiting some singular Phenomena in Parturition.

By JOHN HOMANS, M.D.

MR. EDITOR,—The following extraordinary case having recently occurred to me, I beg to make it public through your Journal.

In September, 1827, Mrs. N., who had been married several months, supposed herself pregnant from indications which rarely de-

ceive. From this time until the third month, morning sickness attended her; she increased in size until between the sixth and seventh month, when there was an evident diminution, so that by the ninth month she was not larger than at the fourth. At this time she was seized with regular labor-pains and sickness at the stomach; these continued for twenty-four hours, when they ceased, and she returned to her accustomed occupation. She however continued to diminish in size, and in the following August was no larger than before she supposed herself in this situation. In the next September I was called to her in haste on account of profuse uterine hemorrhage, attended with labor-pains. Before I arrived it had abated; but something was preserved for examination, which proved to be a fœtus attached to its placenta by a cord. The fœtus was one and a half inch long, and of corresponding breadth: on it was clearly delineated the head with the features of the face, the arms (to the hand) attached to the body, and the lower limbs joined together. The cord was about two inches in length, and the placenta of proportionate size. The fœtus and placenta were remarkably firm, and evinced that they had been closely pressed. The time of delivery was within a few days of twelve months from the time of conception.

Boston, July 13th, 1829.

IV.

Abridged from the London Weekly Review.

STATE OF SURGERY IN SIBERIA AND ASIATIC RUSSIA.

DR. HENRI DE MARTIUS, who resided some years in Russia, has drawn the following hasty sketch of the different methods of cure

in use among the Nomadic nations of Siberia and Asiatic Russia.

Baths, and especially vapor baths, constitute an important part of the external treatment of all diseases.—The principal surgical operation is bloodletting, which is performed with any instrument whatever,—with a blunt lancet, a scalpel, a bistoury, a two-edged needle, or with a peculiar little knife with three points. The Kalmucs make use of a kind of fleam, with the cutting blade of which they open the vein, with the assistance of a little iron hammer, with which they strike the blow. The Asiatic tribes employ a spring instrument, (*arbalete*,) the dart of which penetrates the vein when they let go the spring. In Kamtschatca, the vein near the ankle, (*vena saphena major*,) is opened by means of a little knife, a bodkin, a needle, an awl, &c.

The application of leeches is not unknown to these tribes; and the mode of proceeding is very simple. In summer, those who are desirous of getting rid of a portion of their blood, undress themselves and plunge into a river or pond containing leeches; when these animals have sucked a sufficient quantity of blood, they are made to fall off with a little sea-salt. For winter use, the leeches are placed with water in pits of clay, and the water is allowed to freeze; when they are wanted for use, the ice which covers them is melted.

Scarification, or acupuncture, is employed in colic, in almost all tumors and abscesses, and in the anthrax of Siberia. To make incisions, they use sharp pieces of broken glass, pike's teeth, muscle shells, &c.

In angina and difficulty of deglutition, they pierce the uvula at different times with a needle or an awl. In ophthalmia, the eyelids are scarified with little knives, or with flattened needles with two edges; a bandage of black or green stuff, or a gauze of black horse hair, fixed over the eyes, serves to soften the too powerful impression of the rays of light. Tattooing is a cosmetic process among the Ostiaks and Tungusians.

Inoculation for the smallpox has been practised from time immemorial in the Steppes of Asia. The Mongoles fasten the crust of a variolous pustule over a scratch made on the hand or foot. In Grucinia and Georgia, they make a superficial crucial incision between the thumb and fore-finger, and, after having wiped away the blood, touch the little wound with the variolous matter, which they preserve in a little box or flask of horn; they then cover the whole with a piece of cotton. At Barnaoul, at Kiachta, and in the other places on the frontiers of the government of Jekoutsck, they introduce into the nose a wick impregnated with the variolous matter. The Tungusians and Buriats apply a layer of the lymph which oozes from a variolous pustule to the cheek or forehead.

For cupping, in many countries of Russia, they are in the habit of applying to the belly cast-iron pots, the air within which they have rarified by means of a little lighted tow; women and girls sometimes employ them for the purpose of procuring abortion. In the vapor baths they use friction with pieces of coarse woollen stuff, and flagellation with young twigs of birch. Beating with sticks or the knout is sometimes

practised as a remedy in mental diseases. Setons are very often used by the tribes of the Steppes. Cauterization with iron or copper needles red-hot, with which they pierce tumors which have not yielded to other means, is sometimes very efficacious. The moxa is one of the means in most frequent use; it is made with cotton thread: before applying it, the skin is covered with a layer of the white of egg, of isinglass, or of strong glue. Moxas are also made with hemp, flax, and amadou: the Kalmucs employ for this object the centaury of Siberia, (*centaurea Sibirica*,) the down of the seeds of several species of willow, &c. The Mongoles, previous to the application of the moxa, sprinkle the place with a thin layer of potters' earth or clay. The Ostiaks and the Tungusians prepare the moxa with the woolly and yellow fibres which are found in the fissures in the bark of the birch. In Siberia, the down of several species of mugwort is employed for the same use. To apply the moxa, they seek for the least sensible part of the skin by means of a burning coal, which serves for a trial.

In very obstinate tetter, and in very inveterate itch, many tribes of the Steppes use, in the form of cataplasm, a little insect akin to the *meloe*. Aquatic hemlock and mezereon serve as vesicatories in Siberia.

Pessaries are made of soap, of hardened tallow, or of the flour of rye, with simple syrup or honey: the Kalmucs form them with honey and common salt. In obstinate constipation they place the patient on a sandy and dry eminence, and apply to his stomach a smooth flint, which has been made very hot.

The principal cosmestics of these nations are the fresh juice of Solomon's seal, (*convallaria polygonatum*,) decoctions of the bark of *Daphne mezereum*, *echinum vulgare*, &c.

The obstetric art comprises many very singular practices. Amongst the Kalmucs, when the child is on the point of being born, the midwife gives a signal, by which the husband and his friends posted near the house are apprised, and discharge their firearms: this unexpected explosion, and the fright of the mother, are supposed to assist in hastening the delivery.

Persons bitten by a tarantula, or stung by a scorpion, are first drenched with milk, and then swathed in a basket, which is poised and whirled in the air by means of a cord, until abundant vomiting and profuse perspiration are induced.

V.

Communicated for the Boston Medical and Surgical Journal.

MEDICAL SPOON.

A brief Description of this newly-invented Instrument,

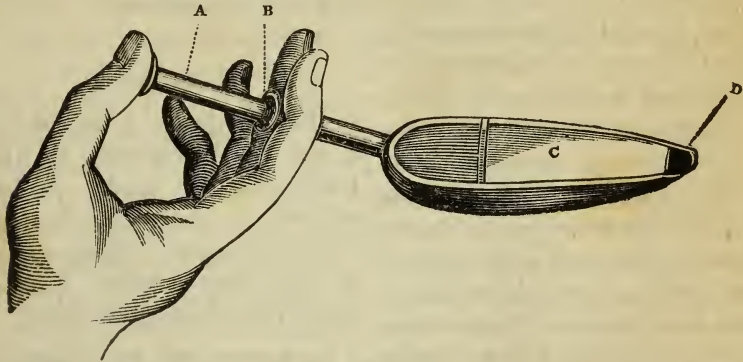
By CHANDLER ROBBINS, M.D.

HAVING procured one of these spoons from the maker, I take the liberty to give the profession a brief description of it through the medium of the Medical Journal. The object for which it was invented by Dr. A. T. Thomson, of London, was to administer medicine to infants and children, to persons so ill as to require food or physic whilst in a horizontal posture, and to maniacs.

A general idea of this instrument may be obtained by compar-

ing it to a common spoon covered entirely over, excepting only a small space near the point through which the contained liquid is to flow. If such a spoon were filled, its contents would evidently be prevented from flowing into the mouth by the pressure of the air on the exposed surface. This

evil is avoided by making the handle a hollow cylinder opening into the bowl, as represented in the engraving below.—For the purpose of introducing the mixture to be given, more readily into the spoon, a lid is fixed into the cover, which may be raised and shut again at pleasure.



When used, the lid C is to be closed tight on the liquid which has been introduced; the handle is then to be taken between the middle and fore fingers of the right hand, which fingers should press on the guard B; the thumb being then placed on the open end of the handle A, the instrument will be firmly supported.

When the bowl of the spoon is introduced into the mouth of the child, it should be pressed down on the tongue, and the thumb being then removed, the medicine will flow readily out at D, and pass into the stomach.

The advantages of this invention are so obvious as to need no illustration.

SKETCHES OF PERIODICAL LITERATURE.

DYSPHAGIA,

Attended by very unusual and singular Circumstances.

IN a late number of the Archives Générales de Médecine, is reported a singular case of this disease, the precise nature of which it was not found easy to determine. The patient, a man about sixty years of age, while swallowing a large piece of meat, suddenly experienced a sense of

stricture, as if the morsel had been arrested at the entrance of the œsophagus. In a short time he began to experience a constant desire of deglutition, but without the power, notwithstanding his continual efforts, to swallow the smallest portion of saliva or of any liquid which was offered him. He was incessantly making the motions preparatory to the act of deglutition, and when fatigue

obliged him to remit these efforts, a noise was heard like that of air escaping from the œsophagus. In the mean time, the respiration and speech were perfectly free, and no change of form or color could be discovered in the pharynx or external part of the neck. A bougie which passed freely into the stomach, proved also that no obstruction existed in the course of the œsophagus.

The spot pointed out by the patient as the seat of the foreign body, was precisely that occupied by the os hyoides, and the attending surgeon was led to suppose from the circumstances present, that some displacement must have occurred of the appendices of this bone. In pursuance of this idea, he carried the fore-finger of his right hand into the throat of the patient, so as to act on the os hyoides, while his left hand was pressed upon the throat and upon the same bone externally. The effect was immediate; the painful sensation under which the patient had been laboring was removed, and he at once recovered the power of deglutition. Two years after the same individual had a similar attack, and the same mode of treatment proved equally successful.

Dr. Ollivier, who reports the case, though not attended by himself, thinks the best explanation of the phenomena to be, that from a violent effort of deglutition, the os hyoides was carried downwards in such a manner that one of its cornua engaged itself in the corresponding cornu of the thyroid cartilage; or that its inferior cornua being pressed downward and approximated to each other, may

have become fixed in the space intervening between the apophyses of the thyroid. Such a displacement would be rendered possible and even likely to happen, by the excessive length of the cornua of the hyoid bone or of the thyroid apophyses, or by any irregularity in the direction of these processes.

HYDROPHOBIA.

IN Rust's Magazine is the history of a case of Hydrophobia in which *transfusion* was tried. A large quantity of blood was abstracted from the arm, and its place supplied by blood from another. It had no good effect, and the patient died.

It appears also by a paper in Hufeland's Journal, that Dr. Mayer, of St. Petersburg, has tried transfusion in a similar case, and with a like unsuccessful result. He took five ounces of blood from the arm, and, according to Magendie's plan, a pint of *water*, at 101 degrees, was injected into the cephalic vein. During the operation, a burning sensation in the region of the subclavian was experienced by the patient; and the pulse afterwards fell from 90 to 60, and became very small. This injection was used five times in about two days. A sense of fullness and heaviness about the heart was complained of; a profuse perspiration broke out, and the patient died of tetanic convulsions. It will be recollected that these spasms are in the usual course of the disease, and although in no degree mitigated by the warm water injections, cannot justly be attributed to them.

In the North American Journal is an interesting paper by Dr. Rosseau, in which he relates three cases in which symptoms resembling Hydrophobia were produced by other causes than the bite of a rabid animal. One case is also mentioned in which a man who had been bitten on the finger by a dog which was afterwards destroyed as mad, recovered without any ill consequences. These cases, and the author's reflections, have convinced him that there is no specific virus conveyed in the bite of a mad dog, capable of producing the train of symptoms comprehended under this title; and that where such symptoms have followed a wound inflicted by this animal, they are to be regarded as constituting a variety of tetanus, and as caused by the laceration itself. Dr. R. thinks that animals are often suspected of madness without reason, and that the signs of this disease are very indeterminate. In common with many previous writers, Dr. R. views the hydrophobia itself as arising from a spasm of the fauces, which renders swallowing difficult, and inspires the patient with a horror of renewing his efforts to effect it.

REMEDIAL VALUE OF ARSENIC.

THE Journal last quoted contains some remarks on this subject by Dr. Coxe, who is of opinion that an excess of caution has been used in the administration of this medicine. He quotes a case in which fifty drops of the solution were taken three times a day by a female without inconvenience, and the medicine continued at intervals for four years,

during which time the whole quantity taken exceeded a quart. Dr. C. thinks that considerable doses, continued for a short period, are more effectual and less hazardous, on the whole, than smaller quantities persevered in longer. The good effects which have been evinced by this article in cutaneous diseases, particularly of a leprous character, entitle it, according to Dr. C., to greater confidence in these cases than any other remedial agent; and it ought, in his opinion, to be employed at an earlier period than has been usual, without obliging the patient to wait till every other mode of treatment has been exhausted. Our own experience with this remedy leads, however, to different results.

HÆMATEMESIS.

DR. CONDIE remarks in the same Journal, that he considers the proximate cause of hemorrhage from the stomach to be congestion of the capillaries arising from irritation. In the treatment of this affection, he condemns the metallic astringents as decidedly injurious, and recommends the use of ipecacuanha in small and repeated doses. The good effects of this remedy have frequently been ascertained by practitioners, and are confirmed by the author's own experience. The hemorrhage is indeed frequently arrested by giving a scruple or more of the powder so as to produce vomiting; but a better mode consists in the repeated exhibition of much smaller doses so as to produce nausea. Small doses of calomel, given in like manner, have also been found useful.

 BOSTON, TUESDAY, JULY 28, 1829.

 JONES ON THE NON-EXISTENCE OF
 MALARIA.

WE gave last week a relation of the circumstances attending and consequent on exposure to marsh miasmata, with an analysis of the excellent work of Dr. M'Culloch on this important subject. Although the effects and the laws which regulate the action of malaria have been hitherto but imperfectly investigated, the *existence* of this latter has been generally,—we had thought universally,—acknowledged. The pamphlet of Dr. Jones, of Georgia, in which he denies its existence, must therefore be considered as one of the novelties of the day. The notice we shall take of this Essay will amount only to a brief but impartial statement of his views, putting far from us any attempt to oppose these views, and still farther any endeavor to uphold them.

Touching the history of this Essay,—it was first read before the Central Medical Society of Georgia, and subsequently sent to Dr. Hays, to be published in his *American Journal of the Medical Sciences*. Dr. H., after a careful perusal, returned it to the author, with some marginal notes pointing out inaccuracies in the statement of facts, and some feeble points in the arguments. Dr. H. also wrote to Dr. Jones that his motive was to have the essay appear as strong and creditable as possible, and requesting that it might be sent back to Philadelphia in time for insertion in the next number. All

this, which to us appears extremely friendly on the part of Dr. Hays, and a mode of procedure highly honorable to him as a man and as an Editor,—the more so since he is himself a staunch miasmatisist,—was received by Dr. J. as evidence of a desire to oppose his views, and of an unwillingness to have the article published in the *Journal*. This latter was more particularly inferred from the fact that the MS. was returned for correction at so late a period as to allow but two days, (ample time, we should suppose,) for revision and correction. Accordingly, as others have done before him, Dr. J. issued his essay in the popular form of a pamphlet, and appended thereto the marginal notes of Dr. H., with suitable replies.

In this Essay two propositions are clearly stated, viz :—

1st. "That no such deleterious miasmatic exhalations, so destructive to health, exist, except in the imaginations of speculative theorists," and,

2d. "That moisture, under different states of temperature, acting on the human frame under different states of the cutaneous functions and muscular relaxation, are the sole causes [is the sole cause] of intermittent and remittent bilious fevers." The arguments adduced in support of these positions are, as we understand, the following :—1st. That no chemical analysis or process of eudiometry has been able to detect any difference in the composition of healthy and unhealthy air. 2d.

That the agency of cold, particularly that which is produced by dampness, in checking perspiration and thereby producing fever, is at once conformable to reason and demonstrated by experience. 3d. That intermittents, or what are called malaria fevers, are most prevalent in moist tracts of country, and that without any reference to putrefaction or collections of stagnant water. 4th. That patients affected with intermittent frequently recover under proper treatment, without change of situation, which could not be the case if the cause of disease existed in the atmosphere, because the continued application of this cause would render all remedies unavailing. 5th. That hydrogen gas, to the presence of which the noxious quality of malaria is by many attributed, is not capable, under other circumstances, of producing intermittent fever. 6th. That the necessity of the presence of vegetable putrefaction, which is contended for by the miasmatisists, is disproved by the want of vegetation in the Campagna di Roma and on the Pontine marshes.

Although Dr. Jones maintains the foregoing arguments to have been suggested to him solely by his own observation, a claim which we certainly would not deny, we believe most of them to have been advanced before, and that Dr. J. might have found some of them answered in the popular works on this subject. As far as we understand Dr. J., he does not himself deny the existence of malaria in the strict sense of the term, since he admits that it is through the medium of the atmos-

phere that his morbid agent produces its effects. The controversy, then, between him and the miasmatisists, turns on two questions. The *first* is, whether the presence of vegetable decomposition is necessary in order to create this morbid atmosphere; or whether heat and moisture are adequate to its production. This question it is obvious must be decided by experience; on this ground it is discussed by Dr. M'Culloch in his treatise, page 466—476, and on this ground it is also discussed by Dr. Jones; but while the latter accuses the former of making assertions without proof, we cannot see that his own induction is more extensive or his facts more accurately drawn.

One of the arguments advanced by Dr. M'Culloch against the production of malaria by heat and moisture, is its non-existence at sea in tropical latitudes. To this Dr. Jones replies, that the cause is to be found in the sea-salt; whereas it has been shown by the former author, that salt water in similar circumstances is nearly if not quite as injurious as fresh. The replies made by Dr. J. to other objections against his theory, do not appear to us more satisfactory, and we fear will not satisfy the majority of his readers.

The *second* point at issue between our author and the miasmatisists is, whether any union exists between the atmosphere and its noxious ingredient, by which the chemical constitution of the former is altered. The negative of this question certainly gains great support from the argument before mentioned as derived from analysis; and to this the mias-

matist confesses himself unable to furnish a full and entire answer. This, however, is perhaps of less importance than might at first appear. The doctrine of malaria can be but little affected by any speculations in regard to the nature of the combination between the atmosphere and the poison. The composition of the air is still involved in mystery, not only as regards the mode of existence of vegetable effluvia, but even that of moisture itself. "In fact," says a late writer in summing up the doctrines of philosophy on this subject, "little knowledge has yet been acquired of the causes of many of the phenomena of meteorology. It is not yet demonstrated how water rises in the air, in what state it exists, or how it is condensed." Even admitting, therefore, the adequacy of heat and moisture to produce the whole effect which Dr. J. ascribes to them, we seem hardly to be justified in inferring the non-existence of malaria, even in the fullest sense assigned it by the miasmatisers.

But if Dr. Jones has failed in establishing his theory, it must be confessed that he has adduced in its support some ingenious arguments, and illustrated it by many curious and important facts. Unfortunately, some of these last are somewhat loosely stated, and in their present form are open to contradiction. We noticed also some inaccuracies of expression, and several grammatical errors, which must have occurred in the haste of composition, and which Dr. Jones will do well to correct in the event of his publishing a second edition.

Finally, with regard to the gene-

ral question of the nature of malaria, we confess ourselves still very much in the dark, and unwilling to yield an assent to either of the above authors. That the cause of intermittents is merely a combination of heat and moisture acting under the circumstances stated by Dr. Jones, seems to be contradicted by the fact that in our latitudes, in persons who are exposed to the extremes of both during oppressive and protracted summers, such exposure is never known to produce fever and ague; but if the same persons pass ever so rapidly through a malaria district, that disease is not unfrequently induced. The same objection will apply to Dr. M'Culloch's doctrine that the miasma which produces intermittents is the production of decaying vegetable matter in contact with moisture under a certain elevation of temperature. On the flats which border some parts of our city, for example, hundreds of individuals, of all descriptions, are exposed week after week to this combination during the heats of summer, and yet the effects ascribed to such exposure are not produced.—It cannot be replied that it is necessary to these effects that the air thus poisoned should act on a system modified by a southern climate; for the individuals last alluded to, after resisting this noxious atmosphere, are apt to be attacked by intermittents if they pass through a malaria district. The worst cases of the disease we northerners have to manage, are not in constitutions formed under the influence of a tropical sun, but in our own men and women, who have contracted the

disease whilst passing in the haste of business, or the still greater expedition of what they call pleasure, through the regions of marsh miasmata;—persons who have inhaled the poison in a single hour, whilst whistling for want of thought on the box of a stage-coach, or quietly sleeping on the deck of a canal boat.

With regard to the *effects* of malaria, the profession has been greatly enlightened by the labors of Dr. M'Culloch; its *nature* still remains enveloped in too much mystery.

BLISTERS IN ABORTION.

WE noticed last week, among our Sketches, a case recorded by Dr. Belden, in the last New York Med. and Phys. Journal, in which abortion appeared to be prevented by the establishment of an issue from a blistered surface. We have since received the following note, confirming this view of the subject, from a valued correspondent at Lynn.

To the Editors of the Boston Medical and Surgical Journal.

Honor to whom honor is due.

GENTS.—The fact communicated in the Journal of this day's date respecting the efficacy of issues in preventing abortion, is by no means new, as may be seen by reference to "the thirteenth edition" of Marryat's "Art of Healing," page 240, published in Bristol, England, 1792; from which the following extract is made, and is at your service.

R. H.

"The cure [of Abortion].—Prevention is all we are capable of in these cases. Where there is a proneness to miscarry, from a laxity of the muscular fibres, or if she has miscarried before, it will be necessary to use the same regimen as that recom-

mended under WEAKNESS of the SOLIDS, and to keep an issue constantly open. I knew a lady who miscarried twice, then opened an issue, and while it continued had three living children; she then suffered it to dry up, and again miscarried; it was cut again shortly after, and she bore five strong and healthy children. Her issue then dried up spontaneously, after which she miscarried three times successively.

July 21st, 1829.

ROOTS AND HERBS.

AN advertisement in the Virginia Phoenix, headed "The New York Medical Academy," caught our eye this morning, and gave us the first intimation we had received of the efforts making to reform, among other things, the science of medicine. A number of Root-and-Herb Doctors, it seems, have combined together for this inconceivable purpose, and are about opening a Medical School in the city of New York! This is indeed a rare specimen of high life below stairs.—These gallant reformers cry not so much intrigue and corruption, as murder! "Mercury, the lancet, and the knife," they proclaim to be "evidently fatal to multitudes;" and against these three dangerous enemies they have waged an open war. Had these valiant doctors aimed only to reform the *practice* of medicine, their object would have been laudable, however ridiculous the measures they might take to accomplish it; but this purpose is altogether too contracted to satisfy the aspirations of great minds; the Root-and-Herb Doctors have undertaken to reform the *Science* itself, as if the great principles of Science

were capable of being reformed by them, any more than those of Natural Philosophy or Moral Government. The *modesty*, however, with which their object is set forth, is in perfect keeping with that displayed in other parts of the notice.

It seems by the above-mentioned notice, that this reform has been brewing about forty years, but nothing very permanent was effected until the year 1827, when an individual, overpowered by his wonderful development of the organ of benevolence, and tender-hearted withal and not over fond of filthy lucre, became deeply impressed with the murderous iniquity of all regularly-educated medical practitioners;—horror-struck with the waste of human life and happiness occasioned by the prescriptions of the learned, intelligent, and experienced members of the faculty, he “procured a lot of ground, and erected a handsome and convenient edifice, for an institution denominated The United States Infirmary,” where the Science of Medicine might be reformed, and the Root-and-Herb system exclusively adopted. Adjoining this United States Infirmary, or Root-and-Herb Steepery, as it might with more propriety be called, “a large and commodious” edifice has been since erected for a Vegetable Medical School, which is to be opened, we are told, in November next.

At this SCHOOL OF REFORM are to be taught, in addition to the reformed doctrines, all the necessary branches taught at other schools; and yet things are to be so managed as that the student “may acquire a knowledge of both in less than one half

the time, and with half the expense, that is required at other Medical Institutions”! How this is to be effected we know not, unless it be by a species of enchantment, to be exercised, perhaps, by some magic *rod*.

But these redoubtable reformers do more; they guarantee *employment* to their pupils after they leave the school, and that too “with a generous compensation”!!

At the Root and Herb Steepery, “there will be no specified time to complete a course of study,” but when a diploma is given, it “will have a decided advantage over every other”!!! Bravo! It will doubtless throw the diplomas of Boston, New York, Philadelphia, and Baltimore, entirely in the back-ground; and as for those from the Universities of London, Paris, and Edinburgh, they will be mere brown paper compared to those from the Roots and Herbs. The reason of this is obvious. The former only indicate the qualification of a gentleman to assume the prerogatives of the profession; the latter do more,—they ensure him *employment*.

DR. GODMAN'S ADDRESSES.

DR. GODMAN, of Philadelphia, is about publishing by subscription a collection of Addresses delivered by him on various occasions; with an Appendix containing an explanation of the “Injurious Effects of TIGHT LACING on the Organs of Respiration, &c.”

This author is known as a person of uncommon merit, especially in the departments of Natural History and Anatomy. All his productions

bear the stamp of genius. It is to be expected that he will present in a strong light the facts connected with a subject interesting to the medical profession and important to the community.

The proposed Addresses will form an octavo volume. The subscription price is two dollars. A subscription paper is left at Mr. Carter's bookstore, corner of School Street.

SORE NIPPLES.

MR. NORTH, the scientific conductor of the *Medical and Physical Journal*, says he has found the following composition a very efficacious topical remedy for sore nipples:—

Take of Gum Arabic Powder, half an ounce;
Alum, five grains.

The alum, being reduced in a glass mortar to a fine powder, is to be well mixed with the gum arabic powder. This composition is to be applied to the parts affected, (previously dried by soft linen,) every time after suckling, by means of a camel-hair pencil. The nipple, after being covered with the powder, should be protected against the friction of the clothes by a shield of some kind,—many being in common use. The best we are acquainted with, is a short glass tube made expressly for the purpose, and sold by Mr. Charles White, Apothecary, in this city.

Dentition in an old Man, and Death in Consequence.—An old man of the age of 75 years, consulting Dr. Jahn, at Menington, told him that he was about to cut a new tooth, which was already bursting through the gum, and that this late dentition was hereditary in his family. On examining the mouth, the Doctor perceived an enlargement of the gum at the place of the last molar tooth, on the left side of the lower jaw, and further back a protuberance formed

by the new tooth. A short time after, the old man was attacked with a violent affection of the brain, under which he died. On examination after death, an inundation of watery liquid was found on the brain. The new tooth was extracted from the jaw: it was perfectly formed, but small, and had very short roots.

Eruption of the Measles on one Side only of the Body.—A child, from the time of its birth until it was a year old, had perspired on only one side of his body. This singular anomaly had disappeared under the continual application of warm baths. In an epidemic of measles, the child was attacked with that disorder, but the eruption only showed itself on that side of the body, which, from the beginning, had enjoyed the greatest share of vital activity.

Rust's Magazine.

New Mode of Vaccinating.—In the hope of rendering vaccination a more certain preservative against the attacks of smallpox, M. Jahn vaccinates his patients on the thighs as well as the arms, in such a manner as to produce from twenty-four to thirty-six pustules. The fever which succeeds to this operation is represented as very strong, but as never having been attended with grave or dangerous symptoms.

Hospital Reports.—In this Journal will henceforward be published, reports of interesting cases and operations which may occur at the United States Marine Hospital at Chelsea, as well as the Massachusetts General Hospital. These reports will be prepared by the Medical and Surgical Officers of these Institutions.

REPORT OF DEATHS IN BOSTON,

The week ending July 17, at noon.

Of croup, 1—consumption, 6—delirium tremens, 1—infantile, 2—intemperance, 1—liver complaint, 1—measles, 3—old age, 1—sudden, 1. Males, 9—females, 8. Total, 17.

OUR OWN AFFAIRS.

IT has been suggested to us by several gentlemen that it would be an improvement in the plan of this Journal, if it were to come out only on the 1st and 15th of every month instead of weekly, and each number contain two sheets instead of one. It would appear, say they, more respectable.—We are fully of the same opinion; and have to add that such a change would very considerably lessen our editorial labors, and be a saving of expense to the publishers.

The *subscribers*, however, derive advantages from the present form and arrangement which seem to make it our duty to resist the temptation of a more respectable appearance. Advances in medical science are made known, not only more speedily than they would be by the proposed plan, but in quantities better suited to the short intervals of leisure enjoyed by medical practitioners, and the work comes to them at a *lower rate*. In its present form, the Journal pays only newspaper postage; if the other method of publication were adopted it would pay pamphlet postage, which is nearly double the amount for every sheet. If again it were covered, which would be in a manner necessary under such circumstances, the postage of still another sheet would be added, making the annual amount of postage alone to those who reside more than 100 miles from Boston, more than half as much as the present subscription price,—a consideration of no little importance to distant Subscribers,—an evidence also of the extreme cheapness of this Journal, as well as of the expediency of retaining its present form.

We feel ourselves obligated, therefore, although in opposition to our own private interest and wishes, to continue the present arrangement, and if any improvements are made, en-

deavor to make them, in the true spirit of the age, not external but *internal*.

THE subscriber, formerly agent for the Proprietors of the Boston Medical and Surgical Journal, having become the purchaser and sole Proprietor of this work, informs those who are indebted for the first volume, that immediate payment of their subscription has become necessary in order to the proper settlement of his accounts with the former proprietors. He therefore requests that upon the receipt of this notice, the amount due according to the bill sent at the close of the volume, may be transmitted.

JOHN COTTON.

BOOKSELLERS, PUBLISHERS, and AUTHORS, are informed, that by transmitting to the Editor, free of expense, a copy of such works as they may write or publish on subjects interesting to the medical profession, they will be entitled to a notice of such works in the pages of this Journal.

CARTER & HENDEE,

Corner of Washington and School Streets,

HAVE recently published and for sale, LECTURES ON ANATOMY, SURGERY AND PATHOLOGY, including Observations on the Nature and Treatment of Local Diseases—delivered at St. Bartholomew's Hospital, by JOHN ABERNETHY, F.R.S.

ADVERTISEMENT.

The estimation in which the opinions of the celebrated teacher in the School of St. Bartholomew's is held, must render the present volumes invaluable to the student, while it will equally serve as a work of reference to the elder branches of the profession, containing, as it does, the views and opinions of one whose life has been spent in instruction, and whose talents and acquirements are no less admired than respected.

Nor is the value of the volume confined either to the medical *tyro* or the more experienced practitioner. The popular reader, from the plain, lucid and colloquial style of the Lectures, will derive both pleasure and instruction from the perusal, while the general contents yield a body of information not to be met with in works of this description, and which will render it in families a book of familiar consultation and reference.

July 28.

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

I.

RESUSCITATION BY OXYGEN GAS FROM
APPARENT DEATH BY DROWNING.*Letter 1.—To the Editor.**Cambridge (Md.), March 31, 1829.*

DEAR SIR,—At the close of my chemical amusements of this winter, an accident occurred which gave rise to an experiment whose result deserves, I think, to be classed among the subjects of your invaluable Journal. It is one on the efficacy of Oxygen Gas in an extreme case of Asphyxia.

A favorite young beagle hound had fallen into a neighbor's cellar full of water, and was drowned. How long he lay there, (which is a prominent point in the case,) can only be conjectured from the following facts:—He was heard flouncing and yelping in the waters; and the family believing he was a mad dog, did not venture in to his relief until their negro man returned from a ride of two miles, on which he had been sent shortly before the accident, when they supposed he had got out, as he had been long silent; but on searching, he found him lying dead under the water, and dragged him out. Finding it was my dog, he informed my servant, who obtained a wheelbarrow and brought him home, and then went in quest of me. When I arrived, with some gentlemen who accompanied me to witness

the experiment which I proposed, we found the dog's body and limbs so cold, hard, and inflexible, that, taking him by the feet, he was turned over as a block with four pegs attached to it.

Having at hand some jars of gases, and fortunately one of oxygen, which I had recently prepared for a similar experiment with smaller animals to be placed under asphyxia, from carbonic acid gas, but not having executed my design, I filled a large bladder with the oxygen, not diluted with any portion of nitrogen, because I wished to produce the greatest possible excitement in a case so desperate. I attached to the bladder a small brass stop-cock with a long beak, and infused into his lungs, by a violent pressure of the bladder, a copious dose of the gas; upon which he instantly made a convulsive and solitary yelp, to the full pitch of his usual and shrill voice in the chase. The dose was repeated with the same effect until the gas was consumed. He was placed by the fire in warm blankets, friction constantly applied, and a strong dose of diluted volatile ammonia forced into the stomach. His body and limbs became relaxed; his respiration short and rapid, with subsultus tendinum.

This experiment commenced at one o'clock, and at eleven that night he raised himself on his feet, and made a few feeble steps. The

next morning he left his bed in the kitchen, and walked to his kennel, a distance of fifty yards; but during the second and also the third day, he suffered under a total anorexy. I ordered an enema of sulphate of magnesia, and the following night tinct. opii eleven drachms. On the fourth day he took a small portion of meat; on the fifth and sixth days he showed the marks of excessive atrophy; in fact, his vital functions are restored, but I am candid to say, those of the animal will, I fear, never be fully regained.

I have been minute with this case, not from a belief that it is the first instance of the revival from asphyxia by oxygen gas, for I have read of one, and one only, and that arose from carbonic acid gas inhaled for experiment, by a Professor Higgins, in Europe; but I have never met with a case of recovery from apparent death by drowning. If any exist, they are rare, and it is certainly a subject worthy of attentive prosecution.

I have the honor to be yours, very respectfully,

JOSEPH E. MUSE.

In answer to a request that the history of the case might be continued, the editor received the following:—

Letter 2.

Cambridge (Md.), April 24, 1829.

Dear Sir,—In reply to your inquiry, I am gratified to be enabled to state that my experiment in the case of asphyxia has become more perfect. In the course of eight or ten days after my communication to you, the health of the subject began to improve rapidly, and his *appetite, repletion, and vivacity*, now indicate a thorough renovation of the animal functions; which

candor had compelled me to declare I did not then anticipate.

One other incident may be worthy of notice,—that his voice, which was naturally sharp and shrill, has astonishingly altered into the full and coarse, though his cough resulting from the accident, has, with every other symptom of disease, wholly disappeared.

Allow me to acknowledge my obligations for the respectful sentiments you have done me the honor to express in your last and on former occasions; which, in truth, I cannot too highly appreciate, as coming from the founder of a Journal which is dispensing the fruits of science to an ungrateful community, and which, though suffered to expire, will have erected, by its kindly influence on the moral condition of man, a monument imperishable.

I am, dear Sir, truly and respectfully yours,

JOSEPH E. MUSE.*

II.

ON THE CURE OF NEURALGIA IN GENERAL.

We reprint the following extract from Dr. Johnson's analysis of M'Culloch on Neuralgia, because it contains much practical light on a subject of universal interest. The increased frequency of neuralgic diseases of late years, has been already adverted to; the mode of treatment, therefore, which has been found successful by distinguished practitioners, cannot be made too generally known. We recommend the following remarks to the very particular attention of our readers.

* From Silliman's Journal.

IF our author be right in considering neuralgia as a disease dependent on a constitutional cause, however prominent may be the local symptoms,—in short, if it be a mode of intermittent fever, or fundamentally of the same nature, it is natural that the same system of treatment should be enjoined. To this he was led, more than twenty years ago, from theory, and is now confirmed in the propriety of the system by practice and observation. This plan of treatment has never failed him in recent cases, and has often succeeded in those which were of long standing. In this chapter, our author has been unavoidably led into considerable repetition, as the principles of cure, and even many of the individual remedies, have been broached or detailed in preceding chapters, more especially when treating of intermittent. It will not be necessary for us, however, to go much into the minutiae of the treatment; since it was of infinitely more importance to connect the etiology and pathology of these varieties of disease, than to dwell on their management when once recognized.

The first remark, and it is a very important one, is this,—that the neuralgiæ often disappear without medicines, by a spontaneous effort of the constitution,—while they are also truly cured by circumstances that are not noticed, and to which credit is not given. This explains the reputation which has been gained by particular modes of cure, which were, in reality, either nugatory or injurious in themselves. Hence improper practices are continued from mistaken observations. Particular periods of life, as the climacteric in males, and cessation of the catamenia in females, often root out old and inveterate neural-

gic affections, that had defied all remedies. The most frequent of the real, though little observed causes of cure, however, will be found in change of air, and of general habits of life,—which, by the bye, is a direct remedy of great power, though often recommended to the patient when the practitioner is tired out with fruitless attendance. The effects of moral impressions are underrated and ridiculed. A change of physicians, or the acquisition of a new and strong confidence in a new and reputed person, often effects a cure where the remedies prescribed had little or nothing to do in the business.

“Hence an actual benefit often derived from empirical remedies and empirics, or from physicians of popular if false reputation, or of peculiar, perhaps insolent or coarse manners,—an influence extending widely over all the nervous disorders, of which so many occur from the general cause of disease which includes the subjects of this essay.”

370.

This, in reality, is the cure by charms. This is the reason why quack medicines,—the composition of which, being unknown, is more respected,—effect cures, when the same medicines fail in ordinary prescription.

“Hence that universal confidence in substances and formulæ, and numbers and quantity; and hence especially that enormous consumption of empirical remedies,—compounds found in every pharmacopœia, but divested of all their virtues under this form, because separated from the mystery and the incantation. The physician who attempts to reason with his patient on the effects and utility of his remedies, pays a most unmerited compliment to human reason;

and while he will fail to influence, he will not be very long in discovering that he will shortly have no patients to enlighten or to cure. With the loss of the mystery, the merit is at an end; and he who proves himself to be the true philosopher and physician, is precisely the man who will never be trusted." 371.

This is a melancholy picture, but we fear it is too true. It may account for the immense reputation of a living practitioner, who never reasons or says a civil word to his patients, but drives them from his presence, all having and all knowing beforehand, that they will have the same prescription or box of pills, whatever be the nature of the malady!* Dr. M. relates a case of *tic douloureux*, which he had long treated in vain with arsenic and other remedies, but which instantaneously vanished before the solemn gibberish of an old woman, celebrated for the possession of a charm against toothach.

We know that intermittents are sometimes cured by giving a powerful anodyne just before the expected paroxysm, which breaks the chain and interrupts the morbid process. The same is sometimes done in neuralgia, and ought not to be neglected, though they are not the real remedies in this class of maladies.

"But the chief and the most energetic remedies in neuralgia, be the form what it may, are the tonics; and of these, as in intermittent, the most efficacious are bark and arsenic. Each, in its class, may stand at the head of a list which it is fruitless to enumerate, since it is so well known to even every druggist; nor need I

repeat what relates to the mode of using these, since it is precisely the same as in intermittent fever. That there is any one vegetable tonic more efficacious than bark, or differing in the mode of action, as far as we now know these remedies and their powers, I am inclined to doubt, but not to deny that such do exist, since I consider that we are very far from having exhausted the medicines of the vegetable kingdom; so far, indeed, as rather to be in an absolute infancy of knowledge on this subject.

"While with bark as the type, the physician may command the whole range of astringents, aromatics, and bitters: he is also bound to try one where another fails; since thus may it possibly be discovered, even that what is most efficacious in common intermittents may not be most so in the neuralgiæ, differing as they do in respect to the local action in the latter. But as I can, on this subject, say nothing of any great value from my own experience, I must be satisfied with having pointed out the leading principle and the road to be followed; as I need, also, do no more than suggest those combinations, whether of these vegetable substances themselves, or of the same with narcotics, the occasionally superior value of which in intermittent is well known.

"If arsenic be admitted as the type of the metallic remedies, it is equally easy for the physician to command the whole range of these,—so well known, that I could add nothing respecting their powers,—while I much suspect that very fanciful values have often been attached to some of them, from that common mecha-

* Abernethy, no doubt, and the blue pill.

nical system which looks more to variety of medicines than to a knowledge of diseases. Much has indeed been lately said respecting the especial value of the carbonate of iron, as it is generally called, in the common Neuralgia (Tic); while in reality it has been administered as a merely empirical remedy, and without system. In my own experience, I had resorted to it long before these recommendations, both in intermittent and neuralgia, but without discovering that it possessed any collateral merit above arsenic, while far less generally efficacious as a remedy. But, on all these remedies I shall be very glad to hear of the experience of others, since I have wanted both temptation and opportunity to do them justice. As to the value of arsenic compared to bark, I can only repeat what I said formerly, that I have found it more generally efficacious in neuralgia, while it has appeared less so in intermittent; often acting almost like a charm on the pain, and even in cases of many years' duration. But on this also I am ready to be corrected; as I am satisfied that the experience of no one individual, even were it far greater than mine has been, is sufficient to decide on subjects of this nature." 377.

Dr. M. makes no distinction, as to treatment, in the different forms of the disease,—with the exception of sciatica, in which he has not had much experience. A medical friend, residing in a district noted for this disease, informs our author that he has derived the most marked advantage from this remedy in numerous cases.

When the attacks of intermittent or neuralgia are either very

irregular or of long standing, the power of medicine is very limited in breaking the chain of morbid action. A single bloodletting has often rendered a recent intermittent regular, though previously irregular; and Dr. M. suggests, but without having experience on the point, a similar experiment in irregular neuralgia, while he condemns the practice of repeated depletion. Mercury, pushed so as to affect the mouth, will sometimes render agues amenable to tonics, though previously rebellious. The same may be tried in the neuralgiæ, since in both classes the glandular viscera are often deranged, and the mercury acts beneficially in correcting such disorders. But as the greater number of cases which present themselves are now chronic, and consequently inveterate, probably from the wrong treatment employed when they were recent, so the cures will be comparatively few, however judicious the remedies. It is not until the old cases shall have died off, and a generation of the same diseases has arisen under the improved practice, that a fair trial can be given to the latter.

One great cause of neuralgia becoming chronic, is the caprice or impatience of the afflicted. Anxious for a speedy cure, they are led away in succession by name after name, and recommendation after recommendation; the consequence of which is, that no steady system is pursued, and no cure effected. The work, half done by one, is reversed by another, till at length the patient is rendered sceptical as to the skill of the practitioner or the potency of the medicine.

But the paramount object is to

withdraw the patient, if possible, from the operation of the primary causes of the disease. On this account, the locality of his residence should be carefully examined, according to the rules which have been already laid down by the author in his Treatise on Malaria, and of which the reader will find ample analyses in this Journal. Without such removal from the sphere of the causes, no permanent cure need be expected. The dread of moisture should ever be in the patient's mind,—he should remove to a dry, but not to a cold situation, since cold itself is an exciting cause. The change of scene and air resulting from travelling alone, would often effect the cure, both in agues and the neuralgiæ.

“What remains as to the general treatment, relates to diet. As in intermittent, whether recedent or chronic, I have no hesitation in saying that the usual full diet of persons in health, with a rational use of wine, forms an essential aid to the cure, and that it has often proved a cure in itself, when used as replacing the opposite and pernicious system. But I shall not enlarge on this; as the evils arising from low diet are involved in those belonging to the debilitating practice on which, even after all that I have said, I must offer some additional remarks hereafter.” 386.

Of the local remedies for neuralgia we need say but little. Dr. M., like Dr. Heberden, found blisters to aggravate the pain when placed near the nerve affected. What has been called a perpetual blister is still worse, as proving “almost always a positive aggravation, not only of the

local disease itself, but of the general irritation and disorder of the system.”

Dr. M'Culloch's *local* treatment of this disease, which is given somewhat in detail, will be concluded in our number for next week.

HOSPITAL REPORTS.

Cases of Compound and Complicated Fracture, requiring Amputation. Reported for this Journal from the Massachusetts General Hospital.

CASE 1st.

MAY {29th, 1829.—Mr. H. M., aged 23, a painter, fell about thirty feet from a *staging*,—was taken up in a state of insensibility, and remained so for some hours. Was brought to the Hospital four hours after the accident. Could not then be made to notice without much effort;—he would scream out when moved suddenly.

On examination, the left *femur* was found fractured into several parts at its lower extremity. Some portions of the bone had been forced through the soft parts, accompanied by considerable hemorrhage. The right wrist was much swollen, and very painful on motion. About the left eye and extending to the temple, was considerable ecchymosis. No other marks of injury could be found about the head. The trunk appeared very well. On each leg was a large and old ulcer. The patient was exceedingly stupid, and much inclined to sleep: he would start suddenly at times, as if altogether unconscious of *action* or *situation*. Pulse small and feeble; scarcely felt at the wrist; extremities cold; a sallow pale-

ness was over the whole body. Endeavors were made to retain the bone in a comfortable situation. Wine, brandy, and water, were freely administered. Habits intemperate.

30th.—Reaction began to take place about 8, P. M., yesterday. Was very restless during the night, requiring force to keep him in bed. Took lemonade, water, &c., during the night. This morning, pulse full, quick, but not strong. Took a little gruel. At 11, A. M., *Consulting Surgeons* convened, and advised immediate amputation. Preparations were made, and in a very short time the patient was ready in the theatre for operation. He seemed to be unconscious of what was to be done, and inclined to sleep.

Operation by Dr. Warren.

The artery was compressed in the groin, and the thigh amputated by the circular operation. Two ligatures were applied, and the patient removed to be dressed in his ward. Lost but very little blood.

31st.—No after-hemorrhage from the wound. Stump was dressed with adhesive straps, &c., and has remained well. Pulse quick, and somewhat full; was very restless during the night; discharge of urine involuntary, accompanied with excruciating pain, but not tinged with blood; bowels costive; mind wandering at times; some involuntary motion of the muscles about the face; eyes wild.

R. Infus. Sem. Lin. ℥vi.

Spts. Æth. Nitrosi, ℥i. M. rep. quaq. hor. 2da.

Enema Commune.

June 1st.—One dejection yesterday after enema; dysuria con-

tinues; slept but little last night; in almost constant motion, throwing himself from one side of the bed to the other.

2d.—Has had no dejection since the 31st of May. Wound dressed to-day; ligature came away; no hemorrhage; discharge thin and foetid; general want of action. Enema commune to-day.

3d.—Pulse small; very weak; appetite wanting; disposed to be comatose; very restless at times; dysuria less. May have two glasses of wine daily.

R. Quin. Sulph. gr. ij., in Pil. quaq. hor. 2da.

7th.—Very restless; delirium at times; diarrhœa since yesterday. Omit pill. Wine whey three gills, three times daily.

R. Tr. Opii, gtt. xv. Ev. hr.

till diarrhœa be checked.

8th.—Wound shows no great disposition to heal; diarrhœa ceased; now pain in the abdomen; dysuria continues to annoy at times. Omit opium, and apply fomentations over the bowels.

10th.—Better; mind less wandering; less disposed to sleep; pain in the abdomen subsided; wound appears more healthy.

11th.—No dejection.

R. Tr. Rheii, ℥ss. statim.

13th.—Improving in all respects. Omit Spts. Æth. Nitrosi.

14th.—Answers questions understandingly. May have milk porridge.

15th.—Appetite good; stomach and bowels regular; wound healing.

17th.—May have broth.

18th.—Pulse 90; wound discharges much.

R. Pulv. Cinch. ℥i.

Tr. Ejusdem. ℥ss. M. ter in dies.

22d.—Costive; complains much of the right wrist.

R. Tr. Rhei, ʒss. every four hours.

23d.—Six or seven dejections, with relief. Opiate if needed.

24th.—Discharge from the wound much diminished; yesterday P. M., had a severe chill, with nausea; got an emetic, and vomited much foul matter; tongue still coated. Omit Tr. Cinch. and bark; take wine whey, wine and water. Drink balm tea.

25th.—Wound nearly closed, but discharge scanty, flaky, and very fœtid; surface of the wound smooth, and covered with a substance like coagulated albumen. Apply poultice at night.

26th.—Discharge much more copious, but exceedingly fœtid and flocculent. Complains much of pain and stiffness in the shoulder. Wash the wound with Solution of Chloride of Lime.

29th.—Right wrist very painful; much swollen; appetite gone; emaciation great. Fomentation of bitter herbs to the wrist.

30th.—Fails rapidly.

Brandy, ʒss. every four hours.

July 4th.—Mind wandering; great tremor of the hands; convulsive twitching of the muscles of the face.

6th.—Gradually sinking.

9th.—Died. On examination of the wrist, a large quantity of pus issued; perhaps ʒviij. The capsular ligament of the wrist was found ruptured behind; the radius and ulna were thrust backward. The os scaphoides and os cuneiforme were broken in halves; a small portion separated from the os lunare, and the styloid process from the ulna. The fragments were disjoined from the

radius and driven forward, lying before the remaining halves of the bones. The whole appearance was as if a blow with an instrument half an inch in width, had been directed transversely across the wrist.

The remaining leg lay upon the side with the toes pointed inwards, and could not be reduced; appearing as if dislocated at the hip joint. Being examined as to this, the head of the bone was found in its place, the round ligament in an eroded, ulcerated state, and the capsular ligament filled with pus.

CASE 2d.

May 15th, 1829.—James Domsley, an Irish laborer, aged 27, while scuffling with his comrades, tripped and fell among some timber that was near at hand. He was taken up and brought to the Hospital immediately, where he was examined. The tibia was found fractured nearly transversely, about six inches below its head, and quite a large opening through the soft parts communicating with the fractured ends of the bone. The hemorrhage at the wound was considerable. The fibula was not broken. The patient was very stout and muscular, constantly in the habit of using ardent spirits very freely. The limb was placed and supported upon a pillow; the hemorrhage soon ceased, and an evaporating lotion was applied. *Internally* was ordered the following:—

R. Spt. Æth. Nitrosi, ʒss.

Tr. Opii, ʒij. M.

Cujus, gutt. xxx. Sum. quaq. hor. tertia.

16th.—Was very restless fore part of the night; dragged the

limb out of place, and produced bleeding; toward morning became more quiet. Pulse 84 and full; vessels of conjunctivæ loaded.

R. Sol. Mag. Sulph. ζ iv. Si opus sit, dos. repetet.

12th.—Patient quiet; slight hemorrhage yesterday P.M.; cathartic operated.

20th.—Leg very much inflamed, and covered with phlyctænæ about the wound. Mind wandering; constant motion and muttering in sleep.

Applic. parti affect. Hirud. No. xx. postea cataplasma commune, et sæpe repetetur.

May have brandy and water, with Tr. Opii pro re nata.

24th.—Constitutional symptoms less urgent; inflammation subsided; discharge rather copious from the wound, thin and bloody; ulceration extending. Patient drinks much; perspires freely; has no appetite; pulse frequent and feeble; bowels costive.

R. Ol. Ricini,
Tr. Rhei, aa ζ ss. M. post operat.

R. Ammon. Carbonat. gr. v., et rep. quaq. hora quarta.

Continue brandy and laudanum as circumstances may require.

27th.—Sinking; yesterday, copious flow of arterial blood from the wound; was arrested by compression of the femoral artery; mind rather more tranquil. Continue stimulants and antispasmodics.

29th.—No hemorrhage since the 26th; seems a little more comfortable; mind more active and less confused; less muttering in sleep; large slough separating from around the old wound.

31st.—Yesterday slough came away; copious hemorrhage fol-

lowed; patient has sunk in consequence; pulse 104 and feeble; takes but little nourishment.

June 2d.—A consultation of the Hospital Surgeons was held today, and amputation advised as the only possible course that promised anything to the patient. Has had no more bleeding; continues stimulants, &c., with broth and beef-tea.

3d.—*Operation by Dr. Otis, at 5, P. M.*—The artery was efficiently compressed at the groin, and the limb removed from above the knee by the circular mode of operating. Two ligatures were applied, and not more than three ounces of blood lost during the whole operation. The wound was dressed in the usual manner, and no hemorrhage followed.—At 7, P. M., was visited. Patient seemed very stupid, and scarcely could be aroused; was bathed in a clammy sweat; hands cold; pulse very feeble at the wrists. Drank some warm brandy and water. Efforts were made to produce reaction in the system, but without effect; he continued to sink quite gradually, and at 9, P. M., expired.

The limb, after it was removed, was examined. A large quantity of *purulent matter* was found imbedded among the muscles; the soft parts, for a considerable distance, were clearly separated from the bone. The body was examined post-mortem, and no marks of disease found.

CEDEMA OF THE GLOTTIS

Successfully treated at the Hospital at Nantes.

PETER BURCOIN, aged 46 years, entered the Hospital of Nantes on the 29th of December. Four days pre-

viously he had been exposed to a current of cold air, while in a state of perspiration, soon after which he was seized with sore throat and difficulty of swallowing, followed by a sense of burning heat along the trachea, and constant cough. The oppression, difficulty of breathing, glairy expectoration, &c., increased, and when he entered the hospital he was in a very dangerous condition,—each inspiration being effected with great labor. His face was of a violet color,—pulse hard and full. The alum insufflation employed twice.

[See below.] It caused some irritation at first, and much cough, during which he inhaled with considerable difficulty. Afterwards the breathing became more easy,—he was nearly seven hours without coughing, and the night was passed in comparative tranquillity. The insufflation was practised every day till the disease yielded. Very few other medicines were employed,—none of any efficiency. Expectoration came on about the fourth day after he was received, and then the symptoms became much mitigated.

SKETCHES OF PERIODICAL LITERATURE.

ALUM INSUFFLATION.

THE insufflation of finely powdered alum is recommended by Laennec as having been very successful in *Angina Pellicularis*. This name has been recently given to all those inflammations about the throat, in which false membranes, as they are commonly called, are thrown out, so as to diminish the calibre of any of the air passages. Even in Cynanche Tonsillaris, the practice recommended is capable of subduing the disease more speedily than any other.

NOTICES IN PATHOLOGY.

UNDER this head, four interesting cases are related by Dr. Geo. B. Wood, in the last North American Journal. In the first, the patient, an active intelligent boy, about three years of age, was attacked somewhat suddenly with a partial paralysis of the lower extremities, accompanied with some anomalous symptoms. On attempting to walk, he moved forward with a tottering step, in a di-

rection constantly inclining toward the left side, for a short distance, and then fell. In the sitting or standing posture, his head had a similar inclination to the left shoulder. His intellect was somewhat impaired, and his sense of hearing less acute than usual. These circumstances, and the recollection of M. Homens' observations in regard to cerebral affections, directed the suspicions of Dr. W. to the cerebellum. These were confirmed in the course of the next day by the patient complaining of severe pain behind the left ear. Recourse was immediately had to local bleeding, blistering, &c., and in three days afterward the boy recovered.

The second case affords an example of the consequences which follow upon repelled eruptions. A gentleman, æt. 70, was attacked with erysipelas of the face, which extended downward so as to cover a considerable portion of the anterior part of the chest. The part thus affected

was treated with solution of corrosive sublimate, which at once relieved the erysipelatous inflammation, but was followed by swelling and induration on the left side, and symptoms of prostration. A blister was applied to the breast and tonics administered, but without avail; the patient died on the fourth day.

The third and fourth were cases of cerebral disorder; the first with symptoms resembling apoplexy, the last of a convulsive character,—both induced by gastric oppression, and relieved principally by vomiting.

THE FETAL CIRCULATION.

DR. J. R. COXE, in the same Journal, maintains the doctrine of a direct communication between the uterus and the placenta, by means of the bloodvessels, without any intermediate structure. This doctrine is supported by many distinguished anatomists, some of whom,—viz., Cooper, Vieussens, and Haller,—have confirmed it, as they think, by the aid of injections. Similar injections were attempted by Dr. Monro, who reports them as having proved unsuccessful. Dr. C. considers the question as interesting in a physiological point of view, though practically unimportant.

A POWERFUL DISCUTIENT.

A YOUNG woman applied to the Surgeon of St. George's Hospital to have a tumor taken from her. It was hard, encysted, the size of a marble or larger, and situated at the outer corner of the right eyelid and superciliary ridge of the frontal bone. It had existed about three months, and increased rapidly.

The morning of the day on which it was to have been extracted, she accidentally received a violent blow on it, and at noon it was found soft, fluctuating, free of pain, and nearly dispersed. She was directed to wait a fortnight and see the result of this accident, which was doubtless a perfect cure, since she did not after make her appearance.—May not the Surgeon derive a practical lesson from this case? Does it not involve a principle which has given a certain degree and kind of reputation to quacks and professed bonesetters and callus breakers?

STEM OF A TOBACCO-PIPE EXTRACTED FROM THE URETHRA AND BLADDER.

A CASE is recorded in the London Medical Gazette, of a person 54 years of age, who had been subject for years to an occasional stoppage in the urinary passage, after exposure to cold, &c. One night as the fit came on him in a state of intoxication, he being unable to find his catheter, seized a common tobacco-pipe and passed the stem into the bladder. The urine flowed freely through it, and he was relieved. On withdrawing the pipe, it broke, and about four inches of the stem remained in the urethra. Much pain and tension was experienced in the perineum; and on introducing the finger per ano, the stem was felt projecting into the bladder.

All attempts to remove this body by forceps were unavailing, and it was at last withdrawn through a hole cut into the urethra anterior to the bulb. The wound healed readily, and no bad consequences ensued.

ISCHURIA

In which Urine was passed by the Umbilicus.

UNDER this title is reported, in the London Medical and Physical Journal, a singular case, which occurred in the Worcester Infirmary, in a female patient, aged twenty-three. In consequence of exposure to cold during menstruation, symptoms of abdominal inflammation came on, together with suppression of urine. For eighteen days no water was passed by the natural efforts, and the quantity secreted seemed gradually to diminish, until none could be obtained by the catheter. At this time a bloody discharge appeared at the umbilicus, which afforded some relief. On the 23d day urine began to be discharged at the umbilical outlet, but ceased to be so on the 26th. Five days after, six ounces of urine were drawn off by the catheter; and in an hour, two quarts of the same appearance gushed from the umbilicus. This discharge now continued for three days, and then ceased during the same time, no water in the mean while being passed through the urethra. On the 38th day, two quarts of water flowed from the umbilicus, and this was followed by instant relief. For eight days there was little variation; no urine could be obtained from the urethra, but it passed daily from the umbilicus. At length, on the 46th day, four ounces of urine were drawn from the bladder. The discharge by the urethra now daily increased, and that from the umbilicus lessened. There was

also a gradual amelioration of the symptoms; except that vomiting, which she had had from the beginning, still continued obstinate. The bladder was regularly emptied by the catheter for more than a month, after which time she began to pass some urine, and the power over the organ was gradually restored. She slowly recovered her general health, and menstruation was reëstablished.

This remarkable and interesting case presents several subjects for physiological and pathological investigation. The great point to be determined, however, is, by what means the urine was conveyed to the umbilical orifice. Did the urachus become a pervious canal, and permit the water to pass through it from the bladder? or was the fluid secreted in the peritoneal cavity, and an opening made by ulceration in the thinnest portion of its parietes? The circumstance of the bladder being found empty for so long a period before the vicarious discharge, renders the former supposition very improbable. We must therefore suppose it to have been a real metastasis, similar in its nature to those rare cases which have been recorded among the medical curiosities of other countries, and to the remarkable instance which occurred in a neighboring state three years ago,—a case, some account of which may be found in this Journal, Vol. I. No. 3, under the title of *Paruria Erratica*, and which has scarcely yet terminated its progress through the journals of Europe.

 BOSTON, TUESDAY, AUGUST 4, 1829.

 CONVERSATIONS ON THE ANIMAL
ECONOMY.

AMONG the circumstances which distinguish the present age from those which have preceded it, certainly not the least remarkable is the effort which is making to diffuse science among all classes of the community. Those branches of knowledge which formerly were limited to a favored few, have within a few years become, through the medium of lectures and popular publications, to a certain degree attainable by all. A large class of works tending to this object, have been written for the avowed purpose of instructing children, but in a manner calculated to render them highly useful to adults whose attention has not been turned to the subjects of which they severally treat, and to whom it is desirable to obtain some general information on these topics. Thus we have *Conversations on Chemistry*, *Conversations on Political Economy*, *Conversations on Natural Philosophy*, and *Conversations on the Animal Economy*. The last is the title of a work published not long since in London, and which we believe has not been reprinted in this country. Its object is to render the most important facts in physiology familiar to the comprehension of the general reader, whose pursuits have not been of such a nature as to lead him into this sphere of inquiry. A juvenile work it certainly is not; since the subjects of which it treats, and the manner in which they are explained, alike render it unfit for

youthful readers. It is less calculated for a school-book than the analogous work of Paley; while to the general reader, and to young persons who have acquired some previous education, it will prove a much more agreeable and more useful work. As is the case with many works of the class, it is a conversation only in name; the individuality of the personages is sacrificed to the animation of the dialogue, and the junior speakers make suggestions and propose solutions of difficult points, with a degree of ingenuity which, even in an adult ignorant of the subject, would be somewhat marvellous.

The work is divided into twenty conversations; in the course of which are considered the integuments of the human body; the varieties of mankind; the bones; the muscles; the brain and nerves; the organs of sense; the digestive function; circulation; respiration; animal heat; growth and decay. All these subjects are treated in a manner extremely suitable to the purpose aimed at, in language divested as much as possible of technical terms, and wholly free from anything which could wear even the semblance of indelicacy.

In the conversation on the varieties of the race, is introduced the much agitated question as to the cause of the great diversity among mankind, springing, as we suppose them to have done, from a single pair. This question is so involved with the first principles of religious

faith, that we wish the author, in a work designed for a class of readers greatly exposed to the influence of sceptical doctrines, had made a point of placing the answer on clearer and more decided ground. According to the author, any peculiarity of form which is born with an individual, is capable of being transmitted to his offspring; but those which are produced by art or accident, are limited to the individual himself, and do not become hereditary. In proof of this last position, it is mentioned that the flattening of the heads among the Caribs, and the contraction of the feet among the Chinese, require to be repeated on every individual in order that the fashion may be kept up. Both the facts and the inference, however, are denied by some of the most distinguished physiologists of the day; while, on the other hand, there are facts equally striking and better authenticated, which lead to a precisely opposite conclusion. Perhaps our author's admiration for Mr. Lawrence led him into too hasty an adoption of his views on this point. At all events, we regard it as unfortunate that, in a work designed for popular use, a question affecting the credibility of revelation should have been discussed, without allowing to the arguments on the side of truth, the degree of preponderance to which they are justly entitled.

Under the head of organs of sense, are noticed the curious views of Dr. Wollaston in regard to the direction of the eyes; and a plate is given in which the same eyes which form part of a devotional head, and seem strongly to express this character,

are made to adapt themselves to the upper part of another face, where they appear at once to have a different direction and to express opposite emotions. Dr. W.'s experiments on this subject have not, we believe, been incorporated into the standard works of the day, and their adoption into the present was, therefore, peculiarly fortunate. We may also mention that under the general subject of the brain and nerves, cranio-logy comes in for its share of attention; and the arguments by which this doctrine has been maintained on the one hand, and attacked on the other, are stated with great clearness and sufficient impartiality. On the whole, we are disposed to think highly of the work as a popular manual, and hope shortly to see it make its appearance in an American edition.

QUACKERY.

WE have understood that there is on foot a petition to the Massachusetts Legislature, for a repeal of the Act by which irregular practitioners of medicine, or in other words Quacks, are deprived of the right of legal process for their fees. We have not seen the paper, and it was merely by accident the report reached us. If it be true, we can find no language strong enough to express our surprise and indignation. Is it possible that an individual who has sense or education enough to draw up a petition, could be found willing so far to degrade himself and human nature, as to engage in so disgraceful a transaction? For hire indeed, some men will do deeds of darkness, when they can be assured their own names

will never come to light;—but is it possible that an individual can be found in this age of the world, so dead to all sense of what he owes to himself, his family, his friends, and society,—so dead to all sense of common decency, as to put his *name* to a petition such as we have alluded to? We cannot believe it possible. If, however, we prove to be in error—if men of common respectability join in this attempt to open the doors of the poor and ignorant to the imposition of the Charlatan and the wretchedness which follows his footsteps, we can assure them, *first*, that in no civilized country is there a legislature weak or wicked enough to grant a petition which thus gives a direct and express sanction to quackery; and *second*, that their own names will be ever after associated with those of the impostors they encourage: the public will ask no further evidence of mental imbecility—no further cause to reject them from its confidence.

Malignant Sore Throat.—Dr. Guimier, a physician of some eminence, residing in the Commune of Vouvray, has published several cases of malignant sore throat, (*angina maligna*;) in which the topical application of lunar caustic proved highly beneficial. The tonsils, the uvula, and the pharynx, were covered with membranous concretions of a grey-white or yellow color, and this collection was sometimes so thick and abundant about the larynx, as to impede respiration. The inflammatory action was frequently extended to the membrane lining the windpipe; and previous to the adoption of this mode of treatment, many patients were suffocated by the tenacious collection blocking up the glottis. The hydrochloric acid had been used with

success in a few cases; but Dr. Guimier, after a fair trial, gave the lunar caustic a preference, because the eschar it produced was limited to the part to which it had been applied, while the effect of the acid spread to the contiguous parts, often to a considerable extent. Even when the disease had spread to the internal membrane of the windpipe, Dr. Guimier found the lunar caustic, applied to the tonsils, &c., to produce a very happy effect.—The lunar caustic has been long a favorite topical application with some eminent surgeons of London, in chronic ulceration of the tonsils &c., which frequently follows the continued use of mercury, in affections termed pseudo-syphilitic; and we have frequently witnessed its beneficial effects in such cases, after detergent and alterative gargles, with attention to the general health, had failed to produce any essential benefit.—*Gaz. of Health.*

Malposition of the Kidney.—On examining the body of a man who died of pulmonary consumption, the left kidney was found, after searching for it with much diligence, *at the brim of the pelvis.* It was lying on the psoas muscle, appeared to have no renal capsule, and was twisted round upon itself so that its notch looked outward to the crista of the ilium. From the notch an ureter went out, which turned down over the brim of the pelvis to reach the bladder. The kidney was smaller than the other, and received its supply of blood in part from the external iliac artery, on which it lay.

This is a rare misplacement, and in some surgical operations would have produced much confusion and inconvenience.

REPORT OF DEATHS IN BOSTON,

The week ending July 25, at noon.

Of apoplexy, 1—accident, 1—childbed, 1—dropsy on the brain, 2—dysentery, 1—dropsy on the chest, 1—drown, 1—intemperance, 1—liver complaint, 1—measles, 5—old age, 1—palsy, 2—suicide, 1—unknown, 3. Males, 11—females, 11. Total, 22.

ADVERTISEMENTS.

HARVARD UNIVERSITY.

MEDICAL LECTURES.

THE MEDICAL LECTURES in Harvard University will begin in the Massachusetts Medical College, Mason-street, Boston, the third WEDNESDAY in October next, the 21st, at nine o'clock, A. M. Anatomy and Surgery, by Dr. WARREN. Chemistry, Dr. WEBSTER. Midwifery and Medical Jurisprudence, Dr. CHANNING. Materia Medica, Dr. BIGELOW. Theory and Practice of Physic, Dr. JACKSON.

Students attending the Medical Lectures are admitted, *without fee*, to the Surgical Operations and Clinical Practice of the Massachusetts General Hospital, during the courses.

Aug. 4. W. CHANNING, *Dean*.
eoptOct21.

BERKSHIRE MEDICAL INSTITUTION.

THE Annual Course of LECTURES will commence on the first Thursday in September, and continue fifteen weeks.

Theory and Practice of Physic by H. H. CHILDS, M.D.

Anatomy and Physiology, J. D. WELLS, M.D.

Medical Jurisprudence, S. W. WILLIAMS, M.D.

Theoretical and Operative Surgery, S. WHITE, M.D. and S. P. WHITE, M.D.

Materia Medica, Pharmacy and Obstetrics, C. B. COVENTRY, M.D.

Chemistry, Botany, Mineralogy and Natural Philosophy, C. DEWY, M.D.

Matriculation ticket, \$3. Fee for Lectures, \$40. Library ticket, \$1. Graduation, \$15.50. Board, including washing, lodging and room, \$1.75 a week.

Pittsfield, July 22, 1829. aug4sept30

CARTER & HENDEE,

Corner of Washington and School Streets,

HAVE recently published and for sale, LECTURES ON ANATOMY, SURGERY AND PATHOLOGY, including Observations on the Nature and Treatment of Local Diseases—delivered at St.

Bartholomew's Hospital, by JOHN ABERNETHY, F.R.S.

ADVERTISEMENT.

The estimation in which the opinions of the celebrated teacher in the School of St. Bartholomew's is held, must render the present volumes invaluable to the student, while it will equally serve as a work of reference to the elder branches of the profession, containing, as it does, the views and opinions of one whose life has been spent in instruction, and whose talents and acquirements are no less admired than respected.

Nor is the value of the volume confined either to the medical *tyro* or the more experienced practitioner. The popular reader, from the plain, lucid and colloquial style of the Lectures, will derive both pleasure and instruction from the perusal, while the general contents yield a body of information not to be met with in works of this description, and which will render it in families a book of familiar consultation and reference. July 28.

TURNER'S CHEMISTRY,—NEW EDITION.

JUST published, and for sale, by CARTER & HENDEE,—Elements of Chemistry, including recent Discoveries and Doctrines of the Science. By EDWARD TURNER, M.D. F.R.S.E. Second American Edition.

COTTONS & BARNARD have for sale, "An Inquiry concerning that disturbed state of the vital functions usually denominated Constitutional Irritation. By Benjamin Travers, F.R.S., senior Surgeon to St. Thomas's Hospital, President of the Hunterian Society of London, &c. &c."

NEW LONDON WORK.

JUST received, by CARTER & HENDEE, corner of Washington and School streets, A Chemical Catechism; in which the Elements of Chemistry, with the recent discoveries in the Science, are clearly and fully explained. Illustrated by Notes, Engravings and Tables, and containing an Appendix of select experiments, &c. By THOMAS GRAHAM, M.D. Member of the Royal College of Surgeons in London, &c. &c.

C. & H. have also just received, Elements of Chemistry. By ANDREW FYFE, M.D. F.R.S.E.

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

I.

Communicated for the Boston Medical and Surgical Journal.

History of an Asphyxia from falling into a Privy, successfully treated.

By JOHN C. HOWARD, M.D.

SUNDAY, July 26th, 10, A.M.—

Had an urgent call to see a child of one Mrs. O'Neal, a little girl, two years of age. She had fallen into a privy, and there remained, as the parents supposed, five minutes, and had been out as long when I saw her. She had been cleansed, and was to all appearance dead. On close examination, however, a slight motion of the respiratory muscles was observed; there was nothing like vital heat, but on the contrary a death-like coldness; the whole body had a moribund look; the lips were livid, the eyes closed, the abdomen tumid,* and the extremities of a bluish cast,—all of which indicated a stoppage of circulation. The very slight motion observed in the respiratory muscles, determined me to do all that I could for resuscitation, in which process I was assisted by Mr. Dwight, a medical student.

Friction with strong Tincture of

* The tumescence of the stomach and bowels arose, no doubt, from the presence of *sulphuretted hydrogen*, which, even when largely diluted with air, is considered by Orfila a very strong poison, utterly deleterious to animal life.

Cantharides was resorted to, and used principally over the chest and abdomen;—before the tincture, however, could be procured, friction was applied with flannel wet with N. E. Rum, which is generally found at hand! These applications, together with bottles of hot water to the extremities, seemed to excite the capillaries and induce evident signs of life,—evinced in the muscles of respiration, and by the occasional act of coughing.

It was at first difficult to say on what the asphyxia depended,—whether it proceeded from the gas evolved in the vault, or from the feculent matter taken into the stomach. On learning from the father that the child, when he reached her, was immersed to the depth of three feet, so that he had great difficulty in finding and bringing her out, the case was regarded as analogous to one of drowning, and it seemed proper to bring about speedy vomiting, in order not only to evacuate the stomach, but to rouse the whole system to some vigorous action. An emetic of Sulph. Zinc and Ipecacuanha was accordingly prescribed. It soon operated; the child was very much relieved; and, after vomiting freely, cried stoutly, and appeared entirely out of danger at 12, M. She was seen in the evening by Mr. Dwight, quite sprightly, up and running about.

Boston, August, 1829.

II.

INFLAMMATORY DYSPEPSIA.

Practical Observations on the Nature and Treatment of this Disease.

In the *Midland Reporter* is a paper of much practical interest on this subject, by Dr. Malden, of Worcester. We cannot better communicate its contents to our readers, than by extracting from the *London Medical Gazette* the following abstract of it.

THE symptoms of chronic inflammation of the mucous membranes of the stomach, are often confounded with those of simple digestion. These are acidity, flatulence, and uneasiness of the stomach after eating; amounting, generally, to pain more or less acute and dangerous in its duration. In general it may be inferred, that the nearer the inflamed portion is to the cardia, the sooner the pain is felt after eating. Often the appetite is good; frequently there is a longing for those articles which the patient knows, from experience, would cause him the most uneasiness. In some cases there is constant uneasiness of the stomach, and sometimes there is tenderness of the epigastric region, upon pressure. If vomiting, preceded by uneasiness, or pain at the stomach, be of frequent occurrence, there is reason to suspect the commencement of serious mischief in that viscus. Wasting, if it be steady, however slow, is a very serious symptom.

The author has repeatedly observed, that the suspension of sympathetic headaches has been followed by organic disease of the stomach. Sometimes the atrophy is fatal before the organic lesion is of great extent. Often ulceration perforates the stomach,—occasionally the changes which take place

have the character of carcinoma. The morbid sensibility of the stomach, in these cases, is greatly augmented when the diseased structure ulcerates; and there is then an aggravation of the constitutional symptoms.

An accidental error in diet may produce a state of the mucous membrane which will either assume the character of acute gastritis, or go on more slowly.—A young lady, in good health, ate some threshed wheat. She felt considerable uneasiness at her stomach for several days afterwards; her bowels were bound, and her appetite impaired. She took, by the advice of a medical friend, some strong opening medicine, which relieved her at the time. Six months from the time she ate the wheat, she very often vomited, generally within an hour after her meals: her appetite was good, but she was afraid to eat. She felt a dull pain in her stomach after meals, a little to the left of the linea alba. The tenderness on pressure at this part was very trifling; but the cartilage of the rib immediately above it was very tender when pressed. The tongue was furred in the middle with a tenacious white mucus; the edges were clean, pale and moist; countenance pale and languid; the pulse 80, small, but not hard; bowels generally rather bound. She was directed to live exclusively on milk, milk and water, and gruel; to apply six or eight leeches, every second or third day, to the epigastric region, and to take a dose of the following mixture early in the morning, occasionally:

R. Magnesiæ Sulphatis ℥vi. Magnesiæ Carbonatis ℥iiss. Mannæ ℥ss. Aquæ Menthæ viridis Oss. Dosis sit Cochlearia Magna iij. cum pari mensurâ aquæ fontanæ mista.

Upon this plan of treatment the symptoms soon disappeared, and the author regards the case as one of inflammation of a portion of the stomach.

Another variety of dyspepsia is thus described.—“Some individuals have repeated attacks of inflamed tonsils, pharynx, sneighderian membrane, or larynx, dependent on the coexistence of chronic inflammation of the mucous membrane of the stomach. In these persons, pain and uneasiness in the epigastrium, and an increase of habitual dyspepsia, precede the appearance of the catarrhal symptoms, and the latter often occur independently of any exposure to cold. If, in the treatment of this kind of cases, the attention be directed chiefly to the removal of the epigastric pain and tenderness, and by judicious diet to obviate gastric irritation, and the consequent dyspepsia, the catarrhal symptoms speedily give way.”

Dr. Malden has seen much mischief result from the injudicious use of mercury, which, with some patients, disagrees in any dose or form. The mildest preparation of mercury is the hydrargyrus cum creta, and sometimes we can, with propriety, only prescribe this.

“From long observation, (says our author,) I am convinced that the union of ipecacuanha, or antimonial powder, but in particular ipecacuanha, with blue pill, enables us to produce more decided effect on the liver than we could by blue pill alone. The advantage of this is very great; for the blue pill may be gradually reduced, and at length entirely omitted in the preparation, and the healthy secretion will continue under the

sole exhibition of ipecacuanha. There is not a fact in the practice of medicine, of the truth of which I am more satisfied than I am of this, and I have found a knowledge of it exceedingly useful.”

Another medicine of which our author speaks highly, is the subborate of soda. He was first led to the trial of it by reasoning upon the salutary effect it has on aphthous ulcerations of the mouth and fauces, when used as a gargle. Dr. M. gives from ten grains to half a drachm of borax, in solution, three or four times a day, and sometimes adds one or two drops of laudanum to each dose.

The following remarks on the pulse deserve attention:—“The pulse, in this form of the disease, is not always hard, and often is not much accelerated, and yet the judicious treatment of the malady is strictly antiphlogistic; the *local* morbid sensibility alone being sufficient to indicate the propriety of this practice, and the successful issue of the cases so treated confirming its correctness.

“Speaking from the results of my own experience, I should say that if the symptoms or the state above described, were attended by an uniformly hard and quick pulse, the commencement or progress of serious organic change, or the spread of the inflammation to the serous membrane, ought to be apprehended as the consequence.

“The pulse is always hard in cases of scirrhus pylorus; to this I do not remember an exception, and in all cases where organic disease had involved the whole of the gastric tunics, the pulse has been hard. An uniformly hard pulse, particularly if attended by

wasting, is the worst symptom the dyspeptic can present to his physician. Perhaps it may be objected that I have confounded irritation of the mucous membrane of the stomach with inflammation of it, and that many of the symptoms of the cases I have described, might exist without the actual presence of inflammation. To this I answer, that theoretically it is very difficult to define the exact point where irritation ends and inflammation begins; that irritation always produces an increased afflux of blood to the part irritated, which is certainly the first visible change in the inflammatory process; and lastly, that practically the distinction is not of so much importance as many practitioners imagine, since the antiphlogistic treatment is adapted to both states."

III.

PULMONARY CONSUMPTION.

The following remarks on Pulmonary Consumption, are from the pen of Mr. John Tuson, Surgeon, London.

HAVING found the practice usually adopted in consumption of the lungs, not only to prove inefficacious, but evidently to accelerate its fatal termination, I have long abandoned it, and for many years have adopted a treatment calculated to support the powers of the system and to correct the constitution. In most cases I have arrested the progress of the disease and prolonged the lives of the patients; and in two cases, attended with what may be termed its characteristic symptoms, as purulent expectoration, colliquative perspiration, hectic fever, emaciation, &c. &c., my plan has com-

pletely succeeded. Actuated by the desire of employing means to cure such patients, instead of quieting symptoms, which every medical man should have in view, I have latterly given the iodine, combined with the solution of the acetate of morphine, (proportioned to the extent of the attendant irritation,) an extensive trial; the favorable results of which have fully satisfied my mind that the disease is more under the control of medicine than practitioners generally imagine. In the early stage, when the lungs are in a state of inflammatory excitement, with a view to prepare the system for the administration of the iodine, I prescribe the nitrate of ammonia, and attend to the state of the alimentary canal, &c. And here I beg to observe, that when there are tubercles in the lungs, or the patients are of a scrofulous habit, the treatment with the iodine I have found very efficacious. When an effusion of serum has taken place in the chest, the iodine, combined with the squill, is an invaluable medicine. The physician must of course proportion the combination and dose to the existing symptoms. I should not discharge the duty I owe to the profession and to the public in general, were I not to call their attention to a mode of treatment that I have found so decidedly efficacious. Impressed with these sentiments, and for the sake of suffering humanity, and not from motives of interest, I am anxious to make it generally known; and I am the more particularly induced so to do, as the means usually pursued in practice more frequently aggravate than alleviate the sufferings of consumptive patients, and, as

I have observed, hasten the fatal termination of the malady, by diminishing the vital energies of the system.

IV.

ON THE CURE OF NEURALGIA IN GENERAL.

(Concluded from page 390.)

Local Treatment.

OF the local remedies for neuralgia we need say but little. Dr. M., like Dr. Heberden, found blisters to aggravate the pain when placed near the nerve affected. What has been called a perpetual blister is still worse, as proving "almost always a positive aggravation, not only of the local disease itself, but of the general irritation and disorder of the system."

"The only local remedy from which I have really seen such advantageous effects as to induce me to recommend it, is the application of steam directed by the usual means of a pipe, to the affected part; while of course the same reasoning applies, if in a minor degree, to fomentations and hot water. The value of these latter applications, indeed, in rheumatism of the face, in the rheumatic or neuralgic ophthalmia, and in sciatica, has long been known; if, from their too great simplicity, and their not being 'made up in the apothecary's shop,' they are less valued than they deserve. But while I consider the blast of steam as the most effective of all the modifications of this practice, I have often succeeded by means of it, in removing, almost instantaneously, a paroxysm of the severest neuralgia of the face, and, occasionally, so as to put a stop,

in the chronic disease, to an entire relapse; which, from all the patient's past experience, was expected to last some weeks." 391.

Cold applied to the part does sometimes give temporary, but never permanent relief. On the contrary, it generally exasperates the subsequent sufferings of the patient.

"Though I have already spoken of the use of narcotics, this is a more convenient place to point out one advantage to be derived from them; a fact which I purposely postponed, on account of its connection with the useful effects of hot water and steam. As a means of diminishing pain during the painful state, they are nearly useless, unless pushed to such an extent as to stupify the patient; in which case it is probable, as I have already insinuated, that their effects are injurious, while it is easy to comprehend how they ought to be so, by inducing indirectly that debility which so prolongs and aggravates all the neuralgiæ. But when the acute state is past they become useful, as tending to remove that soreness which remains after the chief pain has ceased, and also by reducing the general irritation which has been excited by it. Thus also they sometimes act usefully, even as local applications, at least to sensible parts; and it is probably on this principle chiefly, that they are of advantage in the neuralgic inflammation of the eye." 394.

Dr. M. next adverts to the lædientia, and satirizes with no small degree of force, the once celebrated practice of dividing the nerve in neuralgia; but as that practice is now laid in the "Tomb of the Capulets," we need not

trouble our readers or ourselves on that point. The use, or rather abuse, of excessive purgation, is next denounced by our author, and not without reason. Low diet, of course, comes in for its share of censure, and, as far as neuralgia is concerned, we have no fault to find with our author's strictures. But when he comes to ridicule the plan of abstemious living in dyspeptic complaints, he goes beyond his depth, and proves to those who have infinitely more experience than himself, that he knows nothing about the matter. This is the misery of having a hobby-horse. A man hits upon one good idea or thing; but he is not content with making that idea or thing useful to the world,—he must push it to extremes, and endeavor to make it the “universal good.” Dr. M'Culloch must be well aware that no medical journal has done him so much justice as ours; and that we have proclaimed his merits through every region of the earth, which the “rising or the setting sun surveys.” He is too sensible not to know that our praise is the more valuable in proportion to the impartiality which we display towards his failings,—at least what we consider his failings. The following case, which we shall give in Dr. M.'s own words, does not at all support his anathema against *abstinence* in dyspepsia, though it is brought forward by him as a “COUP DE GRACE” to that system.

“This unfortunate philosopher had been long subject to the usual dyspeptic and nervous symptoms of studious men, and was of a sallow and emaciated complexion; appearing, in familiar language, to be far more in want of addi-

tional blood than of its abstraction, while his disorder was continuously aggravated by a system of low diet, adopted on the same mistaken views. Passing every day with him, in company with an English physician, it was easy to watch that over which we had no control; as there would also have been no propriety in attempting to oppose ‘the best advice in Paris.’ Headach was, as usual, one of the occasional symptoms; and on one unfortunate day he was induced to send for his surgical friend, by whom he was immediately bled. The headach, on the following day, continued, or rather returned, as it had formerly done, but with increased confusion of thought; the pulse and all else indicating, to the English physicians in question, increase of general debility, and compelling us at length to offer advice, which was however opposed by the usual arguments. A second bloodletting of course took place; and the consequence was that he became, but only in the night, partially delirious,—a result easily explained, in its very limitation. It was then determined, in full consultation, that there was inflammation of the brain,—to the exceeding surprise, not without remonstrances, of the two English physicians,—and, consequently, with the addition of blisters, shaving the head, and ice, another bloodletting was ordered and practised. The delirium then increased, while the pulse became feeble enough, as might have been supposed, to have made any man reflect; but as this did not happen, or rather as the reflections took the opposite course, the practice was persevered in, and on the following day the pa-

tient died,—leaving the physicians, doubtless, convinced, as usual, that he had not lost blood enough. Such is a French case; but it would be easy to give no small number of parallels from English practice; and should it make no impression at present, the day will come round again when its value as well as its nature will be understood.” 403.

Doubtless there might be many cases collected on both sides of the channel, where sanguineous depletion has been carried too far, and where irritation is mistaken for inflammation. This is the great source of error. Where inflammation actually exists, there cannot be very much mischief done by taking away a little more blood than is necessary. But where the *neuroses* are treated as *phlogoses*, which was the case with the unfortunate gentleman in Paris, then indeed the havoc of constitution is tremendous, and life itself is often sacrificed. With the following specimen of our author's sarcastic strictures on physicians and physic, we shall close this article.

“It were well indeed if not only ruined constitutions, but even death itself, were not the frequent, the almost daily result, of physic thus misapplied in all the analogous and parallel cases, as also in some others; the produce of a combination of system, fashion, and ignorance, which renders physicians and physic the just terror at present of all those who can see and distinguish. It is difficult to speak without high indignation as well as horror, of what we thus daily witness. To suppress the former is impossi-

ble, when our own, perhaps dearest friends, have thus been destroyed: and well now, perhaps, will he decide, who, like Napoleon, resolves to exclude this art and its professors entirely; for, on the arithmetical average, he will assuredly be far on the side of security. It is but to open our eyes to see the truth of this every day; while if it is over the ruined health or the life of females, that we shall most often have occasion to grieve, from the obvious reason that in them the nervous affections thus mistaken and maltreated, chiefly abound, or are chiefly brought before physicians, so has there been a rapid increase of the evil, from the numbers who, returning from a continental residence with the consequences of marsh fever which I have so often described, have been subjected to this truly mortal as well as mistaken treatment.” 421.

The last chapter in the work is one of a different cast from the others. Having terminated his Essay when his evidence was exhausted, and his induction carried as far as it could safely go, Dr. M. ventures on a chapter of “conjectures respecting the condition of the nerves and nervous system in intermittent and neuralgic diseases.” These conjectures are ingenious, and some of them plausible; but we have no space left for samples of them here. We part from our author with feelings of much respect and esteem,—believing that he has contributed much more to the advancement of our science than many who have held their heads much higher in the republic of medicine.

V.

From the Western Journal of the Medical and Physical Sciences.

History of a Case of Empyema from protracted Measles and Pleurisy, in which the Operation of Paracentesis gave immediate Relief.

By Dr. SAMUEL MERIWETHER, of Jefferson, Indiana.

CALVIN COOK, a youth of nineteen or twenty, of sanguineous temperament and delicate fibre, was attacked with measles some time last winter, perhaps in February, (1829,) while at work on the Louisville and Portland Canal. He returned home to his mother's, (Clark co. Ind.), where he remained a few weeks, when he was able to resume his labor. His cough remained, however, and from his exposed situation he was taken with pleurisy, attended with violent pain in the left lobe of the lungs. From the best information I could gather, he was neglected or not regularly attended by his physician, and became emaciated, with cough, dyspnœa, a gradual enlargement of the left side, difficult respiration when placed on the right side, general debility, and hectic exacerbations.

On the third of May, I was called in consultation with Dr. Lewis. On examining the patient, I concurred with the Doctor in the opinion, that an operation was the only means of relief that could be employed. The chylopoietic viscera appeared to be affected from contiguity or sympathy of parts, as there were considerable tension and tenderness at the pit of the stomach, with enlarged spleen; he was therefore directed to take a cathartic. On the morning of the

4th, Dr. Lewis visited the patient. The medicine had operated, and dejections from his bowels were healthy. During the evening he had two chills, with an entire absence of pain, &c. On the morning of the 5th, in company with Dr. Bridges, I visited our patient, and found his heart beating with considerable force on the right side, with general œdema of the left, which measured, from the spinal column to the sternum, nearly double that of the right, and had an indistinct fluctuation.

I gave the young man our opinion relative to his case, and that an operation was the only means of relief. To this he submitted with fortitude. Proceeding to the operation, he was laid close to the edge of the bed, (previously made firm,) with the affected side presenting. I made an incision between two and three inches long through the integuments, betwixt the sixth and seventh ribs, cutting close to the edge of the seventh, and carefully avoiding the intercostal artery; on the knife's passing through the intercostal muscles, the distension of the pleura costalis was very great, and on puncturing it a volume of pus issued forth and continued to run for forty minutes, when his pulse became so languid as to require an immediate dressing of the wound. He expressed himself better under the discharge. We gave him an anodyne, and directed wine and water to be given during the evening, should his pulse continue weak and low.

On the morning of the 6th, I found him every way better; he was free from fever, slept pretty well, had some appetite, and his

respiration was easy, whether he lay on one side or the other. The distended ribs had subsided, and likewise the œdema; the wound appearing to close, I introduced a blunt-pointed probe and leaden canula, about one and a half inches long, which kept up a discharge for two weeks at least.—The quantity of pus evacuated from first to last, was judged by all present to be two gallons. From this time the patient's treatment was committed to the care of Dr. Lewis, by whom I have since

been told that the quantity of matter discharged while under his care, was equal to the first. His health was now fast improving; skin soft and perspirable; secretion from the kidneys and liver healthy; free from cough; wound entirely healed; and he takes gentle exercise every day on horseback or in an easy carriage. The general treatment has been aperients, elm or flaxseed tea, with Dover's powder, occasionally at night, and lastly, the sulphate of quinine as a tonic.

SKETCHES OF PERIODICAL LITERATURE.

DIGESTIVE PROCESS.

DR. THOMSON, of the University at Glasgow, has suggested a new and somewhat curious explanation of the changes induced in the food by the process of digestion. Some experiments of Dr. Wilson Philip seem to show, that when the gastric nerves have been divided, the nervous influence may be supplied for a certain time, and digestion may be artificially continued, by passing a current of electricity from a galvanic battery through the stomach. The identity of the nervous influence with galvanism being thus rendered probable, Dr. T. suggests that its effect may be to decompose the muriate of soda contained in the food, and thus to set at liberty the muriatic acid, which, dissolving the food itself, produces chyme. This solution being effected, the acid is no longer wanted, and is therefore neutralized by the bile, which, besides a small portion of free alkali, contains picromel,

a substance capable of uniting with the acid, and of forming with it an insoluble compound. The soda of the salt, in the mean time, is otherwise disposed of, and goes to form the blood, the bile, and the other secretions; in all of which more or less of it is found, Dr. T. thinks many important results would follow the establishment of this theory, and particularly an improved method of treating dyspepsia.

PARALYSIS ATTENDED WITH PECULIAR SYMPTOMS.

THE following case is related in the N. A. Journal:—A child, three years of age, of strumous diathesis, was attacked with paralysis of the muscles of the back and inferior extremities while riding in a carriage with her mother. Bleeding, frictions, &c., were employed, and sensation restored to the affected parts at the end of an hour. A second attack, affecting the right extremities only, was experienced next morning, and

laste about the same period. A similar paroxysm occurred daily for about a week, when they ceased, and for several weeks the child had excellent health. At the end of this time, a recurrence of the paroxysms took place with similar intervals. She continued to be subject to the disease in this manner until her death, which happened at the age of six years. Dyspepsia and costiveness were present from the commencement of the attacks, induced apparently in a considerable degree by improper diet; and a marked diminution in the severity of the disease was observed to follow an improvement of the digestive powers. After death an examination was made, and in the small intestines were found four distinct intus-susceptions, attended with considerable structural alteration, which seemed to prove them not to be of recent origin, and rendered it likely that they were coëval with the commencement of the symptoms above mentioned. There was no other morbid alteration of any importance.

EMPHYSEMA OF THE LUNGS A CAUSE
OF ASTHMA.

DR. COATES, of the above Journal, thinks that asthma is often produced by the rupture of the airvessels of the lungs during severe fits of coughing, and the consequent effusion of air into their substance. He adduces, in support of this opinion, the examination of two cases in which asthma had occurred during life, both of which presented this phenomenon. Such an accident, if happening to a considerable extent, would of course

produce permanent inflammation of the lung, impair its function, and produce dyspnoea. The desire for cool air, during fits of asthma, may be accounted for, according to Dr. C., by its greater density, and consequently larger proportion of oxygen.

NITRATE OF SILVER.

MR. HIGGINBOTTOM seems to be still unwearied in finding out and publishing the virtues of his favorite remedy. A second edition of his treatise has lately made its appearance, enlarged by the addition of much new, useful, and entertaining matter. The cases in which it has been useful, though they do not comprise all the ills that flesh is heir to, certainly constitute a formidable catalogue. Phlegmonous inflammation is subdued, and prevented from attaining the suppurating stage; the progress of erysipelas is checked; inflammation of the absorbents is arrested in its progress; punctured wounds are successfully treated; and chronic ulcers which have resisted every mode of treatment, are cured by its application. Mr. H. deserves the thanks of the profession here, as well as abroad, for his perseverance in investigating the virtues of this remedy; and whether the sanguine expectations he seems to indulge of its future usefulness are to be realized, or otherwise, the facts which he has collected in regard to it, will be of permanent value and importance.

URETHRAL STRICTURES.

MR. STAFFORD, of London, has published an account of eleven cases in which this affection was treated by

incision. The instrument employed by Mr. S. is called the *lancetted stilette*. A description of this instrument was given in a former work of Mr. S., and is quoted in the London Med. and Phys. Journal for September, 1828. Five of the cases refer-

red to, were those of impermeable stricture; i. e., which would not permit the passage of the smallest bougie. The results are highly favorable to this mode of practice in similar desperate emergencies.

BOSTON, TUESDAY, AUGUST 11, 1829.

MESMERISM.

WE know not whether our readers will recognize, under this title, the once celebrated doctrine of animal magnetism; nor should we remind them of its existing title, were it not that our attention has just been caught by an elaborate paper in the London Med. and Phys. Journal, which appears to be written by a zealous advocate for the truth of the doctrine. This writer asserts, that so far from having been exploded in consequence of the experiments instituted to test its truth, the results of which were by many thought decisive against it, it has continued to grow and flourish, while a resistless weight of testimony has been accumulating in its favor. The facts which compose its early history may be briefly stated. About the year 1784, a gentleman in Paris by the name of Mesmer, pretended to have discovered a universal remedy for disease in a certain volatile fluid which he termed animal magnetism. He considered this fluid as diffused through all space; as capable of entering into the substance of the nerves, on which it produced peculiar effects; and as capable of being transmitted from one body to another, whether animate or inanimate,

through an indefinite space. Such, in fact, were the marvellous effects reported of this new remedy, and so general the excitement in regard to it, that a commission was appointed by the king, consisting of four physicians and five members of the Academy of Sciences, of whom Dr. Franklin was one, to investigate the whole matter. Their verdict was, as might have been anticipated, that the effects produced were referrible to the influence of the imagination alone. The individuals subjected to the trial were affected very differently, apparently according to their various nervous susceptibility. Some were calm and tranquil, and felt nothing; some experienced faintness, nausea, rejection of food, and diarrhœa; and many had convulsions. These effects, however, did not follow unless the patient was aware, by seeing the movements of the operator, that she (the subjects were generally females) was under treatment. On the other hand, many were affected in a similar manner by merely being made to believe themselves the subjects of experiment, although the motions supposed to be necessary to produce the effects, were not performed by any one. The examiners also submitted them-

selves to be operated on, but experienced no effect whatever. Many other interesting particulars respecting these experiments, are related in Dr. Rees' Cyclopaedia,—article Imagination.

It might, perhaps, be inferred, that after trials so extensive and results apparently so satisfactory, the doctrine of Mesmerism must have fallen into discredit. This, however, does not appear to be the case; since at the present period we find a strenuous defender of the cause in one of the contributors to a distinguished medical publication, who adduces, in support of his opinion, the sanction of highly respectable names, and facts which we seem compelled to hold indisputable. Mr. Chevenix, the author of the article, gives us a letter from a medical friend in Ireland, who cured a patient of colic simply by directing his attention to the epigastric region. After this had been continued two or three minutes, the man turned round suddenly and vomited an immense quantity of acrid bile. This was followed by free evacuations from the bowels, and entire relief. The same means were put in operation, three days afterward, to produce evacuations, and were equally successful. A third trial of mesmerism completed the cure; and the fortunate patient, who had for years been suffering with constipation and other symptoms of dyspepsia, was restored to perfect health.

The *second* case was one of confirmed consumption, and was cured by using the remedy twice a day for about a month. One *dose*, in parti-

cular, is said to have caused sleep and the exhibition of some interesting phenomena. Their nature is not stated.—The *third* was a case of chlorosis cured in thirty days, but followed by a relapse on discontinuing the treatment.—The *fourth* was a case of worms in a girl of twelve. The remedy was employed for three weeks, during which time she passed great numbers of creeping things, and grew better. The treatment was then discontinued, but the girl's health went on improving, and she had no return of the complaint.

It has been asserted by the opponents of Mesmerism, that it proved most effectual with patients of a nervous temperament. In order to test *fully* the accuracy of this opinion, Mr. C. tried it on ten of the residents of an insane hospital. The consequence was, as had been expected, that the patients remained in *statu quo*; so that the conclusion was inevitable, that Mesmerism does not produce its effects through the medium of the nervous system.

But, independently of his own experience and that of his friends, Mr. Chevenix finds, in the authority of more than one distinguished name, additional support of his favorite doctrine. That philosophers so eminent as Cuvier and Laplace, should have given their testimony in its favor, is certainly a point of no small importance; and as the remarks of the former are decidedly the most favorable, we venture to give them as quoted by Mr. C.—“It must be confessed that in all experiments, the object of which is to determine the effect which the nervous system of

one person may have upon that of another, it is difficult to distinguish the effects of the imagination of the person acted upon, from the physical effects produced by the person who acts. Yet the effects produced upon persons in a state of insensibility, and that produced on animals, no longer permit *it to be doubted* that the proximity of animated bodies, under certain circumstances, produces an effect wholly independent of the imagination of either; and this owing to a communication between the nervous systems of the parties."

This is strong language, and yet the inference laid down seems to be an inevitable one from the facts alluded to. Of the truth of these, we do not hold ourselves authorized to express our disbelief; but no similar facts are adduced in Mr. C.'s cases, and therefore it seems not unjust to presume that none were known to him from personal observation. Should the truth of the doctrine ever be thought worth a trial in this country, it will afford us much satisfaction to record the results.

ANATOMICO-SURGICAL DRAWINGS.

THE Messrs. Carvill, of New-York, have issued proposals for publishing, in the course of the next year, a translation of a German work, by L. J. Von Bierkowsky, entitled *Anatomico-Surgical Drawings, and Descriptions of all the Surgical Operations, according to the most approved Methods*. This work is to contain 570 lithographic drawings on 58 plates in folio; to which will be annexed two volumes, giving a concise explanation of each operation. In

these plates will be exhibited the parts concerned, in their natural position, in such unnatural position as they may have assumed by structural disease, and each distinct step or stage in the proper operation.

It is stated in the Prospectus that the lithography is to be executed at Berlin, "under the special direction of two of the most distinguished professors of the University of that city."

Subscribers are promised the first impressions of the plates, and will pay for the whole work but \$30. The subscription list will be closed on the 1st of November, after which the price will be raised to \$40.

The specimen of the work which accompanies the Prospectus, induces us to believe that it will greatly advance the science and the art of Surgery among us, and be to the inexperienced practitioner an aid such as he can find in no other book.

MEDICINE IN ITALY.

AT the University of Pavia, the candidate for a degree is obliged to have studied four years, and to have attended lectures on every branch of knowledge connected with medicine; as well as lectures on Surgery, both clinical and theoretical. The pupils in Surgery devote their time principally to Anatomy, Surgery, and Midwifery; but they also attend lectures on the more immediate subjects of medicine. The examination for a degree is a public one. The candidate draws out of a bag, containing the names of the principal diseases, those of four, which he presents to his examiners, who at once question

him on the principal points in regard to each of them. He is then shut up in a room, where he writes a thesis on one of those diseases solely from his own knowledge, and without any assistance from books. This mode of examination adopted, is extremely fair and liberal, since it gives the examiners no opportunity for preparing themselves on particular topics, and therefore no unjust advantage over the pupil.

NEW AND VALUABLE PREPARATION.

A "*Concentrated Compound Decoction of Sarsaparilla*" has been recently prepared by a London chemist, and is spoken of in one of the journals of that city in the following terms of commendation:—"This preparation we find, on analysis, to contain, in a concentrated state, all the medicinal virtues of the articles which enter the compound decoction in great perfection. It is so far concentrated by steam, (being entirely free from empyreuma,) that *one tablespoonful, added to a pint of pure water, readily forms a pint of the compound decoction*; and in justice to the preparers, we must say, appears to be more impregnated with the virtues of the ingredients, than the decoction made in the usual way. A large teaspoonful of this concentrated decoction, which may be taken in a wineglass of water, is equal to a quarter of a pint of the compound decoction. One, very important advantage of this is that a dose, equal to a quarter of a pint of the compound decoction of the London Pharmacopœia, may be taken in a small wineglass of water, so as not to oppress or relax the stomach by quantity. Another advantage is, that in its concentrated state, it will keep good for many years."

Mr. Ebenezer Wight, apothecary in Milk Street, has, at our request, procured a quantity of this prepara-

tion from the inventor, which he submits to the prescription of the faculty.

Quinine and Digitalis—A medical gentleman of Cologne recommended, some years ago, the combination of these remedies in consumption. The success of the practice has satisfied him of its correctness. One patient, a scrofulous girl, affected with tubercular phthisis, was restored by it to perfect health. The mode of administering these remedies was as follows:—

R. Sulph. Quinin. gr. iij.
 Pulv. Digitalis Purp. gr. 1-3,
 " Fenicul. gr. viij. M.

This dose was given four times a day.

Camphor in Puerperal Mania.—This gum has recently been found serviceable in this alarming and obstinate affection. Professor Berndt has reported several cases in which it subdued the disease after other courses of treatment had proved unavailing. This does not appear to be one of the *on dits* or idle conjectures of the day. The Professor's authority is good, and he speaks from his own personal experience. He gave from one to four grains every hour, or less frequently in some cases, and sometimes used injections of the same medicine in doses of ten grains.

The Simple Aromatic Waters.—Mr. Buswell, a respectable chemist of March, recommends apothecaries to make simple peppermint water, and the other simple aromatic waters, by rubbing the essential oil with a little calcined magnesia in a marble mortar; and, when well mixed, to add by degrees, (continuing the trituration,) the pure water. So much calcined magnesia should be used that it may appear to be a dry powder after it is well mixed with the oil. The water, when filtered, is perfectly clear, and the oil is not separated so as to adhere to the bottle

like that of distilled water. This method of impregnating water with an essential oil, is certainly superior to that employed by apothecaries in general, viz., with sugar and spirit; and the waters are more pleasant to the palate than the distilled waters, which are generally stale, and more or less possess an unpleasant empyreumatic flavor.—*Gaz. Health.*

Remarkable Discrimination.—It is stated in the New-York papers, that the following decrees have been “solemnly adjudged by their Board of Health:—”

1. It is determined that sugar in *casks*, coming from Havana, New Orleans, &c., in a healthy vessel, need not be removed to some place out of the city, nor undergo the process of purification, but that sugar in *boxes*, coming from such ports, though in a healthy vessel, must undergo ventilation and cleansing.

2. It is determined that sugar, both in casks and boxes, coming from such ports, in a vessel in which any death has occurred on the voyage, cannot be landed in the city, but must be taken somewhere else, and be ventilated and cleansed.

3. It is decided that iron, lead, and above all, tobacco, coming from such ports in vessels in which deaths have occurred during the voyage, must be ventilated and cleansed.

4. A merchant applied to the Board for permission to bring twenty puncheons of *rum* into the city from Brooklyn, which was imported from New Orleans in a vessel in which several persons died on the voyage; but it was decided that it should not be brought over.

5. It is said that smoked hams and tongues, imported in the same vessel, are under the same sentence of condemnation.

SIR HUMPHREY DAVY died at Geneva, of a palsy, on the 29th of May last, in the 51st year of his age.

Three Causes of Disease.—A writer in a contemporary advises his fellow-beings, if they wish to avoid confirmed stomachic disease, to shun three things, viz., “friends’ prescriptions,” “medical books,” and “newspaper nostrums.” Of these we should judge the former to be productive of the most harm among mankind in general.

Close Reasoning.—A Phrenologist, who was as tenacious of his pence as of his doctrines, wrote a defence of his favorite science, and sent it to the Edinburgh Reviewer, in the hope of making a convert of him. The essay was written so extremely fine, in order to save paper, that the reviewer could not read it; he accordingly sent it back to the author with this note: “Sir, if you reason as closely as you write, you are invincible.”

New Medical Books.—Dr. Kennedy, of London, has in forward preparation for the press, a work which will form 3 vols. 8vo., entitled, “A History of the Medical Sciences, Biographical and Philosophical; containing an Account of the Persons and Writings that have conduced to the Improvement of Physic, from its Origin in Britain to the end of the 18th Century.”

Dr. Hawkins, of Exeter College, Oxford, Eng., has just published a work of 234 pages 8vo., entitled “Elements of Medical Statistics.”

Thos. Stone, Esq., President of the Royal Medical Society of Edinburgh, has issued an Anti-Phrenological History of the developement of Burke, Hare, and other atrocious murderers.

REPORT OF DEATHS IN BOSTON,

The week ending July 31, at noon.

Of colic, 1—consumption, 5—cholera infantum, 1—convulsions, 1—childbed, 1—delirium tremens, 1—drown, 1—inflammation in the bowels, 1—infantile, 2—measles, 2—mortification, 1—old age, 1—peripneumonia, 1—unknown, 3. Males, 13—females, 9. Stillborn, 1. Total, 23.

ADVERTISEMENTS.

BERKSHIRE MEDICAL INSTITUTION.

THE Annual Course of LECTURES will commence on the first Thursday in September, and continue fifteen weeks.

Theory and Practice of Physic by H. H. CHILDS, M.D.

Anatomy and Physiology, J. D. WELLS, M.D.

Medical Jurisprudence, S. W. WILLIAMS, M.D.

Theoretical and Operative Surgery, S. WHITE, M.D. and S. P. WHITE, M.D.

Materia Medica, Pharmacy and Obstetrics, C. B. COVENTRY, M.D.

Chemistry, Botany, Mineralogy and Natural Philosophy, C. DEWY, M.D.

Matriculation ticket, \$3. Fee for Lectures, \$40. Library ticket, \$1. Graduation, \$15.50. Board, including washing, lodging and room, \$1.75 a week.

Pittsfield, July 22, 1829. aug4tsep30

MEMOIRS OF DR. GOOD.

JUST published and for sale by CARTER & HENDEE, Memoirs of the Life, Writings, and Character, Literary, Professional, and Religious, of the late JOHN MASON GOOD, M.D. F.R.S. F.R.S.L. Mem. Am. Phil. Soc. and F.L.S. of Philadelphia, &c. &c. By OLINTHUS GREGORY, LL.D. Aug. 11.

CARTER & HENDEE

HAVE just received LIZAR'S ANATOMICAL PLATES, in 12 Nos., cold and letter press.

Barton's North American Flora, 3 vols.

do. Medical Botany, 2 vols.

Bonaparte's Ornithology, 3 vols.

A System of Human Anatomy; translated from the 4th Edition of the French of H. Cloquet, M.D. By ROBERT KNOX, M.D. F.R.S.E.

CARTER & HENDEE,

Corner of Washington and School Streets,

HAVE recently published and for sale, LECTURES ON ANATOMY, SURGERY AND PATHOLOGY, including Observations on the Nature and Treatment of Local Diseases—delivered at St.

Bartholomew's Hospital, by JOHN ABERNETHY, F.R.S.

ADVERTISEMENT.

The estimation in which the opinions of the celebrated teacher in the School of St. Bartholomew's is held, must render the present volumes invaluable to the student, while it will equally serve as a work of reference to the elder branches of the profession, containing, as it does, the views and opinions of one whose life has been spent in instruction, and whose talents and acquirements are no less admired than respected.

Nor is the value of the volume confined either to the medical *tyro* or the more experienced practitioner. The popular reader, from the plain, lucid and colloquial style of the Lectures, will derive both pleasure and instruction from the perusal, while the general contents yield a body of information not to be met with in works of this description, and which will render it in families a book of familiar consultation and reference. July 28.

TURNER'S CHEMISTRY,—NEW EDITION.

JUST published, and for sale, by CARTER & HENDEE,—Elements of Chemistry, including recent Discoveries and Doctrines of the Science. By EDWARD TURNER, M.D. F.R.S.E. Second American Edition.

COTTONS & BARNARD have for sale, "An Inquiry concerning that disturbed state of the vital functions usually denominated Constitutional Irritation. By Benjamin Travers, F.R.S., senior Surgeon to St. Thomas's Hospital, President of the Hunterian Society of London, &c."

NEW LONDON WORK.

JUST received, by CARTER & HENDEE, corner of Washington and School streets, A Chemical Catechism; in which the Elements of Chemistry, with the recent discoveries in the Science, are clearly and fully explained. Illustrated by Notes, Engravings and Tables, and containing an Appendix of select Experiments, &c. By THOMAS GRAHAM, M.D. Member of the Royal College of Surgeons in London, &c. &c.

C. & H. have also just received, Elements of Chemistry. By ANDREW FYFE, M.D. F.R.S.E.

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

I.

Communicated for the Boston Medical and Surgical Journal.

Case of extensive Disease of the Brain, unaccompanied by the usual Diagnostic Symptoms.

By DAVID PALMER, M.D.

IN January and February last, a few cases of "Canker Rash," (Rosalia Paristhmica of Good,) occurred in this vicinity. They were usually mild, and readily yielded to a mild treatment. The case which I am about to relate, was however an exception to this general character of the disease. A daughter of Mr. Ball, aged six years, was attacked with the symptoms of the disease on the 25th of December; and on my visiting her on the 28th, the surface was nearly covered with the scarlet eruption; the fauces red and swollen, with considerable difficulty of deglutition; and a degree of heat and hardness of pulse, that indicated active inflammation.

Eight ounces of blood were taken, and a cathartic dose of calomel, to be followed with castor oil, was ordered.

29th.—The purgative had produced but little effect, and the inflammatory symptoms undiminished. Six ounces of blood taken, and the purgatives continued with the aid of injections.

30th.—Symptoms and treatment

nearly the same as yesterday. No evacuations from the bowels.

31st.—Symptoms as before. At the suggestion of Dr. Sweatt, who had been called to advise, gave Croton Oil three drops, in divided doses. Calomel, enemata, &c., as before.

Jan. 1st.—No perceptible alteration. Contin. med.

2d, 3d, and 4th.—Evacuations from the bowels on each of these days, with the expulsion of about one hundred worms (lumbrici).

6th.—Patient nearly free from pain, and apparently convalescent; but it was now discovered for the first time that she was totally deaf. For a week succeeding this date, my patient continued to improve in every respect, except the sense of hearing, which was totally lost. All her other senses were perfect; her mind cheerful; pulse natural, with some appetite and a regular state of the bowels. Medical treatment suspended, with the exception of occasional blisters to the neck and arms.

14th.—Attacked with vomiting and pain in the head, returning in paroxysms twice or thrice in twenty-four hours. Various remedial agents were now employed, such as leeches, blisters, mercurials, the warm bath, &c.; but as they were productive of no permanently beneficial effect, it is not necessary to detail the treatment more minutely. About the 20th of the

month, she was affected with a contraction of the muscles of the back and neck, and the head was drawn backward. The pain in the head and occasional vomiting continued, with increasing prostration of strength, until the 1st of February, when she died.

Post-mortem Examination, ten hours after Death.

In the head, a stratum of purulent matter nearly covered the pia mater, and in some places its structure was destroyed by ulceration. Suppuration had also occurred in almost every part of the substance of the brain, but chiefly in its base. The origin of the auditory nerves was surrounded with purulent matter, though not to a greater degree than that of most of the other nerves which arise within the skull. The lateral ventricles were distended with serum, and it was judged by the medical gentlemen who assisted in the examination, that one-third of the contents of the skull consisted of pus and serum. The contents of the thorax and abdomen were not examined, as there was no reason to suspect a lesion of any of their organs.

What renders this case important, in my view, is the fact that such extensive destruction of the brain should occur, with so few of the symptoms supposed to be diagnostic of severe cerebral affection.

Thetford, Vt., July 30th, 1829.

II.

GUTTA SERENA.

Notes of a Case of Gutta Serena of the right Eye, from the Pressure of a Tumor on the Optic Nerve.

By JEDEDIAH COBB, M.D., Prof. of Anatomy in the Med. Col. of Ohio.

MR. H——, from Baltimore, consulted me for an affection of his

right eye. He stated that, being on a fishing excursion up Chesapeake Bay, in the month of August, 1825, he was suddenly seized, whilst exposed to the rays of a hot sun, with an acute pain in the bottom of the orbit of the right eye, shooting far back into the head. The pain continued, without abatement, until he obtained medical aid on his return to Baltimore. The plan of treatment, as near as I could ascertain, was strictly antiphlogistic. As the pain decreased, the sight of the affected eye gradually diminished, until it was completely lost. When I saw him in this place two years afterwards, the eye presented the appearance of a well marked case of gutta serena; the pupil was greatly dilated and irregular in shape; the iris, when exposed to the strongest light, did not contract. The general aspect of the eye was peculiar, and its natural lustre and intelligence lost. I told him I could do nothing with any prospect of success for the restoration of his sight, and I believe nothing was done. About three weeks after consulting me, he was violently attacked with arachnitis, of which he eventually died, when leave was obtained to examine the body.

Morbid Appearances.

On opening the cranium, the arachnoid membrane exhibited traces of extensive inflammation, being covered with coagulable lymph and serum over its whole extent. The ventricles were much distended with serum. Whilst removing successive portions of the cerebrum, the scalpel at length struck against a hard substance, which, on careful examination, was found to be a tumor

something larger than a nutmeg, and of a spheroidal shape. It lay directly in the course of the optic nerve of the right side, posterior to its junction with its fellow. The nerve was completely obliterated by its pressure. The tumor was composed of calcareous matter enclosed in a cyst resembling the coats of the arteries. The cyst was attached to the carotid artery, and probably resulted from a diseased action in its integuments.

Remarks.

From the above dissection we learn the cause of the blindness, and how utterly ineffectual all remedial agents must prove in certain cases of gutta serena. We may likewise draw the important physiological conclusion, that the fibres of the optic nerves do not decussate each other, as is thought by many anatomists.—*West. Jour. of Med. & Phys. Sci.*

III.

COLLEGE OF PHYSICIANS.

At a late meeting of the London College of Physicians, we find a remarkable, or rather curious, proof of the medical profession of the celebrated John Locke, Gent. Also, some acute observations, by Sir Henry Hallford, on Shakspeare's 'Test of Insanity. Both these we offer for the instruction and entertainment of our readers.

Case of Tic Douloureux, by the celebrated Locke.

A LITERARY curiosity of great interest was laid before the Meeting: a case detailed by the celebrated Locke. This curious document was obtained by Dr. C. M. Clarke, from Lord King, and

presented to the College. The original MS. was laid upon the table, and consisted of a French Almanack, bound up with a number of leaves which had been originally blank, but which were filled with various notes and memoranda in the hand-writing of Locke, and among others the case in question.

It has often been doubted whether Locke ever practised as a physician, but the question is now set at rest. In Lord Grenville's pamphlet, entitled "Oxford and Locke," he remarks that "in the printed life of Locke, commonly prefixed to his works, we are told that he applied himself, at the University, with great diligence, to the study of medicine, 'not with any design of practising as a physician, but principally for the benefit of his own constitution, which was weak.'" His lordship goes on to observe that no such motive is ascribed to Locke by Le Clerc, from whom our knowledge of his private history is principally derived; nor, indeed, is the supposition at all probable. Le Clerc, however, asserts "that Locke never practised physic for profit, though he was highly esteemed by the ablest physicians of his time." In proof of this, we need only quote the following passage from Sydenham:—"Nosti preterea quam huic meæ methodo suffragantem habeam, qui eam intimius per omnia perspexerat utriusque nostrum conjunctissimum, Dominum Joannem Locke; quo quidem viro, sive ingenio judicioque acri et subacto, sive etiam antiquis, hoc est, optimis moribus, vix superiorem quemquam, inter eos qui nunc sunt homines, repertum iri confido, paucissimos certè pares."

Lord Grenville says that the assertion that Locke had never actually practised, is " unquestionably erroneous ;" and the case which we subjoin, proves the correctness of his opinion.

Locke was called to see the Countess of Northumberland, who was the ambassadress at Paris, Dec. 2d, 1677. The case was evidently one of tic douloureux. It is entitled *Convulsio*, and the symptoms are thus described :— Acute pain over the right cheek up to her ear. In the intervals, pain in her teeth. She was warned of the approach of the fits by a throbbing she felt in the lower jaw, where she had had a tooth drawn the previous summer. The fits had been preceded by three or four days of ordinary tooth-ach. There was no swelling or inflammation ; no flux of rheum ; no external swelling ; no indication for bleeding ; besides which, that remedy had been tried some months before, without effect.

" It being night," says Locke, " I thought at present there was nothing to be done but to give her ladyship present ease by some topical application." He thought first of a blister, but paused till he had made some more general evacuation. He therefore ordered an opiate embrocation to the gums, which gave her much relief. On the following day, (for the case is related in the form of a journal,) he again deliberated about the propriety of the exhibition of an aperient, but the extreme cold weather made him conclude in the following manner :— " I apprehend that a purge, which I thought very necessary, would be dangerous in such a season, because, if weak, it might cause disorder with very little or

no evacuation ; if strong, in so delicate a constitution I could not tell how to venture ; besides that, I feared she might take cold in the working, which might increase the mischief."

The result of his prudent caution was, that he prescribed a drop of æthereum terebinthinae on a little lint, which she applied to the gap whence the tooth had been extracted, but it did not allay the pain, and he then ventured upon the purge, and gave a mercurial one, which " wrought very well seven or eight times."

After the operation of this medicine, he prescribed an opiate draught, and during the following night she enjoyed some sleep. With occasional exacerbations, the fits upon the whole began gradually to abate in severity. He describes most accurately what we all know to be the truth in this cruel disease ; how various slight causes bring on the paroxysm of pain ; how touching any part of the affected side of the body, (even the foot of that side,) talking, or opening her mouth to eat, brought on the twitches of pain. He reasons upon this strange nervous affection very sensibly, considers what the original mischief was, and how far the extraction of the tooth had to do with the increase of the malady, and concludes that the root of the mischief lies in some harm done to the nerve connected with the tooth. The tooth itself, when it was drawn, was found to be a sound one, and its extraction so far from a remedy, that it increased the violence and frequency of the fits. Locke continued in attendance till Dec. 16th, a space of a fortnight, when he pronounced the lady ambassadress " quite well."

On Monday, Dec. 20th, he writes in his MS :—

“Memorandum : that my lady ambassadrice’s gums itched vehemently after the pain was gone, and did so for several days after ; and used to do so for several years before any tooth was drawn.”

Observations on Insanity. By Sir H. HALFORD.

After the above had been read, Sir Henry Halford stated that, in consequence of having understood that there was no paper for the present evening, (for Locke’s case had only just been received,) he had hastily thrown together some observations on insanity. As there was sufficient time left, he would read them to the Meeting.

Sir Henry Halford observed that in the closet scene in Hamlet the following words occur :—

“————— Extasy !

My pulse, as yours, doth temperately keep time,
And make as healthful music ; ’tis not madness
That I have uttered ; bring me to the test,
And I the matter will reword,—which
madness
Would gambol from.”

The circumstance to which the learned President particularly alluded, was the expression “I the matter will *reword* ;” and he proceeded to relate the following case, in illustration of the justness of Shakspeare’s “test.” He was called, last January, to a gentleman then in a state of mental derangement. A short time previous to his illness, he had sent for his solicitor, and given directions about his will. He stated his intention of adding 500*l.* a year to his mother’s jointure, and of leaving various legacies ; adding that his friend, the solicitor, was to be residuary legatee. The

solicitor, in the most honorable manner, told him that he could not consent to the last part of the arrangement, unless at the end of six months he continued of the same mind upon the subject. In the interval, he was attacked with mental excitement, for which he was attended by Sir Henry Halford and Sir G. Tut-hill. One day, on asking him how he did, he appeared calm and collected, and answered that he was very ill, and only anxious to settle his affairs and make his will. Next day he repeated the same expressions, in a tone and manner which induced his attendants to comply with his request, and the solicitor was sent for, who brought with him a will drawn up according to the instructions he had formerly received. This was read over to the gentleman, and being asked, after each clause, if such was his meaning, he distinctly replied—yes, yes. The will was then executed, being witnessed by his physicians. On going down stairs, Sir Henry observed upon the unpleasant circumstance of the medical attendants becoming involved in a deed which was likely to become the subject of litigation, and proposed that they should return to him and apply Hamlet’s test, by ascertaining whether he could “reword” his will. With regard to several of the clauses this was the case ; but he stated that he had left one individual ten thousand pounds, whereas he had only left him five thousand ; and on being asked to whom the residue of his fortune was to go, he answered, “To the heir at law, to be sure !” Being asked who was the heir at law, he replied that he did not know. Thus, said Sir Henry, he could not “reword”

his meaning, but "gamboled" from the matter.

The author then adverted to the fidelity of the pictures drawn by Shakspeare, so justly characterized by Johnson as the poet of nature. He also alluded to the writings of the ancient poets, as containing many descriptions which might be recognized by an attentive observer. He had himself seen two of the cases mentioned by Horace, illustrated to the very life. One, a man of high rank, supposed himself present at a theatrical entertainment, and Sir Henry had heard him urging Garrick to exert himself in the part of Hamlet, which he supposed him then to be acting. The other case was that of a gentleman of large fortune, who possessed himself of everything he could get, but parted with nothing. He was brought to the Court of King's Bench, having refused to pay for a picture which he had bought, and which was valued at £1500. Sir Henry told the jury, that if they would go to the gentleman's house in Portland Place, they would find £50,000 worth of property; among the rest this very picture, with baby-houses and baubles strewed over his dining-room.

The paper was listened to with great interest, and this was increased by the very animated manner in which it was read by the learned President.

IV.

Method of treating Fracture of the Thigh Bone.

By WILLIAM C. DANIELL, M.D., of Savannah, Georgia.

IN the summer of 1819, I was called into the country to see a

child of Mr. Harboch's, about seven months old, whose left thigh had been obliquely fractured near the middle of the bone, by the nurse falling with him in her arms. I applied the many-tailed bandage with four thin splints about three inches long, to confine, as well as I could, the broken ends of the bone in apposition.

Upon visiting the child the following day, I found the fractured limb about the third of an inch shorter than the other, from the lapping of the ends of the broken bone. The patient being feverish, a laxative was directed. The dressings were renewed from time to time for about a week, when the feverish symptoms had subsided, and the child become in some measure reconciled to his confinement.

The shortening of the limb still continuing, rendered it necessary to adopt some means to counteract the contraction of the muscles, and retain the ends of the broken bone in apposition. The heat of the season, as well as the age of the patient, rendering the use of the ordinary splint (Physick's improved Desault) and bandages objectionable, I adopted the following mode of treatment:—I passed a roller of muslin around the chest of the child several times, to which I attached a bandage on each side, and extended them above the head, and fastened them to the head-board of the bed. This was done for the purpose of preventing the patient from being drawn down to the foot of the bed by the extending power. I then passed a small silk handkerchief around the ankle and foot of the fractured limb, and tied the ends together at the sole of the foot. To these united

ends of the handkerchief I attached a small cord, which was passed over the foot of the bed, where it suspended a small weight which was designed for the extension of the limb.

The many-tailed bandage, with the four small splints, were continued as heretofore. In due time the broken bone united without any shortening or other deformity.

In 1824, and five years after the fracture, I examined the limb, and found it of the same length and appearance of its fellow.

Attributing my success in the above case to the manner in which I had treated the fractured limb, I became desirous of applying that mode of treatment to other cases of a similar kind. With the assistance of my friend Dr. Richardson, I have recently treated a case of oblique fracture of the thigh bone, after the following manner:—A piece of poplar plank, long enough to extend from just below the buttock to eighteen inches beyond the foot, was made on the surface slightly concave to receive the thigh,—the upper end was cut into a semilunar form to fit it the better to the buttock, and made six inches wide,—the lower end was four inches wide. On each side of the lower end was attached a piece of board three inches high, extending up to the knee, with a gradually reduced height. A piece of board five inches high, was then fitted in the lower end, at a right angle with the lower board. In the middle of the upper edge of this piece, was placed a small wooden roller, with a concave edge, which was retained by a wire axis. The lower end of this splint, which projected beyond the foot of the

bed, was secured by passing a screw through the bottom piece into the foot-board of the bed. The fractured limb was then placed in this splint. The many-tailed bandage was applied over the fractured portion, (the bones having first been placed in apposition,) over which, at equal distances apart and around the limb, four thin wooden splints, six inches long, were placed and secured by muslin strips. A bag of dried moss was then applied on each side of the thigh, and secured by tapes passing under the board supporting the thigh, and over the limb. A silk handkerchief was then passed around the ankle, and tied at the bottom of the foot. To this projecting portion of the handkerchief was fastened a small flaxen cord, and that passing over the roller placed in the end of the case, supported a small weight. A muslin bandage was passed around the chest, to which bandages were fastened for the purpose of fixing the body to the head-board, to prevent its being drawn down. This was however soon found to be superfluous, as the weight of the body was quite sufficient for the purpose of resistance to the extending power, and was consequently discontinued. The dressings were renewed once or twice a week, according to circumstances, and the bones united readily, and without any shortening of the limb.

That portion of our patient's mattress which supported the breech, was made removeable, by which arrangement the pan could be used without inconvenience.

Whenever any shortening of the fractured limb was observed, the leg was gently raised and extend-

ed to the proper distance, where it was retained by the weight attached to the cord. And here I will observe, that the cord and weight are rather designed for retaining the limb properly extended, than for extending it. The latter it is known is readily performed. The importance as well as the difficulty of keeping up that extension, has been felt by every surgeon who has had a fractured thigh to treat. I flatter myself that the above mode of making and maintaining the extension, will be found an improvement. It has certainly been such in my hands. * * * *

It would be extremely difficult for any person who had not witnessed the treatment of this case, to appreciate the advantages which resulted from the mode which we adopted of keeping up the extension of the fractured limb. The patient could sit up in his bed without deranging the dressings. The only part in the use of which he was restricted, was the fractured limb. If in his movements he was thrown lower down in bed than was proper, he could draw himself up without deranging the dressings or displacing the fractured bones.

But the great and important indication that is fulfilled by this mode of treatment,—and by this alone have I seen it properly fulfilled,—is that there is a constant power in operation to counteract the contraction of the muscles of the fractured limb. That power is the weight suspended over the roller to the foot; and it is a power which, from its constant action, must necessarily exhaust the muscular contraction. Hence it never can occur, where this mode of extension is properly applied,

that the fractured limb will be shortened when the bones have united.

I believe that a weight of two pounds will in most cases be sufficient. My own experience, however, is too limited to enable me to speak with confidence. It is a matter which the discretion of the surgeon will readily adjust.

In treating a fractured thigh bone, it has been deemed of the highest importance to make the extension and counter-extension as near as possible in a line with the fractured limb and the course of the muscles to be acted upon. The merit of Dr. Physick's improvement upon Desault's splint, consists in an approximation to this. It is, however, only an approximation. In the treatment of the case detailed above, the extension and counter-extension were necessarily in a line with the broken bone and the course of the muscles to be acted upon, because the extension is made upon the foot, and the counter-extension consists in the weight of the body above the thigh. Let it not be supposed that such weight is insufficient for all the purposes of counter-extension; I believe it will upon trial be found ample. If it should not, the body of the patient may readily be retained in place by bandages fastened to the head-board as suggested.

Some surgeons are in the habit, as soon as called to a fractured limb, to place the patient to harness, and at once subject him to all the pain and distress of splints, bandages, extensions and counter-extensions. Such a course is, I think, to be condemned, not only as unnecessary severity to the patient, but also as adding, in many cases, additional causes of

irritation and fever. I have been in the habit myself of barely at first placing the ends of the bones in such relation to each other, as would prevent irritation,—always feeling satisfied, if at the end of the first week, or even early in the second, every measure had been adopted which promised to

promote a favorable union of the fractured bones. By this course the patient is gradually accustomed to his confinement, and bears much better the necessary restraints of the treatment than when he is at once subjected to the whole of them.—*Amer. Jour. of the Med. Sciences.*

SKETCHES OF PERIODICAL LITERATURE.

NITROUS[™] OXIDE GAS

As a Remedy in Chronic Diseases of the Chest, &c.

THE Nitrous Oxide Gas is recommended by Joseph Curtis, Esq., in a late number of the *Lancet*, as a remedial agent of more value than many which are in better estimation. He relates, as proof of this, two cases of asthma;—one of a lady who was many years subject to the disease, and in whom the fits were frequent and very distressing.

Believing the distressing sense of suffocation experienced by this patient to be owing to the blood being prevented, by the mucus in the bronchia, from undergoing its proper changes, he conceived the idea of substituting oxygen gas for atmospheric air. The experiment was unsatisfactory, and finding this gas inconvenient to make, he substituted Nitrous Oxide, which was taken twice a day, and the effects of which are thus related:—

“From three to four quarts was the usual dose. It sometimes produced slight vertigo, and a feeling of languor: these, however, went off in a few minutes, and, in about a quar-

ter of an hour, the pulse was usually lowered from eight to twelve beats in a minute; in one instance, from 120 to 108; in another, from 104 to 96. The heat of the body was at the same time raised: a thermometer placed between the shoulders, rose in one instance from 92 to 96; in another, from 94 to 98, but never rose beyond 98. The hands and feet, which were generally cold, glowed; and the face, which was usually of a purple or leaden hue, assumed the natural appearance.”

The use of the Gas was continued several weeks. It usually relieved the symptoms when taken during an attack, and in the end seemed to have increased the strength and the digestive powers, and diminished the tendency to asthma. It produced however, some tendency to inflammation, on which account it was discontinued.

In the other case related by Mr. C., this Gas produced more decided benefit. The wheezing, cough, difficulty of breathing, pain, and expectoration of mucus, were all relieved, and the color of the face became less livid. The circulation in the extremities was invigorated remarkably, and the patient discharged *cured*.

TWO DISEASES EXISTING SIMULTANEOUSLY.

A CASE is recorded in an English Journal, which seems to present some phenomena in vaccination.—A child sickened with variola. To protect the brother of this child, he was vaccinated. On the *eighth* day the vesicle formed perfectly, and matter was taken from it to vaccinate another child. On the *ninth* day variola also broke out, and the vaccine pustule, which was perfect on the eighth, continued stationary, and at length dried up with the smallpox.

The child vaccinated from this pustule had a genuine cowpock, and, although exposed, escaped variola.

The conclusions of the reporter are, "that in the same case cowpock and smallpox went on together; thus showing that two pustular diseases, of a different nature, may exist at the same time in the same system; and that in the last case it would appear that one pustular disease only may be propagated from a system where two exist." How far these two diseases should be considered "of a *different nature*," is matter of doubt.

 INCARCERATED HERNIA.

Internal Use of Spirit of Turpentine in these Cases.

THE last number of the American Journal contains a striking case, by Dr. Sewall, of the beneficial effect of Spirit of Turpentine in Incarcerated Hernia. Dr. S. was led to this practice by the relation of two cases by a friend, in which it had appeared to produce speedy relief. The patient was a stout healthy man, and was

surprised by a scrotal hernia whilst at work. "I first attempted," says Dr. S., "a reduction of the bowel by taxis, but as my exertions were unavailing, I bled him largely and then renewed my exertions, but without success. I then gave him two ounces of the spirit of turpentine, and instructed my pupils, who remained with him, to repeat the same dose every hour till eight ounces were taken, or some sensible effect produced. Soon after I left him, a profuse sweat took place, and he fell into a tranquil sleep. In about two hours the hernial tumor became soft and yielding, and spontaneously retired from the scrotum. On repeating my visit in the middle of the day, I found he had taken about six ounces of the turpentine, and without experiencing any inconvenience from it. He was still sleeping, and entirely relieved. The next day he was at work in the brick-yard, and with no other complaint than that of a slight looseness of the bowels, and a scalding sensation in the rectum in passing his stools. No strangury was produced."

 SWAIM'S PANACEA.

Mercury discovered in this ci-devant popular Nostrum.

PROFESSOR HARE, of Philadelphia, has discovered, by chemical analysis, large quantities of Mercury in Swaim's Panacea. He first diluted it largely with water and added a quantity of yeast, in order to induce fermentation and thus get rid of the syrup, and attenuate the subject of his contemplated analysis. Fermentation took place, and this object was effected.

In his account of this analysis in Dr. Hay's valuable Journal, he says,

"I then transferred the whole of the liquor, then much attenuated by fermentation, and the matter which had subsided from it, into a flat stoneware vessel, and placed it in my evaporating oven. From this situation the vessel was not removed, until the contents had been converted into a dry, blackish, porous crust. Of this crust the greater part was subsequently removed from the evaporating vessel, and being rolled up in paper was placed upon a shelf. Towards the close of the last summer, I happened to examine the crust attentively, when I observed on it some globules of metallic mercury. On further examination with the aid of a lens, I discovered it to be so replete with mercurial globules, that whenever any fresh portions of the

crust were opened by means of a knife, more of them were observable. The crust was subsequently shown to Dr. Physick, Dr. Horner, and other intelligent friends, and it has been preserved in a bottle. I should have communicated these results to the public sooner, had I not been in hopes to have repeated the examination by another process; but not having as yet found it convenient to realize that intention, and as you deem it of importance that the facts which I have mentioned should be published, I send this statement to you for the American Journal."

The Editor of the Journal adds, that when Swaim first began the manufacture of this nostrum, he purchased large quantities of corrosive sublimate from an apothecary in Philadelphia.

BOSTON, TUESDAY, AUGUST 18, 1829.

PERFORATION OF THE STOMACH.

THE following case is related in a late number of the Glasgow Journal.—The patient, a man 22 years of age, who had been subject to attacks which he termed cramp in the stomach, was suddenly seized, while in the house of an acquaintance, with violent pain in the region of that organ. The degree of it was so violent that he was scarcely able to express himself, and he continued for some time to strike his hands forcibly against the epigastrium. A glass of whiskey was administered, which produced vomiting and afforded momentary relief. In a few minutes the pain returned. He suffered acutely from a sense of tearing, and complained "that his stomach was drawn to his backbone." This state

of things continued for six hours, when suddenly the pain increased to an insupportable degree; he writhed in great agony for ten minutes, then fainted, and immediately afterwards vomited a dark brown fluid-like "moss-water." He was now (2, A.M.) visited by a surgeon, who bled him, and prescribed a draught of valerian and assafoetida, to be followed by a cathartic. These remedies produced no relief; and at noon, as the cathartic had not operated, a stimulating enema was administered. He grew worse, and at 3, P.M., a physician was called in. He was now lying on his back with his thighs drawn to the abdomen; face pale and anxious; breathing quick and feeble; pulse 140; skin cold.

It appeared that since the severe

attack in the morning, the pain had gradually become diffused over the abdomen, attended with intolerance of pressure, and swelling. On the right side of the epigastrium, an obscurely defined tumor was felt, which fluctuated slightly. He now vomited incessantly a dark colored fluid, without any apparent exertion; it was thrown from his mouth to a considerable distance, in a stream about the size of a quill, like water forced from a syringe. These symptoms continued, without much alteration, till 8, P. M., when he expired.

On examination, the cavity of the abdomen was found to contain several pints of a dark colored fluid, which had a strong smell of assafoetida. On grasping the stomach, fluid was seen to issue through a longitudinal opening in its anterior surface, between the greater and lesser curvatures, about three inches from the pylorus. The perforation readily admitted the finger; its edges were slightly ragged, but without thickness, ulceration, or any other morbid appearance in the surrounding textures. There was no loss of substance where the opening existed, as its edges could be brought together without folding or puckering of the adjoining parts.

From these and other appearances of the parts, it seemed evident to the physician who examined them, that the opening was produced by a rupture; and highly probable that this had occurred at the time when his sufferings were most intense, and so remarkable a change took place in the symptoms. At that time there must have occurred a spasmodic con-

traction of the ventricular fibres sufficiently powerful to lacerate the organ. But how could contraction of the fibres of the stomach cause its laceration, or produce any other effect than that of diminishing the extent of its cavity? Those muscles which have fixed points of origin and insertion, may well be supposed capable of being ruptured by distension. But in those which, by their position, are made capable of indefinite approximation, in what manner is such an effect to be accounted for? In answer to this, the author refers to the fact, that in inspecting the texture of the stomach, the bands of fibres are found not to pass completely round it, and that in fact no individual fibre can be found to extend to more than one-third of its circumference. He suggests, therefore, the explanation, that when these fibres are affected with spasm, a laceration may take place at that point where the two circular bands unite, in consequence of their acting in completely opposite directions.

Assuming the facts to be correctly stated in this case, we must confess ourselves quite at a loss to comprehend the above explanation, and nearly as much so how to suggest any, more rational or probable. Part of the difficulty, however, which is found in accounting for the stomach being ruptured by the contraction of its own fibres, seems to arise from supposing that organ to have been wholly or nearly empty. If we admit it to have been distended by its contents, whether solid, fluid, or aëri-form, and that these contents could not escape by either of the natural

orifices, a powerful spasmodic action of the organ might perhaps occasion a new one. From the obstinate costiveness, and the circumstance of the articles, the exhibition of which preceded the cathartic, being found to have passed through the rupture, it seems highly probable that the pyloric orifice, either from spasm or some other cause, was strongly closed. The anti-peristaltic motion, necessary to the rejection of these contents by the cardiac orifice, could not coexist with that species of contraction which tended to force them in the opposite direction. Under these circumstances, the stomach containing several pints of fluid, and its contraction suddenly increasing, its coats became incapable of sustaining the pressure, and the organ was ruptured at that point on which this pressure may be supposed to have acted with the greatest force. The consequence was the escape of the contents into the cavity of the abdomen. The fainting which is stated to have taken place, seems far more likely to have followed the rupture than to have preceded it; since at all events the spasms were suspended during the deliquium; and there is no proof that they occurred after it. Why a new series of contractions, in an opposite direction, should have now commenced, is not easy to say; it appears, however, that it *must* have been so, for it is stated that the fluid was constantly ejected through the œsophagus and mouth, though a much less degree of force,—almost the force of gravity alone,—would have sent it through the ruptured orifice. The phenome-

na, both of the direct and the inverted actions of the stomach, are involved in some obscurity, notwithstanding the time and labor which have been devoted to their investigation. It is at least clear that they cannot coexist; and the truth of this fact seems to be confirmed by the circumstances of the present case. The symptoms, however, indicated a far more violent, permanent, and general contraction, than is employed by the stomach to convey the food to the duodenum. Still its general tendency may have been the same; and it is only by supposing this to have been the case, and that the contents of the organ were powerfully propelled toward the closed pylorus, that the symptoms seem to admit of a probable explanation.

Since writing the above, we notice the account of a case which occurred in Sutton, in this State, the circumstances of which were, in many respects, remarkably similar. The patient was 19 years of age, and, like the one above mentioned, a weaver by trade. He was a voracious eater, but temperate in the use of spirituous liquors. He was attacked at 5, P.M., with violent pain at the epigastrium, which caused him to cry out "I am dying," and to throw himself on the floor, holding his bowels with his hands. The pain continued violent, and though still principally seated in the stomach, extended itself downward toward the pubic region. An emetic was administered, and followed by warm water, which vomited him several times with some relief. The pain now abated considerably, and he fell asleep. A dose of ol.

ric. was ordered every three hours till operation.

At 7, A.M., no operation from oil; bowels full, but not tender. R. Ol. Crot. gtt. ij. in six doses, at intervals of thirty minutes.—At 4, P. M., no operation; bowels fuller, with some soreness. R. Olei Ric. ℥i. every hour, and blister to the abdomen.—At 8, P. M., worse: an enema was ordered, which came away uncharged.—At 4, A.M., death occurred, thirty-eight hours from the period of attack. On examination, an aperture, of $2\frac{1}{4}$ lines in diameter, was discovered in the stomach anteriorly, about half an inch from the pylorus. No mark of disease was visible around the opening, which appeared as if it had been punched out with a cutting instrument. The contents of the stomach had escaped through it.

No remarks are made on the pathology of this case by the author who reports it. If we assume, however, that the rupture was occasioned by a spasmodic contraction of the stomach, and that it occurred at the commencement of the case, the vomiting which was subsequently caused by the emetic substance, seems to correspond to that which took place spontaneously in the other case; and both would seem to prove that the tendency of the contractile action had been reversed, so as to force the contents of the stomach toward the cardiac orifice. A review of the two cases will be found to suggest some other interesting points of comparison. The particulars of the last may be found in the 8th No. of the Amer. Journ. of the Med. Sciences.

LATIN PRESCRIPTIONS.

LATIN prescriptions have been often objected to as a remnant of barbarism, and as implying a wish to make that appear obscure which is in fact very plain and intelligible. This, however, is a very erroneous notion. The scientific name of a drug is, for the most part, the only one by which it can with certainty be designated, and consequently the only one which, in writing for the article, can be employed with entire safety. In regard, however, to those plants which are well known and have popular titles, there seems no good reason for denying to a patient the satisfaction of knowing the familiar appellation of the article he is using, instead of obliging him to go on in ignorance, or manifesting an unwillingness to inform him to which of nature's productions he is indebted for his cure. Many of the most common vegetable remedies have derived some of their names from the favorable influence they have been found to exercise on the system, or from the maladies they were known to alleviate; and to those who have studied attentively the weaknesses of human nature, it will not appear an extravagant assertion, that with these simple, but attractive titles, they produced effects in former times, far beyond any of which they are capable under the more formidable appellations which they now assume. "Modern science may wrap up the meaning of its epithets in Greek and Latin terms; but in many cases they are the mere translations of these despised old vulgar names. What pleasure it must have afforded the poor sufferer

in body or in limb ; what confidence he must have felt for relief, when he knew that the good neighbor who came to bathe his wounds or assuage his inward torments, brought with him such things as allheal, breakstone, bruisewort, goutweed, feverfew, and twenty other such comfortable mitigations of his afflictions. Why, their very *names* would almost charm away the sense of pain ! The modern recipe contains no such terms of comfortable assurance ; its meanings are all dark to the sufferer, its influence unknown."

It is not so certain, then, that what we call a rose by any other name would smell as sweet. There is certainly some virtue in the words ; and if by translating a prescription into plain English, it can be rendered more grateful or efficacious, surely he would be wanting, both in skill and in humanity, who should refuse to adopt so simple an expedient.

Iodine in Dropsy.—Mr. W. Bradfield, London Wall, has favored us with the particulars of a case of dropsy, from which it appears, that after the patient had been repeatedly tapped, and her legs scarified, without any permanent beneficial result, he was induced, from reading Dr. Gardiner's treatise on iodine, to try the effects of that medicine. He gave the patient (Mercy Millham) eight drops of the tincture, in a glass of cold water, three times a day, and at the same time directed a liniment, which consisted of half an ounce of the tincture of iodine, with three ounces and a half of the compound soap liniment, to be rubbed two or three times daily over the integuments of the legs. "In two months,"

says Mr. Bradfield, "I was happy to find that my patient was able to resume her domestic employments. Her abdomen and legs are restored to their natural size, and she can walk upwards of a mile without exhaustion."

Balsam of Copaiba.—The offensive qualities of this medicine have been effectually suppressed by a chemist of Philadelphia, by a consolidation of the balsam into a consistence for forming pills. It consists of an union of the oil and resin, in which the whole of the valuable qualities of the copaiba are retained. Two four-grain pills are mentioned as equal in effect to thirty drops of the balsam.

Living Child with two Heads.—At the Academy of Sciences at Paris, on the 25th of May, M. St. Hilaire exhibited a drawing of a female child which was living at Turin at the commencement of last March, and was then ten weeks old. The lower extremities only of the monster are common to the two ; the upper part is separated, and presents the proper conformation. The priest who performed the christening, seeing in this being two separate individuals, baptised each of them ; one was called Ritta, the other Christina. They (or it) were born at Sassari in Sardinia, at the beginning of March, 1829. Their common height is that of a full-sized infant. Ritta appears in ill health. The father intends to take them to Milan, and from thence to Geneva.

REPORT OF DEATHS IN BOSTON,

The week ending August 8, at noon.

Of consumption, 2—dropsy, 1—fever and ague, 1—inflammation in the bowels, 1—insanity, 1—intemperance, 1—measles, 2—old age, 2—palsy, 1—paralysis, 1—unknown, 3. Males, 9—females, 7. Total, 16.

ADVERTISEMENTS.

BOYLSTON MEDICAL PRIZE QUESTIONS.

THE Committee appointed by the Corporation of Harvard College to adjudicate the premiums established by the late Ward Nicholas Boylston, Esq., hereby give notice that the following are the subjects for Dissertations for the year 1830, viz:—

1st. Whether fever is produced by the decomposition of animal and vegetable substances; and if by both, their comparative influence.

2d. On the connexion between cutaneous diseases which are not contagious, and the internal organs.

Dissertations on these subjects must be transmitted, *post-paid*, to Thomas Welsh, M.D., Boston, on or before the first Wednesday of April, 1830.

The following are the subjects for 1831, viz:—

1st. The History of the Autumnal Diseases of New England.

2d. What insects in the United States, and particularly in the northern part, are capable of inflicting poisonous wounds; the phenomena of such wounds, and the best means of remedying their ill consequences.

Dissertations on these subjects must be transmitted as above, on or before the first Wednesday of April, 1831.

The author of the best Dissertation on each of these questions, if approved, will be entitled to a premium of Fifty Dollars, or a gold medal of equal value, at his option.

Each Dissertation must be accompanied with a sealed packet, on the outside of which shall be written some device or sentence, and on the inside of it the author's name and place of residence. The same device or sentence must be written on the Dissertation to which the packet is attached.

No Dissertation will be received which has the author's name affixed. All unsuccessful Dissertations will be deposited with the Secretary, of whom they may be obtained if applied for within a year after they have been received.

GEO. HAYWARD, *Secretary*.

N. B.—Printers of newspapers throughout the United States, are respectfully requested to give the above an insertion in their papers.

Boston, August 12th, 1829.

MEMOIR OF DR. HOLYOKE.

JUST published, and for sale by CARTER & HENDEE,—A Memoir of EDWARD A. HOLYOKE, M.D. LL.D., prepared in compliance with a vote of the Essex South District Medical Society.

Carter & Hendee have just received the American Journal of the Medical Sciences, No 8, August, 1829.—C. & H. receive subscriptions for this valuable work, and can supply the numbers from its commencement. Aug. 18.

HARVARD UNIVERSITY.

MEDICAL LECTURES.

THE MEDICAL LECTURES in Harvard University will begin in the Massachusetts Medical College, Mason-street, Boston, the third WEDNESDAY in October next, the 21st, at nine o'clock, A. M. Anatomy and Surgery, by Dr. WARREN. Chemistry, Dr. WEBSTER. Midwifery and Medical Jurisprudence, Dr. CHANNING.

Materia Medica, Dr. BIGELOW. Theory and Practice of Physic, Dr. JACKSON.

Students attending the Medical Lectures are admitted, *without fee*, to the Surgical Operations and Clinical Practice of the Massachusetts General Hospital, during the courses.

Aug. 4. W. CHANNING, *Dean*.
eoptOct21.

BERKSHIRE MEDICAL INSTITUTION.

THE Annual Course of LECTURES will commence on the first Thursday in September, and continue fifteen weeks.

Theory and Practice of Physic by H. H. CHILDS, M.D.

Anatomy and Physiology, J. D. WELLS, M.D.

Medical Jurisprudence, S. W. WILLIAMS, M.D.

Theoretical and Operative Surgery, S. WHITE, M.D. and S. P. WHITE, M.D.

Materia Medica, Pharmacy and Obstetrics, C. B. COVENTRY, M.D.

Chemistry, Botany, Mineralogy and Natural Philosophy, C. DEWY, M.D.

Matriculation ticket, \$3. Fee for Lectures, \$40. Library ticket, \$1. Graduation, \$15.50. Board, including washing, lodging and room, \$1.75 a week.

Pittsfield, July 22, 1829. aug4tsept30

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

THE BOSTON
MEDICAL AND SURGICAL JOURNAL.

VOL. II.]

TUESDAY, AUGUST 25, 1829.

[No. 28.]

I.

Communicated for the Boston Medical and
Surgical Journal.

*History of a Polypous Excrescence
in the Vagina, attended with un-
usually severe Symptoms.*

By D. H. BARD, M.D.

ON the 17th of February, 1829, I was called to see Mrs. B—— G——, of Potton, Lower Canada, aged 33, the mother of eleven children; the youngest of whom was six months old. She was rather tall, of a dark complexion, and naturally possessed a good constitution. The history that she gave me of her case was this:—She had generally enjoyed good health; her labors had been easy, and she had recovered from the effects of them in a short time, until the last (in August preceding); since which she had not been well. Upon the cessation of the lochial discharge, an excessive leucorrhœa supervened, interrupted by occasional discharges of blood from the vagina: at times these discharges were so great as to bring on extreme weakness, and confine the patient to her bed for some days. There had been much pain in the region of the uterus, of a dull, heavy, expulsive kind; and for a short time past, there had been an unnatural degree of fulness in the upper part of the vagina. Recently, she had had an attack of hemorrhage from the uterus, and she was then unable

to sit up, in consequence of the debility produced by it. Her bowels had been tolerably regular; appetite moderately good; and her sleep comfortable. She at this time presented the appearance of a patient exhausted by leuco-phlegmatic discharges, and her digestive organs were evidently somewhat deranged: her face was pale; she had a gnawing, faint distress at the stomach; her tongue was pale and glabrous; pulse feeble, but not unusually frequent; appetite indifferent, and bowels rather slow. She had pain in the back and loins, and a dull uneasy sensation in the pelvis.

On making an examination per vaginam, I found a polypous concretion attached to the upper and anterior portion of the vagina, a little inclined to the right side. Its attachment commenced at that portion of the vaginal cord which is reflected over the neck of the uterus, and extended downward about half way to the meatus urinaris; its neck was short and thick, and its body flattish, projecting about a finger's breadth beyond the neck on all sides round; it had a soft granulous feel, resembling a placenta enveloped in its membranes, from which it would have been difficult for the touch to have distinguished it, though it was rather firmer than a healthy placenta: blood oozed out of it on handling. The patient thought there was an

obscure sense of feeling in it when touched ; but it was difficult to tell whether this sensation was in the excrescence itself, or was communicated by percussion to the part from which it took its origin, or those with which it came in contact. The os uteri was in its usual place, its edges thickened, inflamed, and hard. The uterus was in situ naturale, and was distinctly felt between the fingers of one hand in the vagina, and the other on the abdomen. I should think it was not enlarged.

I informed the patient of the nature of the case ; that the foundation of her difficulties was the diseased structure in the vagina, and that no plan of general treatment would be successful until that was removed ; that it was possible something might be done by astringent and stimulating applications to the part, but that the ligature afforded the most probable chance of success. The former mode, being most congenial to the patient's feelings and those of her friends, as well as my own present views of the case, was adopted. Injections of an astringent and stimulating nature, as sulphate of zinc, acetate of lead, sanguinaria canadensis, &c., were directed to be thrown into the vagina, and such general and constitutional means as appeared to be indicated were resorted to.

At the end of four weeks there had been no hemorrhage, and the patient's strength was improved : she could walk a few steps, had a good appetite, slept well, and her bowels were regular ; but it was evident the constitution was laboring under a heavy burden, or that it had been too largely drawn upon, readily to regain its former health and firmness. The surface was

pale ; the tongue pale, smooth, and shining ; there was debility of the digestive organs, and every function seemed suffering from want of energy and freedom of action. There was a dull, heavy, uneasy sensation in the pelvis, and a constant discharge of a whitish fœtid fluid from the vagina. The polypus had increased in size, so as now to distend the vagina some ; the diameter of the neck increasing in the same proportion as the body. I now, as I had before done, urged the removal of the polypus by ligature. To this the patient's friends were opposed, and she would not submit. I was therefore forced to abandon the object.

On the 2d of April, I was called in haste to visit her, the messenger informing me that it was doubtful whether she lived till I arrived. On reaching the patient's house, I learned that for four or five days past she had had more pain in the region of the uterus ; some sanguineous discharge from the vagina ; her appetite had failed ; she had a slight diarrhœa, and her strength had departed rapidly. This morning the uterine pain, attended with a strong expulsive effort like that of labor, became severe ; large coagula of blood soon appeared, which the patient removed from the vagina with her hands ; and these were soon followed by profuse hemorrhage, which continued without intermission until the patient, exhausted and bloodless, fell into deep faintings and was supposed to be dying. Cold had been applied to the abdomen and genitals, and astringents had been given internally. When I saw her, the hemorrhage had ceased ; her pulse were just perceptible at the wrist ; voice sunk to a whisper ; face and lips bleached ; extremities cold ;

very faint, but quiet.—Tr. Opii et Ol. Cinnamom. were given in suitable quantities, and beef-tea with bread, directed for food. She passed a tolerably comfortable night, and began immediately to improve, and continued to do so until April 9th, when she had another similar attack of flooding, which was again stopped by deep fainting.

On the 10th, I made an examination per vaginam. The excrescence had increased in size rapidly since the last examination. The longitudinal diameter of its neck was much increased, extending from within one half or three-fourths of an inch of the orifice of the urethra, up the vagina as far as the examination could be continued,—probably to the point where it was found attached on the first examination. The transverse diameter was equal to one-fourth the circumference of the vagina, and its body occupied nearly the whole recto-vaginal cavity, pressing the rectum backward, and resting on the perineum. The body of the polypus was divided by deep fissures into distinct lobes;—whether these fissures extended to its base, was not ascertained. The texture was nearly the same as it was when first examined, though the granulated feel was not so evident. I now requested a consultation, and Dr. S. S. Butter, of East Berkshire, was called.

April 11th.—Saw her with Dr. Butter. She appeared rather improved; strength gaining; appetite good; bowels free. There has been no hemorrhage since the 9th; but the discharge mentioned before still continues in great quantities. There are wandering pains in the head, back, limbs, abdomen, etc.: the emaciation is not great, but the

muscles are flabby and the skin pale; pulse about 100; tongue the same as it ever has been, smooth, pale, and shining. The case presented the aspect of utter hopelessness. Still it was thought best not to look idly on; and after an attentive consideration of it in all its bearings, we came to the following conclusions:—That, unless this diseased structure can be removed, the patient cannot long survive;—that, although all operations of this kind are attended with more or less danger, yet in this case there is little to be apprehended; and that the enclosure of the polypus in a ligature may, by preventing hemorrhage, prolong (if it does no more) the patient's life;—that, if no more than half can be enclosed in a ligature, the removal of this portion may destroy the organic life of the remainder, and it may be removed spontaneously, or it can be removed by another operation.—Our opinion being communicated to the patient and her friends, they acquiesced.

12th.—Had a bad night; some slight hemorrhage; pain and sense of heat in the pelvis, back, and loins; pulse small and quick; much exhausted and restless. After a large dose of Tr. Opii had been given, the patient was laid upon the edge of a firm seat, her head and shoulders being raised and supported by an assistant, and her legs flexed and separated as far as convenient. As the tumor filled the vagina, it was necessary to dilate the external parts somewhat;—this being done, a canula, containing a firm waxed linen ligature, was introduced into the posterior part of the vagina, between the polypus and the rectum, and retained there. The bow of the ligature, which was left large, was then thrown over the anterior and

inferior portions of the tumor, and pushed upon all sides round, until it passed over its projecting edge, as far up as it could be reached. The ligature then passed over the body of the polypus to the point of the canula, and being properly adjusted, was gradually tightened. Near the pubis, where it is mentioned the neck of the tumor approaches near the orifice of the urethra, when the ligature was tightened, that portion of the vagina which gave origin to this part was put upon the stretch, and the patient complained of some pain and tightness across the lower part of the abdomen;—this, however, soon subsided, and she was put into bed more comfortable than was anticipated. A cloth wet with diluted alcohol was applied to the genitals, and she was directed to take a little wine through the afternoon.

13th.—Morning. Rested very well last night: more strength to-day; no pain or soreness about the genitals. She was now ordered to take bark and wine, in such quantities as the stomach would bear, to use a nutritious diet, and keep the bowels free. The ligature was tightened a very little to-day without inconvenience.

For the three first days she appeared to be improving; her strength and appetite were better, and she suffered no inconvenience from the ligature, though it occasioned pain if much force was used in tightening it. During this time, I found that when the force was so applied to the ligature that it acted on the posterior part of the polypus only, it gave no uneasiness, even when I exerted all the force I thought prudent. But when it was so applied as to act equally on each part of the

circumference of that portion of the excrescence included in it, she complained of pain like that mentioned when the ligature was first applied, although the degree of force exerted was small. To this, and the bulk of the tumor, was probably owing the tardy progress made by the ligature, and the length of time it occupied in effecting its object.

On the evening of the 15th, from the ligature having been too tightly drawn that day, there came on pain in the lower belly, back, loins, and shooting down the thigh, headach, and some preternatural heat. These symptoms were soon removed by loosening the ligature, applying cold to the abdomen and genitals, and opening the bowels; and though she did not appear so well as during the first three days, yet she was comfortable on the 17th, and continued so until the 21st, when the ligature came away, and with it about one half the polypus.

On examining the vagina, I found the lower portion of it free, the upper part filled with the remaining portion of the polypus, which felt lax and softer, and seemed to have lost its vital forces. That portion of the vaginal coat from which the excrescence had been removed, was thickened, irregular, and a little tender. She did not complain of soreness anywhere else. The patient was encouraged, and appeared rather improved; it was evident, however, that recovery would not take place. The whole surface was deadly pale; her eyes were heavy and sunken; tongue pale and smooth; abdomen rather full; bowels slow; nutrition imperfect; and occasional wandering pains in different parts.

A course of treatment having for its object the restoration of the digestive functions, and recruiting the strength and energy of the whole system, was instituted. A weak solution of soap to be injected into the vagina while any soreness remains, and then an infusion of *Sanguinaria Canadensis*, of such strength as the parts will bear.

After this time she failed gradually: the discharges from the vagina were larger in quantity, of a light whey color, occasionally intermixed with grumous blood, and so fœtid that the atmosphere of the patient's house was hardly tolerable. The polypous concretion diminished in size gradually: on the 10th of June, when the last examination was made, it was not one-fourth as large as when the ligature was removed, and the bulk of what remained was rapidly lessening. At the same time her strength was failing, though indeed she had not much to lose: the deranged state of the digestive organs was increasing, and the fugitive pains before mentioned grew more distressing and exhausted her much. I made a note on the 19th of May, which states that she is very feeble; has vomited several times a day for a week past; a two-grain pill, composed of equal parts calomel and soap, that she has taken daily for a few days past, has purged her much; there is a little taste in the mouth; no appetite; "trembling," as she expresses it, "at the stomach;" skin hot, but pallid; acute, and almost intolerable pain, generally about the abdomen, sometimes in the chest, and at others in the limbs: this pain is not constant, and after one organ has suffered a few hours, it

will remit and soon appear again in another place. Every day, for some days past, she has had a paroxysm of fever;—pulse small and frequent; tongue the same as it ever has been; emaciation great. An emetic of ipecacuanha relieved the vomiting, and the heat for a time was less; but she had occasional and distressing paroxysms of heat as long as she lived, and a diarrhœa came on which resisted all treatment.

On the 7th of June, she was suddenly seized with severe pain in, and great swelling of, the right inferior extremity, from the toes to the labium pudendi. I saw her soon after the pain and swelling commenced. The pulse, tongue, and skin, were the same as they had been; no pain in any other part, except the swelled limb, which was more than twice its natural size, pale, glabrous, œdematous, and cool; the pain was excessively sharp: there was no discoloration, nor any irregular hardness whatever, but the limb presented a perfectly smooth and equal surface. The swelling of this leg was sudden;—according to the nurse's account, it was not an hour from the time it commenced before it had reached its extent;—it should be remarked, however, that there had been a bloated œdematous state of the feet and ankles for a long time.

Blisters applied to the points about which the pain centred, and frictions with anodyne and camphorated oil, relieved the pain in the leg, or rendered it from time to time tolerable; but the swelling never subsided.

In this condition,—wasted by a constant and uncontrollable diarrhœa; racked with pain that nothing would but for a short time

assuage; destitute almost entirely of muscular strength; parched, a great part of the time, with unquenchable thirst, and tormented with an excessive heat of surface, which came on in irregular paroxysms; without appetite, and taking but very little food, a little wine, and an occasional dose of opium,—life lingered on, in a mere breathing skeleton, till the 9th of July.

An examination post-mortem could not be obtained.

Query,—did the local disease, in this case, exert any *specific* effect upon the constitution?—if so, what was its nature?

North Troy, Vt., August, 1829.

II.

CRAMP OF THE STOMACH.

The following summary of a paper in the Glasgow Medical and Surgical Journal, is extracted from the Medical Gazette. The observations were original with John Macfarlane, M.D., of the former city, and since they are the result of his experience, may enlighten the views and serve, perhaps, to direct the practice of others.

SPASM of the stomach, although often sudden in its attack, urgent in its symptoms, and alarming in its appearance, has been either altogether overlooked by the majority of authors, or noticed only in the most cursory manner, as an occasional attendant on dyspepsia. It is, however, an important, frequently-occurring, dangerous, and sometimes fatal variety of stomachic disease. Its symptoms are in general well-marked and diagnostic. The treatment requires to be prompt, powerful, and peculiar; and al-

though in several cases it may be connected with a previously existing derangement in the functions of the affected organ, yet in others, and these by no means rare, it originates suddenly from distant irritation, or without any previous morbid indication.

When spasm affects the stomach there is the most acute pain, with a feeling of rigid contraction, violent twisting or tearing in the epigastrium, soon followed by painful and interrupted breathing, difficult articulation, pallid countenance, small, hurried, and contracted pulse, and occasionally with coldness of the extremities and rigid contraction of the recti abdominis and gastrocnemii muscles.

In severe forms of the disease, the patient usually complains of a sensation of rigid contraction or drawing together in the epigastric region, occasioned by the inordinate contraction of the muscular coat of the stomach, and occasionally producing a hard circumscribed tumor perceptible to touch. When, however, the abdominal muscles participate in the spasm, the tension and inequality of surface produced by the morbid contraction of the recti abdominis, effectually prevent the discovery of this tumor. The diaphragm, it is presumed, very soon sympathizes with this state of the stomach, and becomes also spasmodically affected, as the short, interrupted, and highly-distressed respiration, and the difficult articulation, evidently show. Indeed, every person who has seen a violent attack of this complaint, must have observed the change in the respiration which takes place at the height of the paroxysm; the difficulty, and often the impossibili-

ty, of performing inspiration and expiration even in an obstructed manner, and the half-suppressed cries or moans which the patient utters, apparently occasioned by the rigidly contracted diaphragm, remaining as an almost immovable partition between the thorax and abdomen. If the hand is applied either to the thorax or epigastrium, we can seldom discover the alternate elevations and depressions of these parts indicative of a natural state of breathing.

With respect to the causes of the disease, the author has seen several instances where it was produced by great mental anxiety. In some cases, where a strong disgust or antipathy exists to certain dietetic articles, any attempt to eat them, or even simply naming them to the patient, has been followed by severe spasmodic affections of the stomach. But the cases are, however, far more numerous in which the disease is produced, not through the influence of the imagination, but from the introduction into the stomach of some substance, which, from peculiar idiosyncrasy, acts on this organ as a morbid irritant. In addition to these exciting causes may be ranked, sudden exposure to cold, drinking cold liquids while the body is heated, coldness of the lower extremities, intemperance, &c.

“Females are more subject to this disease than males, in the proportion of $2\frac{1}{2}$ to 1. Accordingly, of 36 cases which I have seen, 26 occurred in females and 10 in males; and in 12 of these, no affection of the stomach, or other predisposing cause, could be discovered.—Irritation in the uterus is also said to be a frequent cause of spasm of the stomach.

Cullen says, that ‘the ordinary flow of the menstrual discharge retarded, or totally suppressed, affects the stomach, and disposes it to be affected more readily with spasm.’”

When long continued, spasm of the stomach is apt to induce inflammation of this organ. The occurrence of violent hæmatemesis during a paroxysm of spasm of the stomach, probably occasioned by a partial laceration of the internal coat of that viscus, is illustrated by a case,—in which the patient recovered.

An interesting case is related where death took place in little more than an hour from the commencement of the spasm, and where, although the body was not allowed to be examined, the author thinks the fatal event was produced by laceration of the stomach from the violence of the spasms.

In another instance, where the symptoms were well marked, and the history of which is given, a lacerated opening was found in the stomach on dissection, without the slightest vestige of organic disease, of gangrene, erosion, or ulceration.

The disease may prove fatal without inducing any lesion of the stomach, and an instance of this kind is detailed, where, on dissection, the only morbid appearance that could be discovered by the most accurate investigation, was general softening of the cerebellum, with vascular turgescence in the base of the brain.

In the *treatment* of spasm of the stomach, where we find it occurring in individuals whose general health has been impaired by confinement or sedentary employments, or who have suffered

from anxiety, fatigue, or exhaustion, and who are free from stomachic ailments, the author has found the paroxysms frequently subdued by a drachm of sulphuric æther with 50 drops of laudanum, its good effects being sometimes instantaneous; while in other cases the dose required to be repeated two, three, or even four times, before relaxation of the spasm was effected. In a few other cases the same decisive results were obtained, although the medicine was speedily rejected by vomiting. "On one occasion, (says the author,) when I was about to operate on a woman for strangulated hernia, the husband, a stout robust man, on account of anxiety for his wife, was suddenly seized with nausea and slight vomiting, followed by excruciating pain in the region of the stomach, and the other symptoms of violent spasm. A bladder containing pounded ice, which had been applied to the hernia, was laid over the epigastrium, and with the happiest effects, for in less than five minutes the pain was removed. This application is much recommended by M. Barras in neuralgia of the stomach; but I have had no other opportunity of trying its efficacy." When the attack is produced by the introduction into the stomach of some morbid irritant, the speediest relief will be obtained by the exhibition of an emetic.

"I have in two cases seen the most marked advantage from venesection; and that when, from the aspect of the patients, the cold clammy state of the skin, and the feebleness of the pulse, the reverse of this treatment seemed to be indicated."

When the recurrence of this

disease is connected with functional derangement of the stomach, much benefit is found from small doses of quinine, but especially from the use of the subnitrate of bismuth. When the attack is excited by depraved intestinal secretions, or by constipation, which frequently happens, more benefit is to be derived from mild laxatives and alteratives, than from strong or drastic purges. The diet should, of course, be strictly attended to, and such articles selected as are light and of easy digestion; for when the stomach is much stimulated, either by the quantity or quality of the food, spasmodic excitement, more or less powerful, is not unfrequently produced.

III.

TARTAR ON THE TEETH.

MANY hypotheses have been published respecting the nature and source of the earthy material which accumulates on the teeth, termed tartar.

Professor Berzelius, in a work on animal chemistry, says, when it first settles on the teeth it is mere hardened mucus, and that during its decomposition, phosphate of lime is produced, which adheres firmly to the enamel. M. Serres says that it is secreted by minute distinct glands, and not a deposit from the saliva. Professor Hertz, in his popular treatise, considers it a consolidated morbid secretion of relaxed or irritated gums; and many dentists attribute it to decomposition of animal and vegetable food lodged between the teeth. Mr. La Beaume has lately ascertained, by microscopical examination, that this collection is produced in the

same manner as coral, by animalculæ resembling the *medreposita oculata*. By means of a solar microscope of strong magnifying power, we have seen them in a very lively state; and, from the cellular organization of the tartar, we have no doubt of the correctness of Mr. La Beaume's theory. The same has been observed by Mr. Cooper, a scientific chemist and geologist of London. Mr. La Beaume is decidedly of opinion that, after the tartar, which, like coral, is a mere nidus, adheres firmly to the teeth, the animalculæ burrow into the teeth, and, by insinuating themselves between the teeth and gum, occasion disease in both; but the secretion from them is often so offensive as to contaminate the breath. Mr. La Beaume has made numerous experiments with different mineral, vegetable, and animal acid, and with alcohol, to ascertain their effects on the animalculæ and on their habitation, and it is a curious fact, that of all the articles he has employed, the true vinegar acid, (not the pyroligneous acid, which is now generally sold for it,) almost instantaneously killed the animalculæ, and acted powerfully in decomposing the concretions, so that they were easily removed by a brush. The more powerful acids, in the same state of dilution, and alcohol, seemed to have little effect on the animalculæ. In order to destroy the animalculæ and their eggs, and to decompose the production which protects them, Mr. La Beaume recommends the teeth to be brushed every morning with the vinegar acid, (acidum aceticum verum,) diluted with rose water, and immediately afterwards to make use of the levigated areca nut charcoal, as re-

commended by Professor Hertz, in his popular Treatise on the Management of the Teeth.

The use of the diluted acetic acid every morning will, in the course of a few days, entirely remove the tartar, and the regular employment of the areca charcoal and tincture of rhatany every, or every other, morning, will effectually prevent the generation of the animalculæ.

IV.

INFIDELITY OF THE MEDICAL PROFESSION.

Being Part of Dr. Allen's Address occasioned by the Death of Dr. Smith.

YOU may be aware, that the charge of utter regardlessness of religion, and even of undisguised infidelity, is often brought against the medical profession. But it may be well doubted, whether physicians are peculiarly obnoxious to the disreputable charge. There have unquestionably been many infidel physicians; but there have been infidels, also, in other professions, and among other classes of men.

If, among our eminent physicians, there have been some unbelievers, there have also been conspicuous Christians; such were, in foreign countries, SYDENHAM, BOERHAAVE, and HALLER. Need I speak of RAMSAY, of South Carolina, the American historian, who was for many years a worthy member of a Congregational church, and who, although he fell by the hand of a maniac-assassin, yet died in the utmost tranquillity and serenity, relying on the mercy of God through the blood of the Redeemer?—Need I speak of REDMAN, of Philadelphia, eminent

for piety, and a faithful elder of the Presbyterian church? Much of his time at home was spent in reading pious books, and in the offices of devotion. Of death, and of the scenes which await the soul in the world of spirits, he was accustomed to converse with the utmost cheerfulness.—Need I speak of RIDGELY, of Delaware, a member of the Episcopal church, who was particularly attentive to the moral and religious education of his children, regarding merely intellectual culture, without the discipline of the passions and of the heart, without efforts to bring the youthful mind under the influence of virtue and piety, as only giving wings to the pestilence, or as putting power into hands which would employ it for purposes of evil. Hence it was, that he earnestly recommended to his children, and to all around him, the diligent study of the word of God.—Need I speak of the illustrious RUSH, who deemed riches and fame as incomparably less valuable than the religious principles which he received from his parents, and who was accustomed, at the close of every day, to read in his family a chapter of the Bible, and then to address God in prayer?—Need I speak of MON-

SON, the head of the Medical Society of Connecticut, religious in youth and religious in old age, who could be the spiritual teacher of his sinking patient, and was accustomed, at his bedside, to commend his departing soul to the mercy of God, and who himself died in the triumphs of Christian hope?—Need I speak of BOWEN, of Providence, who himself suffered for years an agonizing disease, but who found in the sublime doctrines and gracious promises of the gospel, the support and consolation which the sufferer can derive from no other source; and who passed through the fiery furnace to come out, as his friends are persuaded, like gold from the hands of the refiner,—dying with a humble, cheerful reliance on the blood of the Redeemer?—Or need I speak of our own MITCHELL, of Maine, whose departure from the earth was not through the lingering pains of the sick-bed, but sudden as the lightning-glance from heaven; and who, by his habitual ardent piety, by the manifestations of a heart at all times kindled by the truths and hopes of the gospel, seemed to be always ready to wing his flight to another and a better world?

BOSTON, TUESDAY, AUGUST 25, 1829.

MEDICAL PROSECUTIONS.

THE following case appears to be one of considerable interest to the profession in this country, as well as abroad.—Mr. Van Butchell, a surgeon in London, performed an operation, probably for stricture of the rectum, though this is not stated.

The patient, however, died; and on examination, the intestine was found to have received considerable injury. Mr. Van B. was tried for manslaughter, but acquitted. The following is a part of Mr. Baron Hullock's charge to the jury:—

“If such an indictment could be

supported, in the total absence of all evidence of want of skill or neglect, because an operation failed, the consequences would be most serious, whether the operation was performed by a regular or an irregular surgeon; and surely it would be most unjust to prosecute a man who might be a skilful and clever practitioner, upon the unsuccessful result of a dangerous operation, because he was not licensed, and not fortunate enough to possess the sanction and authority of a certain body in this town. If such a doctrine could be maintained, very many persons in remote parts would be unable to procure any assistance; for who would exercise their best skill, of whatever quality it might be, if in the case of failure they were to be subjected to an indictment for murder or manslaughter? It was somewhat remarkable that there was not a single decision on the point, which must show that all the most eminent lawyers had strong doubts of the propriety of such prosecutions, and that it was their uniform opinion. They were not for the first time to be told that operations would fail; but it was too much to say that, because they failed, the parties were to be subjected to a prosecution. What had been quoted from Blackstone was, in fact, a copy of what Lord Hale had said of cases of this description; but the words of his lordship would not bear a construction unfavorable to the person accused; it went to a direct and opposite tendency. The words of his lordship were, 'If a physician gives a person a potion without any intent of doing him any bodily hurt, but with an intent to cure or prevent a disease, and, contrary to the expectation of the physician, it kills him, this is no homicide; and the like of a chirurgion; and I hold that opinion to be erroneous, that thinketh if he be no licensed chirurgion or physician that occasioneth this mischance, that then it is felony; for physic and salves were before licensed physicians and

chirurgions, and therefore, if they be not licensed according to the statutes of King Henry VIII., they are subject to the penalties in those statutes; but God forbid that any mischance of this kind should make any person not licensed, guilty of murder or manslaughter.' Cases might and did occur, where the parties recovered damages in a civil action for unskilful conduct; but God forbid that any person, under such circumstances, should be subjected to an indictment for murder or manslaughter; for, in that case, many would die for want of help, the helpers well knowing that, if they failed, they would be liable to such an indictment."

The justice of these remarks is almost self-evident; but it appears to us that the same general principles of equity which protect physicians in indictments in such cases, ought to be their safeguard, also, in civil suits, brought by the party who was the subject of treatment, or by his friends, when that treatment has been unsuccessful, or the practitioner has deceived himself in the diagnosis of a disease. Of this species of trial we have had some examples in this country; and they ought to be most strongly discountenanced, both within and without the limits of the profession. As an example of the ground on which such prosecutions have been instituted, we will suppose the following case:—An individual of respectable talents and with a good medical education, heroically devotes himself to the arduous and unthankful duties of a country practice. Extending his labors over an undefined and almost unlimited territory, he drives and is driven from house to house, from village to vil-

lage, by day and by night, from year's end to year's end, and is grudgingly rewarded in return with a bare subsistence for himself and his family. In the mean time, he sees scarce more practice in a month, than a practitioner in town can, with fair opportunities, witness in a day; knows little of the improvements taking place in his art; and hardly hears of, much less sees, a hospital. After proceeding in this manner for ten years,—time enough to rust out all the knowledge he ever possessed,—he is suddenly presented with a difficult surgical case, perhaps extremely obscure in its nature, and requiring a thorough knowledge of the state of parts for its treatment. Under these circumstances, he forms the best diagnosis in his power, and treats the case accordingly. The result proves that the diagnosis was incorrect, and the treatment injudicious; the patient is rendered a cripple for life, whereas if the case had been understood, he might have been restored to health and strength. In consequence, a suit is instituted against the physician, and the damages are laid at what the injured party might have earned, if in good health, over and above his probable earnings in his present state; for this, if anything, is the amount of injury inflicted. If claims like this were once admitted, what would be the consequence? Not, certainly, that physicians would become wiser or better informed than at present; but that, in emergencies such as we have mentioned, they would refuse to act at all, rather than incur a responsibility so dangerous. We have adopted

a particular statement of facts in the above supposition, because similar facts are known to have happened within no long interval of time. The principle, however, applies equally to surgical operations which have been unskilfully performed and followed by death. The idea of making the physician responsible, either in his property or his person, for the event of his well-meant endeavors to save the life of his patient, is perfectly barbarous, and wholly unworthy of a civilized people.

But it may be said, that although the regularly educated and licensed practitioner should be exempted from this responsibility, such protection is not due to the ignorant charlatan who poisons with his drugs, or to the untaught operator who murders with his knife. But as the principle avowed by Lord Hale, goes to the extent of protecting these, also, in their persons, it is not easy to see how justice can refuse them the same privilege in regard to their property. It is still the *quo animo*, the intention of the party, which forms the distinction between crime and innocence, between benevolence and malice. He who employs a physician knowing him to be ignorant, or even not knowing him to be learned, since those who have received a regular education can always procure credentials to that effect, does it at his own risk, and ought to be responsible for the consequences.

Another circumstance, too, ought not to pass unnoticed, as it goes very pointedly to discountenance medical prosecutions and suits for malpractice. It is the extreme difficulty,—

the impossibility in some cases,—of deciding, even in a court of law, what malpraxis is; whether an operation has been done well or ill; whether the unfortunate result is to be attributed to the bad conduct of the knife, or the injudicious administration of the drug. This difficulty has its foundation in the uncertainty of the healing art; and as this uncertainty must, in the nature of things, always exist, there can be no hope that the difficulty will ever be removed. Scarce a trial is on record which does not show it in strong relief. Take, for example, the last of which we have any account. It occurred at Troy, in the State of New-York.—A medical gentleman, by name M'Lellan, was prosecuted for malpractice as a surgeon; he having employed *permanent extension* of the limb in a case of fracture, whereas the patient, being crippled, imagined it owing entirely to the method pursued by this medical attendant. *Friends* were not wanting to urge the correctness of this notion, and assure him “that a *fixed position* of the knee joint was the best, and only safe and proper position of the limb, in cases of this kind.”—At the trial, three of the profession testified that the mode of treatment adopted in the case was erroneous, and productive of injury to the patient; and three others made a statement precisely the reverse. A week was occupied in the proceedings, and the result was, a verdict of six cents for the defendant.

It is the duty of the profession to prevent, if possible, occurrences so degrading to their character; and

this can only be accomplished by their uniform determination, when called upon in doubtful cases, to give the most favorable views of the conduct of each other. Unless the circumstances of the case are fully known, and show that the practitioner acted in defiance of all authority, another physician is not bound in duty to condemn his proceeding; and he who does so, seems to us neither to consult the dignity of the body to which he belongs, nor his own eventual interest.

NEW MODE OF OBTAINING THE SULPHATE OF QUININE.

THE following mode of preparing this valuable medicine, lately proposed by M. Cassola, seems to be far less expensive and troublesome than the one usually employed.

Two pounds of powdered yellow bark are boiled, for a quarter of an hour, in a pint of water, in which one ounce and a half of caustic potash has been dissolved. The decoction is filtered and expressed, and water poured on the remainder as long as it is colored by it. The residuum is now boiled for twenty minutes in twelve pints of water, to which an ounce of sulphuric acid has been added; the decoction is filtered and washed as before, and the remainder boiled in the same quantity of water, with a drachm of sulphuric acid. The acidulated decoctions are now mixed, and powdered chalk added to them, in order to saturate the excess of acid, and to precipitate the coloring matter; the fluid is filtered, and a sufficient quantity of subcarbonate of potash added to it; the precipitate is collected, washed, and boiled, in six times its weight of alcohol, at 40 deg.; the decoction being filtered and evaporated to one-third, five times the quantity of water is added to the rest, and all the alco-

hol driven off by a gentle heat. The quinine is now saturated with a few drops of sulphuric acid, by the admixture of which the fluid becomes perfectly clear, and is filtered almost in a boiling state, after a small quantity of chalk has been added. As soon as the fluid cools, the sulphate of quinine is deposited in white acicular crystals.—*Gazette de Santé.*

New Mode of administering Quinine.—Four cases of facial neuralgia, which resisted the ordinary treatment, yielded to the administration of one grain of powdered quinine, in two grains of snuff, mixed and used as common snuff. This dose was always sufficient, and in from two to three days the patients were cured, as if by enchantment. The cases occurred to Dr. Richet, of Metz, and are related in his thesis presented to the Faculty of Medicine of Strasbourg.

Dropsy of the Pericardium.—The London Medical and Physical Journal for May last, contains an account of a case of dropsy of the pericardium, by F. W. Wood, Esq., in which the pericardium contained *two quarts* of a perfectly limpid fluid. We may mention, also, that “the outer coat of the pericardium had a thin shining appearance, whilst on the inside were deposited layers of coagulable lymph resembling the rugæ on the stomach of the cow. The heart was also covered with a similar deposit; its parietes were much thickened, and it appeared as if fore-shortened, the apex being pressed upwards. In the left ventricle was a portion of coagulable lymph, of a yellow sily appearance, of nearly an ounce weight. The carneæ columnæ were much enlarged; the valves free from any apparent disease. The structure of the lungs was perfectly unimpaired.”

Singular Treatment of Tetanus.
—The following extraordinary practice for the cure of this disease, prevails amongst the inhabitants of the

Tonga or Friendly Islands, in the South Pacific Ocean; among whom, it is said, that traumatic tetanus prevails to a great extent.—It consists in producing a considerable degree of irritation in the urethra, and discharge of blood, by the introduction of a reed of proper size, for some distance into the canal; and, when the case is very violent, a cord is passed along the urethra, and carried through the perineum. The two ends are then occasionally pulled to and fro, inducing great pain and a copious hemorrhage, with much swelling and inflammation of the penis. Two cures of confirmed tetanus are related by a gentleman of the name of Mariner, to Professor Chapman, of Pennsylvania, as having been performed by this strange and unpromising practice. The mode may suggest a principle capable of improvement.—*Lancet.*

Mesmerism.—Amongst the stories which are reviving in Paris, in consequence of the operation which we lately mentioned as having been performed by M. Cloquet on a female, while supposed to be in a state of insensibility from “magnetic influence,” is one of a madman, who, some years ago, it is alleged, requested and suffered another madman to cut off his head. The operator proceeded slowly, with a very bad knife, but the patient submitted quietly, and without uttering a cry.—Another story is, that a female, who was in the Salpêtrière two years since, used to devour her own flesh until every part of the body which she could get at was terribly mutilated.—A third account is given of a female, named De Barre, who nailed herself to a cross, and remained there an hour, “with a tranquil air, her eyes frequently closed, speaking first to one, then to another, and saying that it was very pleasant.” But, generally speaking, the French are very sceptical as to M. Cloquet’s case. There is, however, an official

discussion now proceeding, which will undoubtedly produce the same result as the commission which was appointed in the better days of animal magnetism in London.

By far the most interesting of the cases which have yet occurred in the practice of animal magnetizers, are those in which the patients have been females, and pregnancy one of the results. This curious effect, at one time, made magnetizing a highly popular operation.—*Ib.*

Conceptions.—In a memoir on the influence of the seasons, climates, periods of labor and repose, abundance or scarcity of provisions, and social habits, on the number of conceptions in women, M. Villerme states as one of his conclusions, that the six months of the year in which there are the most births, occur in the following order:—February, March, January, April, November, September. These refer the conceptions to the months of May, June, April, July, February, and March. He regards the same agent which produces marsh miasm, as amongst the greatest obstacles connected with climate, (and therefore, indeed, with season,) to fertility. In the year 1817, one of great scarcity of provisions in the eastern part of France, a diminution of the number of conceptions by one half of the ordinary number, was a very marked result.

Bleeding from Leech-bites.—Many remedies have been made public. Dr. Löwenhardt, of Berlin, adds another, which he mentions as being successful and simple: it is that of drawing the edges of the wound together with a fine needle and thread; the thread being passed through the cuticle only, no pain is occasioned, and the bleeding is at once suppressed.

Iodine in Gout.—This medicine has been repeatedly employed with success in gout, by M. Gendrin, the Editor of the *Journ. Gén. de Méd.* He applies it externally and internal-

ly in frictions, vapor, tinctures, alkaline solution, and enema. He has tried it in about thirty cases, and in every one of them the patients were either cured in a few days, or their condition rapidly ameliorated. In no instance has he found it productive of injurious effects.

Dressers.—In all the Italian hospitals there are a number of young men, from 20 to 30, who perform almost the same functions as the dressers in the London hospitals, but live in the institution, and are lodged and fed at the expense of government. They receive about *three shillings a month* salary.

Connected with this process in the above hospitals, is a peculiar method of using adhesive straps.—The strap is cut very broad at the extremities, and narrow in the centre, so that it is enabled to take a firm hold of the edges of the wound, and exert a considerable power in retaining them in contact; while large spaces are left between each slip in the middle, which permits the free discharge of the pus and ligatures.—*Med. and Phys. Journal.*

The Sun-flower.—It is said the seeds of the common sunflower will yield from 5 to 7 quarts of oil to the bushel; and that this oil is equal to that prepared from olives as a condiment, to sperm oil in elamping, and to linseed oil in painting. The stocks are a good substitute for hemp in manufacturing pack-thread, and the young flower-cups are not inferior to the artichoke as an article of diet.

SKETCHES.—Our foreign journals arrived too late to be of use in this number of the Journal.

REPORT OF DEATHS IN BOSTON,

The week ending August 14, at noon.

Of canker, 1—canker in the bowels, 2—consumption, 6—convulsions, 2—childbed, 1—dysentery, 2—hooping-cough, 1—measles, 2—mortification, 2—typhous fever, 1. Males, 12—females, 9. Total, 21.

ADVERTISEMENTS.

MEDICAL INSTRUCTION.

A COURSE of Private Instruction, for the education of Medical Students, will begin on the 1st of September next, under the direction of the subscribers. The students will be regularly examined and instructed. They will have an opportunity of attending the Medical and Surgical practice and operations in the Massachusetts General Hospital; and Clinical Lectures will be given to them occasionally.

Further information on the subject may be obtained by application to either of the subscribers.

JOHN C. WARREN,
GEO. HAYWARD,
ENOCH HALE, Jr.

Boston, Aug. 17, 1829. aug25—3t.

MEMOIRS OF DR. GOOD.

JUST published and for sale by CARTER & HENDEE, Memoirs of the Life, Writings, and Character, Literary, Professional, and Religious, of the late JOHN MASON GOOD, M.D. F.R.S. F.R.S.L. Mem. Am. Phil. Soc. and F.L.S. of Philadelphia, &c. &c. &c. By OLINTHUS GREGORY, LL.D. Aug. 11.

NEW LONDON WORK.

JUST received, by CARTER & HENDEE, corner of Washington and School streets, A Chemical Catechism; in which the Elements of Chemistry, with the recent discoveries in the Science, are clearly and fully explained. Illustrated by Notes, Engravings and Tables, and containing an Appendix of select Experiments, &c. By THOMAS GRAHAM, M.D. Member of the Royal College of Surgeons in London, &c. &c.

C. & H. have also just received, Elements of Chemistry. By ANDREW FYFE, M.D. F.R.S.E.

CONSOLIDATED COPAIVA.

"COPAIVA may be given in this form without the least inconvenience. Neither communicating taste, nor imparting odor to the breath, it is also retained without the least disquietude or uneasiness to the stomach; and I am informed

by Dr. Rosseau, that in large doses it does not purge."—*Phil. Journal of Med. Sciences.*

See an article in this Journal, Aug. 18th.

OIL OF BLACK PEPPER.

This is a much more active preparation of Piperine. One drop is fully equal to six grains of the latter. It is a valuable adjunct to Quinine. One or two drops, added to six grains, will greatly increase the efficacy of that medicine.

For sale by NATHAN JARVIS, 188 Washington Street, where Physicians will find medicines at as reasonable terms as at any place in Boston.

Aug. 25.

eoptf.

MEMOIR OF DR. HOLYOKE.

JUST published, and for sale by CARTER & HENDEE,—A Memoir of EDWARD A. HOLYOKE, M.D. LL.D., prepared in compliance with a vote of the Essex South District Medical Society.

Carter & Hendee have just received the American Journal of the Medical Sciences, No 8, August, 1829.—C. & H. receive subscriptions for this valuable work, and can supply the numbers from its commencement. Aug. 18.

BERKSHIRE MEDICAL INSTITUTION.

THE Annual Course of LECTURES will commence on the first Thursday in September, and continue fifteen weeks.

Theory and Practice of Physic by H. H. CHILDS, M.D.

Anatomy and Physiology, J. D. WELLS, M.D.

Medical Jurisprudence, S. W. WILLIAMS, M.D.

Theoretical and Operative Surgery, S. WHITE, M.D. and S. P. WHITE, M.D.

Materia Medica, Pharmacy and Obstetrics, C. B. COVENTRY, M.D.

Chemistry, Botany, Mineralogy and Natural Philosophy, C. DEWEY, M.D.

Matriculation ticket, \$ 3. Fee for Lectures, \$ 40. Library ticket, \$ 1. Graduation, \$ 15.50. Board, including washing, lodging and room, \$ 1.75 a week.

Pittsfield, July 22, 1829. aug4tsept30

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

I.

MEDICAL PRACTICE IN CONSTANTINOPLE.

Described in a Letter to Dr. Gregory, by R. R. Madden, Esq., a Professional Traveller in Turkey.

Constantinople, Oct. 25, 1824.

DEAR SIR,—The practice of physic in this country is of so extraordinary a nature, that I presume you will take some interest in the history of its absurdity.

There are about fifty medical practitioners in Constantinople, principally Franks, from Italy and Malta, and a few Ionian Greeks, Armenians, and Copts; of this number there are, perhaps, five regularly educated physicians, and two of these are English gentlemen, highly respected both by the Turks and Franks. Every *medico* has his allotted quarter; he beats this ground daily in pursuit of patients, and visits all the coffee-houses in the district with a Greek *drogueman*, as interpreter, at his heels, whose occupation is to scent out sickness, and to extol the doctor. They are ever to be found on the most public bench of the coffee-shop, smoking with profound gravity, and prying into the features of those around them for a symptom of disease. I confess I had to descend to this degradation to get practice, in order to become acquainted with the domestic customs

of the people. The first day my *drogueman*, who had just left the service of a Roman doctor, and had been practising on his own account since his discharge (for all *droguemen* become doctors), took upon him to teach me my professional duty, which he made to consist in never giving advice before I got my fee,—in never asking questions of the sick,—and in never giving intelligible answers to the friends; I was to look for symptoms only in the pulse; I was to limit my *prognosis* to three words, *In Shallah*, or “Please the Lord,” for doubtful cases; and *Allackharim!* or “God is great!” for desperate ones. I took my post in the coffee-shop, had my pipe and coffee, while my *drogueman* entered into conversation with the Turks about us. I soon heard him narrating a history of a miraculous cure, which he had seen me perform some days before, on the body of a dying Effendi; how I had taken out his liver, and put it in again, after scraping off the disease, and how the patient got well the next day, and gave me five purses. I was exceedingly annoyed; but the fellow seemed to mind my anger little, and even reproved “my want of prudence” with a frown.

Now, the only thing that could have given origin to “the scraping of the man’s liver,” &c., was my having opened a boil in his own back the day before. The Turks

swallowed this story; had it been more marvellous, it would have been still easier digested: one turned up his eyes, and said, "there was but one God;" another praised my skill, and cried, "Mahomet is the friend of God!" The latter gentleman held out his wrist to have his pulse felt, and said, in a very civil tone of voice, *Guehl, giaour*,—"Come, you dog." This endearing epithet Turks consider ought not to give an infidel offence, because it is more a man's misfortune than his fault to be born "a Christian," and consequently "a dog."

My Greek, whose familiarity was very offensive, (and it is a national fault,) now whispered in my ear, "No bite, that fellow never pays." I gave the man, however, my advice, and got a cup of coffee in return.

A well-dressed man, who had been sitting by my side in silence for half an hour, at last recollected he had a wife or two unwell, and very gravely asked me "what I would cure a sick woman for?"—It was a question to delight the soul of Abernethy. I inquired her malady,—"she was sick." In what manner she was affected,—"why, she could not eat." On these premises I was to undertake to cure a patient, who, for aught I knew, might be at that moment *in articulo mortis*. I could not bring myself to drive the bargain; so I left my enraged drogueman to go through that pleasing process. I heard him ask a hundred piastres, and heard him swear by his father's head and his mother's soul, that I never took less: however, after nearly an hour's haggling, I saw fifty put into his hand; and the promise of a hundred more, when the patient got well, I saw treated

with the contempt which, in point of fact, it deserved. No man makes larger promises than a Turk in sickness, and no man is so regardless of them in convalescence. I visited my patient, whom I afterwards found both old and ugly; but I was doomed, on the first occasion, to see no part of her form; she insisted on my ascertaining her disease with a door between us, she being in one room and I in another: the door was ajar, and her head, enveloped in a sheet, as it was occasionally projected to answer me, was the only part of her I had a glimpse of. This was the only woman I ever attended here, or in the islands, who would not suffer the profanation of my fingers on her wrist. I, however, could just collect enough from the attendants, to cause me to suspect she had a cancer; and I did all, under such circumstances, that I could well do,—I gave her an opiate. This lady was no sooner prescribed for, than my attention was directed to the youngest wife, who was pleased to need advice, though her sparkling eyes and smiling lips denoted little of disease. She was extremely pretty, and removed her veil with little difficulty; but she would have her pulse felt through a piece of gauze, which was sufficiently thin to transmit, not only the pulsations of the artery, but also the pressure of the fingers, which mode of communicating symptoms I found a very common one in practice. I ordered her some medicine, which I am quite sure she did not take, and which, in all probability, she did not require. After smoking a pipe, and drinking sherbet, I took my leave.

In a few days after this, my first visit in Constantinople, I was sent for to the house of a grandee, where

a consultation was to be held on a Pacha's case, and one of great importance. I found the patient lying in the middle of a large room, on a mattress spread on the carpet; for the "four-posted beds" of Don Juan and Dudu have no existence in Turkey, and both gentlemen and ladies repose on their mattresses, thrown on the carpet of the divan, in their daily habiliments, none of which they doff at night.

A host of doctors, Jews, Greeks, Italians, and even Moslems, thronged round the sick man; and amongst them were jumbled the friends, slaves, and followers of the patient: the latter gave their opinion as well as the doctors, and, in short, took an active share in the consultation. But he who took upon himself to broach the case to the faculty, was a Turkish priest, who administered to the diseases both of soul and body. He prefaced his discourse with the usual origin of all things: he said,—“In the beginning God made the world, and gave the light of *Islam* to all the nations of the earth. Mahomet (to whose name be eternal honor) was ordained to receive the perspicuous volume of the Koran from the hands of the angel Gabriel; which book was written, by the finger of God, before the foundation of the world; and in its glorious page was to be found all the wisdom of every science, whether of theology or physic; *therefore*, all learning, except that of the Koran, was vain and impious; therefore he had consulted it in the present case, and the repetition of the word honey, he discovered tallied with the number of days his highness suffered (to whom God give health); *therefore* honey was a sovereign remedy, and one of its component parts was wax, a true specific for the disease before them.

Did not the bee suck the juice of every herb? was there not wax in honey? did not wax contain oil? *therefore*, why not try the oil of wax? Oh! illustrious doctors!” he continued, “let us put our trust in God, and administer the dose: our patient has been thirty-six days sick, *therefore*, let him have six-and-thirty drops every six-and-thirty hours. And as there is but one God, and Mahomet is, *therefore*, his prophet, let the oil of wax be given!”

The moment this rigmarole ended, all the servants, and even many of the doctors, applauded the discourse.

There was no time allowed for discussion; the same archpriest took care to see the doctors feed forthwith; each of us got four Spanish dollars, and left the unfortunate sick man to his fate: but going out, when I expressed my astonishment to one of the faculty (an old Armenian) about the exhibition of this new remedy, he looked around him cautiously, and whispered in my ear the word “poison!” On further inquiry, I found the bulk of the patient's property was invested in a mosque. In spite of the remonstrance of my drogueman, I returned to the door I had just quitted, and gave an attendant to understand, his master would die if he took the medicine. The poor man died, however: I heard of the event about a month afterwards.

I was shortly after called to a man who was said to have a fever: when I visited him, I asked what was the matter with him, and where he felt pain? but his friend made the customary reply, “That is what we want to know from you: feel his pulse, and tell us!” I accordingly did so,—found it rapid,

his breathing laborious, and his skin hot ; but not one of the symptoms could I get from the patient or attendants. The Turks have the ridiculous idea, that a doctor ought to know every disease by applying the fingers to the wrist. I thought from what I observed, I was warranted in taking blood in this case. I did so ; but no sooner had I bound up the arm, than I was requested, for the first time, to examine the other hand, which I did, and, to my utter astonishment, found two of the fingers carried away, the bones protruding ; and then only was I informed, that the patient was in the army, and had lost his fingers a week before by the explosion of a gun.

I suspected at once the occurrence of locked-jaw ; I felt his neck ; it was like a bar of iron : the man had been laboring under tetanus for three days, and died the following morning. You may well conceive my indignation at such incredible stupidity as the attendants exhibited here, and my choler at being told the result "had been written in the great book of life," and could not be avoided or deferred. Be that as it may, I certainly would not have bled him, had I any reason to suspect the affection of which he died. You may imagine how difficult it is for a medical man to treat such people ; and, consequently, how rarely they are benefited by him. There are few Mahometans who do not put faith in amulets ; I have found them on broken bones, on aching heads, and sometimes over love-sick hearts. The latter are worn by young ladies, and consist of a leaf or two of the hyacinthus, which the Turks call "mus-charumi :"

this is sent by the lover, and is intended to suggest the most obvious rhyme, which is "ydskerumi," and implies the attainment of their soft desires.

Sometimes these amulets are composed of unmeaning words, like the *abracadabra* of the ancient Greeks for curing fevers, and the *abracalans* of the Jews for other disorders. At other times they consist simply of a scroll, with the words *Bismillah*,—"In the name of the most merciful God," with some cabalistical signs of the Turkish astrologer Geffer ; but most commonly they contain a verse of the Koran.

I think the most esteemed in dangerous diseases, are shreds of the clothing of the pilgrim camel, which conveys the Sultan's annual present to the sacred city : these are often more sought after than the physician, and frequently do more good than the physician, because greater faith is put in them.

The most common of all these charms is the amber bead, with a triangular scroll, worn over the forehead, which the *Marabouts* and the Arab sheiks manufacture, and is probably an imitation of the phylacteries which the Jews were commanded "to bind them, for a sign, upon their hands, and to be as frontlets between their eyes." It would be well if no more preposterous and disgusting remedies were employed ; but I have taken off from a gun-shot wound a roasted mouse, which, I was gravely informed, was intended to extract the ball.

A less offensive and a more common application to wounds, is a roasted fig. I believe old women prescribe it for gumboils in England, and the practice is as

old as Isaiah, who ordered "a mass of figs" to Hezekiah's boil.

Of all Turkish remedies, the vapor bath is the first and most efficacious in rheumatic and cuticular diseases. I have seen them removed in one-fourth part of the time in which they are commonly cured with us. In such cases I cannot sufficiently extol the advantages of the Turkish bath: the friction employed is half the cure, and the articulations of every bone in the body are so twisted and kneaded, that the most rigid joints are rendered pliant.

I have trembled to see them dislocate the wrist and shoulder joints, and reduce them in a moment: their dexterity is astonishing, and Mohammed's shampooing, at Brighton, is mere child's play in comparison. Query,—would not gout be benefited by this remedy, provided it could be really introduced into England as it is used in Turkey?

As a luxury, I cannot better describe it than in the words of Sir John Sinclair:—"If life be nothing but a brief succession of our ideas, the rapidity with which they now pass over the mind would induce one to believe, that, in the few short minutes he has spent in the bath, he has lived a number of years."

I cannot conclude without telling you how all Frank medical men are teased by the Turks for *aphrodisiacs*, which they denominate *madjoun*: I am solicited for it at every corner; and it is lamentable to observe, that hardly a man arrives at the age of five-and-thirty, whom debauchery has not rendered debilitated, and dependent on adventitious excitement for his pleasures. The la-

dies, on the other hand, are desirous of gaining honor by a progeny like Priam's, but they have few children in general, for polygamy is, probably, injurious to population. They cease not, however, to annoy me for medicines to make them fruitful; and are as solicitous for specifics as Rachel was to obtain from her sister some of the prolific mandrakes.

I had always occasion to observe that the sick man was all civility and courtesy when his life was in jeopardy, but the moment he became convalescent he treated me with arrogance, as if he had been ashamed of letting an infidel see that a Moslem was subject to the infirmities of humanity. My services were forgotten whenever they ceased to be required. All the other medical men complained of the same ingratitude; indeed, no physician opened his mouth till the patient opened his purse. The Greeks certainly behave better in this respect; but yet there is that strange obliquity of principle in them, that I never doubted, while a Greek fed me generously with one hand, that he would not have picked my pocket with the other at the same moment. Such is the low state of medical science in this country; and such probably it was in Europe so late as the tenth century. It has been well remarked, that the state of medicine may be considered as the criterion or barometer of the science in a nation. Wherever science and refinement have extended their influence, there medicine will be most cherished, as conducive to the interests and happiness of mankind.

(To be continued.)

II.

OBSTINATE CONSTIPATION.

*Case illustrating the Necessity of Actual Examination and Mechanical Remedies.**

By WILLIAM COX, M.D.

A. B., a female, about 60, a few weeks ago, became a patient of mine. Her general health was good, and she took her meals with appetite. She was a woman of very sedentary habits, seldom or never moving from the house, or using any kind of exercise. She stated that for a long time she had been subject to habitual costiveness; and that she was constantly obliged to have recourse to opening medicine of some kind, without which the bowels would become permanently confined. Her first application to me was when she stood much in need of such medicine. I found much difficulty in procuring evacuations, which were effected only by strong cathartics in repeated doses. I therefore directed her nurse to try the effect of a daily use of warm water as an enema; and to throw up a bulky injection immediately after the stomach was distended by her breakfast. I also advised my patient, about a quarter of an hour after that meal, to make an effort to relieve herself; and by such means endeavor to bring the bowels into a habit of emptying themselves. Nothing but gruel was allowed her for supper. After the first attempt to throw up an enema of warm water, the nurse informed me that my patient had "*piles*;" and also that "*her body was much down.*" Of course, from this de-

scription, I concluded that there was prolapsus ani. On examining my patient, in order to ascertain her real condition, I found a few hæmorrhoides externally; but I quickly perceived that what the nurse had in the first instance mistaken for a protrusion of the gut, was in fact an actual protrusion of scybala; so hard, firm, and compact, that although, by the repeated efforts and straining of the patient, the anus was so stretched as to be very open and large, yet she could not relieve herself. I therefore had immediate recourse to mechanical means; first making use of the handle of a table-spoon, as a sort of scoop, and afterwards of my finger; and, to my surprise, I found the rectum stretched and expanded into a capacious bag or pouch, and filled with scybala; an amazing quantity of which I removed, some part of them being so dry as to crumble into powder when crushed. Having perfectly cleared the gut, as far as the finger could possibly reach, it became a question whether or not there were other accumulations of a similar kind higher up. That there were, I could scarcely doubt, and I considered it indispensably necessary that there should be a perfect clearing out of the retained materials. For this purpose various means were adopted. The patient was put into a warm bath, to promote relaxation; purgatives of various kinds were given, in order that, by their respective specific action, every part of the alimentary canal might be stimulated. Calomel, jalap, cathartic extract, the black draught, ol. ricini, &c., were administered in succession for some days. The whole sur-

* From the London Medical Gazette.

face of the abdomen was subjected to friction with an oiled hand, in a circular direction, from right to left above, from left to right below, from below upwards on the right side, and from above downwards on the left. Clysters of warm water, in the quantity of a pint and a half, were thrown up; and the patient was confined strictly to a water-gruel diet, into which a portion of ol. olivar. was daily put without her knowledge. This plan was followed day after day for some time, and with the best effects; for during many days a considerable quantity of fecal matter was brought away, of the most offensive nature; and the abdomen, which before was full, firm, tense, and unyielding, now became reduced, relaxed, and soft. The motions gradually assumed a natural appearance; the aperient medicines by degrees were laid aside; and at last, when there appeared to be no further occasion for their use, left off altogether. A free passage throughout the whole alimentary canal appeared to be re-established, and a healthy action of the different organs brought about. In this state the patient removed to another part of the country, and I have not heard from her since. She had never been subject to hernia; neither was there any disease of the pelvic viscera, nor any thickening or enlargement of the uterus or the bladder, so as to press against the rectum. After she became my patient, I learned that the medical gentleman who previously attended her, had for a long time given her drastic cathartics, sometimes, I believe, elaterium; but all the evacuations that were procured must have passed down, in

a more or less liquid state, between the sides of the rectum and the hard accumulated feces it contained. On no occasion, while under my care, was she troubled with sickness or vomiting; nevertheless, I satisfied myself, by examination, that there was no hernia; and, by examination per vaginam, that there was no diseased enlargement of the uterus, &c.

The history of this case I think satisfactorily proves that, in many instances of long-continued and obstinate constipation, a personal examination of the patient is absolutely necessary. Had not this female been mechanically relieved, her life must ultimately have been sacrificed; and doubtless many a life has been lost for want of such examination.

P. S.—There was a remarkable dirty yellowness of skin, or rather, dirty *sallowness*, in this patient; which I attributed to the long retention of fecal matter in the alimentary canal, for the skin became improved in clearness after she was relieved.

III.

MELCENA.

The following interesting case is related in an English Journal, by H. S. Balcombe, M.D., and has doubtless many parallels among us, which are but imperfectly understood.

JUNE 1st, 1828.—Mr. H. this day requested my advice. He states himself to be in his 57th year; to have long labored under dyspepsia, for which a few simple remedies have from time to time been taken, but that he has never undergone any regular course of

medicine, nor remitted his accustomed duties. For many years he has devoted the greater part of the day to business, and his spare time has been chiefly devoted to literary pursuits. The death of a very intimate friend, a short time ago, gave him a severe shock, and first made him think a little more seriously of his state of health. He complains of fulness of the stomach; an unpleasant sense of fluttering about the chest; vitiated taste; fulness and viscosity of the fauces; constant nausea; and torpid bowels. The tongue is very pale, and streaked with yellow; pulse 80, and languid; evacuations pitchy black; urine pale; countenance anxious, and of a dirty yellow color; abdomen distended, and soft; and pressure creating no pain in any part. An emetic brought away an immense quantity of sordes and undigested food. He was so much relieved by it, that another was given on the succeeding day with the same effect, but followed by considerable hæmatemesis, the blood being exceedingly dark. The bowels were well emptied; the evacuations as before, pitchy black. He now complained of occasional vertigo, general restlessness, anxiety, and frequent faintings: he had one fit during my visit, which alarmed us all much: he soon recovered, and after taking a little food, de-

clared himself much relieved, and feeling very comfortable.

In consultation with Dr. Goldie, it was determined to give small doses of blue pill and opium morning and evening; the nitric acid in infus. ros. ter die, and to try to support him by a moderately generous diet. Under this plan, from the 3d up to the 8th, he appeared to improve so much that all his family had sanguine hopes of his recovery, and our longer attendance was thought unnecessary; though both Dr. G. and myself, well aware of the deceitful nature of the disease, and of the danger that lurked under all this semblance of returning health, felt justified in giving a very cautious prognosis, and in endeavoring to moderate the feelings of the family. On the 13th, I was again summoned to him hastily, in consequence of a return of all his symptoms, supposed to have been brought on by over-exertion, and a little excess in food. I found him very ill: tongue brown and dry; pulse quick, feeble, and fluttering; syncope upon the least exertion; much blood, dark and grumous, passing down. Some stimulants were exhibited with temporary benefit; but at 9, P. M., we were again urgently sent for, and arrived just as he had expired.

Inspection of the body was declined.

SKETCHES OF PERIODICAL LITERATURE.

ANTI-SPECIFIC NATURE OF VENEREAL VIRUS.

AMONG the *Antis* of the day, it would be somewhat remarkable if subjects connected with the medical profession should not be introduced.

The last number of the London Medical and Physical Journal contains some remarks on the nature and treatment of bubo; the author of which is evidently of the class of modern sceptics in regard to the spe-

cific character of venereal virus. He considers the general cause of bubo to be irritation in the course of the lymphatics leading to the inguinal glands. Of course, it may be occasioned by a local cause applied to the foot or leg, as well as by syphilitic virus: the nature of the inflammation depends on its common seat, not on its various causes; consequently, the rules for treatment are common to all cases, without discrimination between syphilitic and others. In regard to the general treatment, bleeding, purging, and antimonials, are recommended, if much excitement is present, but otherwise are to be abstained from. Warm applications are to be preferred to cold, even while the object is the discussion of the tumor. The chance of effecting this is considered equally great as when the opposite means are employed, and the danger is avoided of leaving that hard, indolent swelling, which so often remains when discussion has been produced by cold applications. In this opinion we fully coincide; and it is by no means clear to us, that the same principle of treatment ought not to be extended to other phlegmonous tumors, as well as those of the glandular character.

In the secondary, or suppurating stage, the same local treatment is to be continued, and the abscess generally allowed to burst of itself. When an artificial evacuation is necessary, the author advises caustic in preference to the lancet,—a preference we suspect not very common at the present day. In this way, however, it is expected to ensure the entire de-

struction of the bubo, within a short time of casting off the slough.

In the ulcerative stage, tonic treatment is sometimes required, and occasionally some caustic substance, or the mercurial ointment, is needed as a local stimulus. Mercury, in every other form, is held to be inadmissible or useless throughout the progress of the disease, whatever be its character or origin. The distinction of buboes into scrofulous and venereal, is regarded as wholly useless; as no benefit is thought likely to arise from treating venereal buboes upon any other principle than that of meeting general indications, without reference to the remote cause.

The views above stated are certainly entitled to attention, and seem, on the whole, to be gaining ground in the medical community. We confess ourselves, however, disposed to receive these anti-specific doctrines with considerable distrust. Before the introduction of mercury in the treatment of syphilis, it had in its various forms been treated on general principles, and we know that its ravages were dreadful. Since that period, also, attempts have been frequently made, and as frequently abandoned, to dispense with its use. Sarsaparilla, mezereon, &c., have had their day, and are not likely to be revived; while the anti-syphilitic powers of mercury have maintained their reputation through all these vicissitudes, and have now acquired an importance in the opinions and the practice of the profession, which it will require much time, and many facts in addition to those we now possess, materially to impair.

ALOES.

A WRITER in the Medical Gazette, denies that the apprehensions entertained of this drug, as tending to produce or aggravate hæmorrhoidal affections, are well founded. Hæmorrhoids, indeed, are not necessarily connected with the use of any cathartic. They occur in loose as well as in costive habits; but in the last case, which is a frequent one, as aloes is frequently found a convenient article for procuring stools, and is often resorted to for that purpose, it has hence unjustly acquired the reputation of an agent in producing them. The mode in which it is supposed to do this, is by stimulating the lower part of the rectum; but, notwithstanding this general impression, there exists no proof that the article produces its principal effect on this portion of the passage. It is much more probable, that its chief action is exerted on the colon, and that the rectum acts in consequence of the stimulus of distention after the fæces are conveyed there. The author argues further that, considering the very general use of the article as a popular remedy in constipation, and that it enters into the composition of most of the pills used for this purpose, its effects ought to be visible in the very general production of piles, in a greater or less degree, in those addicted to the use of cathartics, which does not appear to be the fact.

As far as our own experience on this subject extends, we should be disposed to agree with our author in regarding aloes, particularly when combined with rhubarb, as a safe,

easy, and effectual cathartic, extremely well adapted for cases of habitual constipation in which it is found necessary to have recourse to articles of this description. With regard to the production of hæmorrhoids, there does not, we have said, seem much ground for attaching much agency to aloetic cathartics; hence we should doubt, also, the correctness of the very general prejudice which exists against its use in this disease.—Another prevalent notion is, that aloes is contraindicated in pregnancy, as its stimulating property extends to the organ mainly concerned in that process. That violent catharsis has a tendency to interrupt the progress of gestation, is abundantly proved; but that this is especially the case when aloes is employed, has not, by any means, been demonstrated. The argument drawn from its effect in amenorrhœa, is imperfect for several reasons. In the first place, the effect of aloes as an emmenagogue is confessedly very uncertain; and when it does succeed, its *modus operandi* is mere matter of conjecture. In the second place, the state of the organ is so materially altered by the circumstance alluded to, that it is impossible to reason from its actual effect in one state, to its probable influence in the other. From the effect of *secale cornutum* in labor, great advantages were at one time expected from its employment in amenorrhœa, and great danger from its administration during the period of gestation. Neither of these anticipations has been verified, and with respect to the former, it has been shown to be the reverse of the fact;

since the article alluded to has been employed in menorrhagia with the most decided success. On the whole, we are justified in suspecting that the fear of employing aloes in pregnancy is the effect of prejudice, rather

than the result of experience; and that, administered in moderate quantities, it is not likely to be attended with more danger in such cases, than other purgatives in common use.

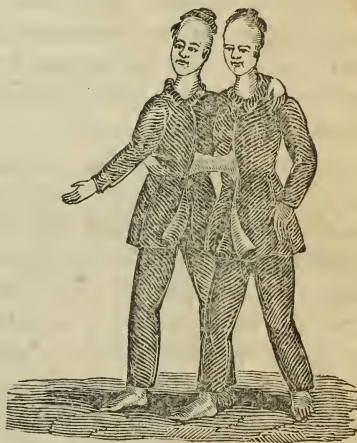
BOSTON, TUESDAY, SEPTEMBER 1, 1829.

THE SIAMESE BROTHERS.

OUR readers have been apprized, through the newspapers, of the arrival in this city, and public exhibition, of the united boys from Siam. On first viewing them, the attention is arrested by their healthy and happy appearance. They are nearly of the ordinary stature, have heads uncommonly large, and foreheads higher, but less broad, than those of young men generally at their age. Their complexion, features, and countenance, are altogether Chinese, and accord with tolerable exactness. After seeing them often, however, the peculiarities of each become more evident, and they appear scarcely, if any, more resemblant than other twins have appeared when clad in like apparel.

By the plate below, which is that already before the public, they would appear to be united by a cartilaginous substance of an hourglass shape, passing from the epigastric region of one, and attached to that of the other. This, however, is not the case. The skin is continuous from one boy to the other; and with the exception of a scar in the lower surface, evidently occasioned by the removal of the cord through which they were nourished in the foetal state, it presents

no mark, blemish, or discoloration whatever. This scar bears but little resemblance to that usually left by the division of the umbilicus; a fact which may be explained in two ways. It may be owing to some manner of performing this operation among the Siamese, different from that in use among us; or the constant pulling on this connecting mass, may have drawn it out, and occasioned the long and even surface which it presents.



On closer examination, the true nature of the union becomes evident. The ensiform cartilages of the sternum are bent outwards, and united by ligaments at their extremities, forming a kind of joint which admits of motion in various directions. By the pulling of these ligaments, occasioned by almost every movement, the

integuments below have been drawn out, as it were, so that the whole forms a band of union, horizontally about two inches broad, and in thickness, vertically, about four inches. Its length is about half that represented in the plate, and was doubtless originally very small. The whole mass is tough, and capable of being extended very considerably. When loose, that is, when the boys face each other and stand close together, if one hand be placed above this curvature and the other below it, and the latter be then pressed forcibly up, the hands approach each other so nearly, as to convey the impression (doubtless a correct one) that the intervening substance is little more than the ensiform cartilages united by ligaments, and surrounded by the integuments. The concave inner, but in this case *under*, surface of these cartilages, is distinctly felt, but no pulsation whatever is distinguishable.

Although we cannot say that the skin which envelopes this projection was originally endowed with less sensibility than that which covers other parts of the body, yet it is evident that such deficiency exists at present. We were obliged to press it forcibly between the fingers before any mark of pain was elicited, and we were informed by the attendant that he had often pinched it during their slumbers without disturbing them.

The precise effect of this physical union, on the intellectual faculties, the moral sentiments, and animal propensities of these boys,—its influence on the functions of the different

organs, and how far it would communicate or modify the effects of morbid or medicinal agents, are subjects on which we shall not enter. No opportunity has yet presented of observing the influence which disease or medicine in one, would exert on the other; but circumstances do not appear to justify the least suspicion of any mental individuality. Whispering in the ear of one, conveyed no sense of sound to the other. Volatile salts applied to the nostrils of one, produced in the other only a curiosity to try the same experiment on himself. Pinching the arm of one, was attended by no sensation in the other. Being desirous of ascertaining if there was *any* point where both felt, we made an impression with the point of a pin in the exact vertical centre of their connecting link; both said it hurt them. We then made other impressions, extending them very gradually further from this point: the result was, that within the distance of three-fourths of an inch from the centre toward each boy, sensation was communicated to both by a single prick; beyond this it was excited in one only, the other perceiving it in no degree whatever. This experiment was remarkably satisfactory, and we apprehend that farther than here exhibited, the two youths must be considered, whilst in a state of health, as free and independent agents, and the functions of all the other organs as unconnected as those of their brains.

Twins generally resemble each other in intellect and disposition, as well as in person, and this is particularly the case with the boys in ques-

tion. When to this natural resemblance we add the habit they have contracted of acting simultaneously and in concert, we shall be less surprised than we might at first be, at the facility with which their various movements are performed, and the quickness with which one responds to the inclinations of the other.

In the course of their voyage, they would not only run, we are told, and leap with great agility and without interfering with each other, but climb to the mast-head as fast as any sailor on board the ship. They are seldom observed to converse with each other, and the concert with which they act seems to be almost instinctive. In playing the game of drafts, e. g., which they learnt with great ease, being of a people naturally fond of games and gambling, they were observed to decide on their moves almost instantaneously, and to make them with a quickness and air of decision sufficiently characteristic of all their movements. In the course of the game, sometimes one and sometimes the other would make the move; they appeared to have the same plans, and always acquiesced in the moves of each other. Yet they sometimes *play against each other*; but so strong is their habit of co-acting, that such games go on with less freedom than when opposing a third person.—Their alvine evacuations generally occur at the same time; their appetites and tastes are all very much alike; and they appear not only contented but happy, and extremely attached to each other.—Capt. Coffin was informed by their mother that she had borne seven-

teen children. Once she had three at a birth, and never less than two; though none of her other children were in any way deformed.

The question naturally arises in the mind of every observer, could not this connecting substance be divided without injury to the boys? We do not pretend to solve this problem, which after all can only be fully decided by the experiment; but we hesitate not to say that, after several very accurate examinations, our impressions are that such division would be a detriment only to the very respectable and obliging gentleman who offers them for exhibition. The anatomical structure of this bond of union is apparently simple, and we regard the fact that children so united should have been ushered into the world with safety to themselves and their mother, that they should have escaped the ills and early fatality which usually attend such prodigies, that they should have grown up to the age of 18 years in the uniform exercise of mutual good will and a spirit of mutual accommodation, and that they should be so perfectly contented with their lot, and so happy in all the various unpleasant circumstances in which they are placed, as far more remarkable than that such a deformity should have existed. Instances of fœtuses united much more closely than are these boys, are by no means rare in the books or cabinets of anatomists. The mode of union is very various, being sometimes at the hips, backs, or sides; several cases are related by Parée and Tulpius, in which the connection was at the abdomen. In the Philo-

sophical Transactions is an account of two children thus united, born near Manchester, Eng. in 1752.—In 1748, Dr. Parsons communicated to the Royal Society an account of a still-birth not very unlike that of the boys now exhibited. The fœtuses were united from the umbilicus to the upper part of the sternum, and the single cord by which they were nourished, entered the connecting medium at a central point on its lower surface.—Dr. Cotton Mather communicated to a learned friend in England a similar case, of which he was eye-witness, and which occurred in this city in 1713; and a double fœtus, born in this country at a much later period, is now preserved, and deposited, if we mistake not, in the anatomical cabinet of a neighboring medical institution.

Most monsters have been stillborn, and of the few who have been living, a very small proportion have survived many days. The most remarkable, and, as far as our memory goes, the only case on record of such monsters acquiring the adult age, occurred in Hungary more than a century ago. Two females, Judith and Helen, born in Szona in 1701, were united at the lower part of the back. They had between them but one urethra, and one passage for the fœcal evacuations. Their bodies, abating the deformed part alluded to, were well shaped, and their faces beautiful. They were intelligent, and, like the boys of Siam, not only contented, but, in the language of their father, “both brisk and merry.” Like them, also, these girls “had not their feeling common any where but in

the place of their conjunction.” When one stooped she lifted the other on her back, and when one went forward the other was drawn backward. One would sometimes sleep whilst the other was awake, and though tenderly attached, their inclinations were not always the same. These Hungarian sisters were well educated and well bred; they could speak four different languages, and sing very prettily. They lived to the age of twenty-two years, during which time they were exhibited in different parts of Europe, and both died together in 1723.

CHIRAYITA HERB.

THE virtues of this remedy, with a case of leucorrhœa cured by it by Dr. Blundell, will be found referred to in page 174 of this volume of the Journal. As a tonic and stomachic remedy, it appears to be gaining favor with the profession abroad, and we are happy to apprise our readers that it has found its way across the Atlantic, and is now for sale by Ebenezer Wight, Apothecary, in Milk Street. The last number of the London Gazette of Health contains the history of a clergyman at Clifton, who after having suffered severely and many years from dyspepsia, accompanied by distressing nervous headach and a high degree of excitability of the nervous system, was entirely cured by the chirayita.

TANNIN IN MENORRHAGIA.

THE *Révue Médicale*, of the month of September last, contained some observations of Pata on the good effects of tannin in the above disease. When

these observations met the eye of Cavalier, he was attending a young woman, 33 years of age, affected with hemorrhage from the uterus, for the cure of which he had employed various means in vain. It must be observed, that this female had been subject, for many years, to a bleeding from the anus, which increased, but without deranging the course of the menstrual discharge. But after a violent affection of the mind, this bleeding became much worse, and a uterine hemorrhage also took place. At length M. Cavalier prescribed the tannin, in doses of two grains every two hours. On the first day, some amendment was perceptible; on the second, the flux of blood from the anus ceased; and on the third, the menorrhagia was stopped, giving place to an abundant leucorrhœa, but this also diminished under the continued use of the same remedy, and the patient became convalescent. The same author also relates the case of a young girl of 17, who was affected with uterine hemorrhage in consequence of using violent exercise during the period of menstruation. She had employed all the common remedies, including extract of rhubarb and opium. Everything having been useless, he prescribed the tannin, and with success equally prompt as in the first instance; for, at the end of four days, the discharge had entirely ceased.

Case of Tetanus cured by Bleeding.—A man, of about 30 years of age, after working very hard, experienced severe pains in the vertebral column: he was attacked by locked-jaw, to which, in a few days, succeeded tetanus and emprosthotonos. In the course of nineteen days, he was bled eight times from the arm: the four first bleedings were performed in the first two days, from three to four pallets each. In the same time, six hundred and eighty leeches were applied along the spine, two or three warm baths were administered, and

every morning and evening a simple clyster, with an addition of 25 drops of laudanum, which were gradually increased to 105 drops. The patient was cured.—It is to be remarked, that notwithstanding the great loss of blood, the pulse continued both very full and very frequent. The man was so little weakened, that on the fourth day of his convalescence he was in a condition to walk.

Intermittent Tetanus.—A woman, 67 years of age, was affected with whitlow on the thumb of the right hand: the first phalanx being detached, the wound healed: a fortnight afterwards a pricking pain was felt in the lower part of the cicatrix, which extended little by little to the whole arm, following the course of the median nerve: this pain lasted from five minutes to a quarter of an hour, and returned once every day. After the lapse of a few months, trismus and opisthotonos were added to the other symptoms. The thumb was amputated, and the disease did not reappear. On examining the amputated part, it was observed that the cicatrix was cartilaginous, and that a nervous twig that was imbedded in it, was of a deep red color for the extent of a line and a half.—*Heidelberger Clineche Annalen.*

Poisoned Sugar-Plums.—The French chemists have, at different times, pointed out the danger of eating colored "bonbons." In a recent number of the *Clinique*, it is stated that many accidents have very lately occurred in Paris from this cause. We have never known such accident in this country, though children eat them very freely.

REPORT OF DEATHS IN BOSTON,

The week ending August 22, at noon.

Of bilious fever, 1—consumption, 1—cholera morbus, 1—child-bed, 1—dysentery, 2—enlargement of the heart, 1—infantile, 4—liver complaint, 1—measles, 4—old-age, 1—spasms, 2—teething, 1. Males, 7—females, 13. Total, 20.

ADVERTISEMENTS.

EUROPEAN LEECHES.

RICHARD A. NEWELL, Druggist, respectfully acquaints the physicians and families of the city, that he has made arrangements with one of the first mercantile houses on the continent, to be regularly supplied with the Genuine Medicinal Leech. He has now on hand a fresh supply, just received, which are for sale.

N. B. The difficulty of obtaining genuine Leeches by the usual way has induced him to make the above arrangement at considerable expense, and he hopes it will meet the approbation of the medical faculty. Summer-street, opposite Purchase-street.

Sept. 1.

3t.

HARVARD UNIVERSITY.

MEDICAL LECTURES.

THE MEDICAL LECTURES in Harvard University will begin in the Massachusetts Medical College, Mason-street, Boston, the third WEDNESDAY in October next, the 21st, at nine o'clock, A. M.

Anatomy and Surgery, by Dr. WARREN. Chemistry, Dr. WEBSTER.

Midwifery and Medical Jurisprudence, Dr. CHANNING.

Materia Medica, Dr. BIGELOW.

Theory and Practice of Physic, Dr. JACKSON.

Students attending the Medical Lectures are admitted, *without fee*, to the Surgical Operations and Clinical Practice of the Massachusetts General Hospital, during the courses.

Aug. 4. W. CHANNING, *Dean*.
eoptOct21.

NEW LONDON WORK.

JUST received, by CARTER & HENDEE, corner of Washington and School streets, A Chemical Catechism; in which the Elements of Chemistry, with the recent discoveries in the Science, are clearly and fully explained. Illustrated by Notes, Engravings and Tables, and containing an Appendix of select Experiments, &c. By THOMAS GRAHAM, M.D. Member of the Royal College of Surgeons in London, &c. &c.

C. & H. have also just received, Elements of Chemistry. By ANDREW FYFE, M.D. F.R.S.E.

EUROPEAN LEECHES.

CHARLES WHITE, No. 269 Washington street, corner of Winter street, has just received a fresh supply of EUROPEAN LEECHES, extra large and in prime order. Also, by the late arrivals, a general assortment of MEDICINE.

** Strict personal attention paid to Physicians' prescriptions and to the compounding and delivery of Family Medicine, and all favors gratefully received.
Sept. 1.

MEMOIRS OF DR. GOOD.

JUST published and for sale by CARTER & HENDEE, Memoirs of the Life, Writings, and Character, Literary, Professional, and Religious, of the late JOHN MASON GOOD, M.D. F.R.S. F.R.S.L. Mem. Am. Phil. Soc. and F.L.S. of Philadelphia, &c. &c. &c. By OLINTHUS GREGORY, LL.D. Aug. 11.

BERKSHIRE MEDICAL INSTITUTION.

THE Annual Course of LECTURES will commence on the first Thursday in September, and continue fifteen weeks.

Theory and Practice of Physic by H. H. CHILDS, M.D.

Anatomy and Physiology, J. D. WELLS, M.D.

Medical Jurisprudence, S. W. WILLIAMS, M.D.

Theoretical and Operative Surgery, S. WHITE, M.D. and S. P. WHITE, M.D.

Materia Medica, Pharmacy and Obstetrics, C. B. COVENTRY, M.D.

Chemistry, Botany, Mineralogy and Natural Philosophy, C. DEWY, M.D.

Matriculation ticket, \$ 3. Fee for Lectures, \$ 40. Library ticket, \$ 1. Graduation, \$ 15.50. Board, including washing, lodging and room, \$ 1,75 a week.

Pittsfield, July 22, 1829. aug4sept30

MEMOIR OF DR. HOLYOKE.

JUST published, and for sale by CARTER & HENDEE,—A Memoir of EDWARD A. HOLYOKE, M.D. LL.D., prepared in compliance with a vote of the Essex South District Medical Society.

Carter & Hendee have just received the American Journal of the Medical Sciences, No 8, August, 1829.—C. & H. receive subscriptions for this valuable work, and can supply the numbers from its commencement. Aug. 18.

I.

CASE OF DISEASED URETHRA, WITH
RETENTION OF URINE.

*Extraordinary Measures adopted
by M. Roux.*

ON the 22d of April, an old man was admitted under the care of M. Roux. The case of this patient, already sufficiently severe, presented a character still more serious and important, in consequence of the extraordinary measures resorted to by the surgeon for its relief. M. Roux, on questioning the man, discovered that he had only once had a gonorrhœa in his youth, but that the water had been passed with difficulty for some time; that he had neglected what he had considered only as an inconvenience, but that, within the few last days, there had been a complete retention. Not only did the urethra appear much contracted, but it was evident that the canal had undergone a rupture (neither the seat nor extent of which could be determined), since there was a urinous abscess developed in the perineum. The first indication, of course, was to pass the catheter, and to draw off the urine contained in the bladder; but after many attempts with various instruments, this was found to be impossible, and, considering M. Roux's dexterity, he had great right to presume that any other person would equally have failed. However, in examining the patient

carefully, the tumor observed in the hypogastric region was thought not to belong entirely to the mere distention of the bladder: it was not globular, smooth, and resisting; on the contrary, it was very irregular; it extended upwards towards the right flank; it was besides soft, and a certain fluctuation was perceptible. In consequence of this, M. Roux, although he had discovered the existence of stricture in the urethra, and consequently of a considerable increase in the size of the bladder, fancied that this tumor was a purulent collection, first originating in the cellular tissue of the perineum, but communicating with that of the pelvis, and extending to the right flank. One other circumstance seemed to strengthen this opinion, which was, that whilst attempts were made to pass the catheter, a bloody pus escaped by the upper end of the instrument, and on pressing the perineum, a still larger quantity escaped. There was nothing to exclude the idea of a communication between the two tumors. M. Roux, agitated by these suppositions, was uncertain as to what line of conduct he should adopt; certainly the most obvious and simplest plan was to penetrate into the bladder by the natural passage, but unluckily he had been unable to accomplish this, notwithstanding all his address. It appeared certain that the extremity of the catheter penetrated into the

perineal abscess; the continual escape of the pus proved this. Obligated to abandon all his efforts in that direction, and leaning to the opinion that the hypogastric tumor was an abundant collection of pus, he decided upon making an opening into the abdomen. He afterwards said, that had he been well convinced that this tumor was merely the bladder in a state of distention, he should have been content with simply puncturing it; but he feared (should that not be the case) to wound the bladder unnecessarily. He therefore wished not to open the bladder, and yet he made an incision two or three inches long, in the parietes of the abdomen, parallel to the linea alba, and immediately above the pubes. He divided the parts layer by layer, so as only to involve the abdominal parietes; but such was the size of the bladder, and its adhesion to those parietes (as he said) that his instrument passed at once into its cavity. Immediately an abundant discharge of fluid ensued, which was recognized as urine tinged with blood; there was, therefore, on this side, only the common result of a complete retention of urine; however, the opening was enlarged, so as to permit a gum elastic catheter of a very large size, to be introduced and left in the bladder. Some trials of rather a singular nature were then made: not only was an instrument again introduced into the urethra in the ordinary manner, but, as the finger of the operator, inserted through the wound he had made, was able to reach the neck of the bladder, it struck him to pass a catheter in this direction also: it was guided by the finger into the neck of the bladder, and having passed a certain space, probably the prostatic

portion, it also was stopped by the stricture. The operator, therefore, held two catheters at the same time; one reaching from the orifice of the penis to the stricture, the other from the wound in the abdomen, through the neck of the bladder, to the same spot; and thus he could appreciate, in some degree, he said, the space contained between the two extremities of the instruments. Such was the first result of this severe and long operation. The patient was then permitted to rest until the next day, the 23d.

On that day, M. Boyer examined the patient, and he thought it necessary, as well as M. Roux, with the double intention of opening the perineal abscess and giving a more favorable issue to the urine, to make a large incision of the integuments parallel to the raphe, below the testicles, and thus to open the urethra. This incision was therefore made by M. Roux, who after having passed a catheter by the wound in the abdomen, thought he felt the point sufficiently to enable him to make it a guide for the rest of the operation; that is, for the incision into the urethra. This was a conductor rather of a novel species: a very large-sized gum elastic catheter was finally pushed, by this new passage, into the bladder; and as that was considered sufficient, the other was withdrawn.

About an hour and a half after the operation, a pretty considerable hemorrhage took place from the wound in the perineum. M. Boyer was still in the amphitheatre, and he discovered that the bleeding proceeded from a small arterial branch of the internal pudic: it was readily seized by the forceps, and secured. From that time the urine chiefly flowed through the

catheter, and very little was observed at the upper orifice; nevertheless, considering the man's age, the loss of blood, and the severity of the operations he had undergone, there was nothing encouraging in his condition. On the 24th, at five o'clock in the evening, the patient died, his state of tranquillity being only disturbed, two hours previous to his death, by delirium.

Necropsy.—The body externally was remarkably thin, and the abdomen greatly tumefied, from which, when opened, a great quantity of fœtid gas escaped. The anterior parietes, divided transversely about the navel, was turned down towards the pubes. The peritoneum presented scarcely any trace of inflammation, with very little serum, or redness, and no false membrane. The anterior parietes of the bladder adhered to the abdomen above its ordinary connexion, and the incision had penetrated at once into that viscus. M. Boyer himself, having sawn through the pubes, removed all the parts, including the rectum: he afterwards prolonged the incision made during life, to the anterior part of the bladder, and a little pus was observed disseminated between the peritoneal and muscular coats; this latter was greatly thickened, so as to be five or six lines thick. In the interior it presented thick fleshy columns, resembling those of the heart; between these columns were large cells, especially towards the bottom of the bladder. All the neighborhood of the wound in the abdomen was filled with coagulated blood. M. Boyer, with the help of a grooved sound, divided the upper part of the urethra from behind forwards,

and the following particulars were observed:—The prostatic portion was sound, the prostate itself only presenting those small connexions found generally in old men; but the bulb of the urethra was the seat of the disease. An irregular opening was situated on the right side, communicating with the abscess of the perineum. The incision made by M. Roux was before the stricture, or rather the closing of the urethra, which extended for about an inch. The rest of the canal was sound. The abscess occupied but a short space, and the cellular membrane in its vicinity was indurated.—*La Clinique, 28 Avril.*

II.

LIGATURE OF THE COMMON CAROTID.

The following case of the successful application of a ligature to the common carotid, for the purpose of arresting hemorrhage from a wound in the artery passing through the parotid gland, has been recently reported in the *Journal Hebdomadaire*. It was performed at a hospital in Lisbon, where the art of surgery is cultivated with boldness and success. In the same hospital, the iliac was recently tied for an aneurism in the groin. The ligature, which was of catgut, was left in the wound. The result of this case, also, was successful, the patient having been discharged on the 85th day.

E. DUARTE, æt. 44, of middle stature and sanguine temperament, addicted to spirits, was admitted into the Hospital St. Joseph at 7 o'clock in the evening, Feb. 27th, 1825, having a wound about fourteen or fifteen lines in

extent, made with a cutting instrument, on the left side of the face on the parotid gland. On introducing the finger, it was ascertained that the wound took the direction of the pharynx. The patient stated that he had received the injury at half past six, and lost a large quantity of blood at the moment from the external opening, and a little from the mouth. The slightest movement of the jaw brought on copious bleeding; the face was pale, the pulse scarcely to be felt, and the limbs cold.

As it would have been difficult to secure the vessel at the site of the wound, it was deemed more expedient to take up the common carotid, and this was immediately done by M. J. Lorenzo de Cruz, in the manner recommended by Mr. Hodgson. He went on without anything very remarkable till the thirty-seventh day, when he was seized with violent hemorrhage from the lower orifice; the blood, from its quantity, color, and the rapidity with which it flowed, had every appearance of being arterial: he fainted, and remained long in that state. Compression was employed, and when he recovered from the syncope he was bled to the extent of five ounces. He was placed on rigorous diet and absolute rest. The bleeding did not return, and on the 66th day he was discharged, the wound having entirely healed.

III.

RESISTANCE TO POISON.

The following remarkable and almost incredible account, was published in a late number of the London Journal of Belles Lettres. The prin-

cipal facts it contains, were substantiated in a subsequent communication to that Journal, from Dr. J. Gordon Smith, who was an eye-witness of the exploits of Mr. Chabert, and who is the author of several able works on the subject of poisons, &c.

ON Tuesday we had an opportunity, at the Argyll Rooms, of witnessing the extraordinary powers possessed by M. Chabert, of resisting the effect of poisons, either internally or externally. M. Chabert is the individual whose equally wonderful capability of withstanding heat has been shown by his remaining shut up in ovens during a long period, and under a degree of temperature far above that which would have destroyed any other living creature. The experiments on the present occasion, were exhibited to a private party of some fifteen persons, including Dr. J. Gordon Smith, Mr. Titus Bury, the surgeon, and other scientific men. Having armed himself by the antidote which he has found to be a guard against animal poisons, M. Chabert swallowed *forty grains of phosphorus*, in the presence of the astonished company.* The phosphorus was distinctly put upon his tongue by a gentleman, and beyond all doubt fairly taken into the stomach,—nearly, if not quite enough, we presume, to have killed all those who saw this feat done. His next exploit was to sup two spoonsful of oil, at 330 degrees by the thermometer, i. e., 120 degrees above the heat of boiling water. This he did without any apparent inconvenience; though

* The enormity of this dose will appear, by referring to an article of intelligence on our 479th page, entitled "Death from Phosphorus."

the spoon remained for minutes so hot that no one could bear to touch it with his hand. Finally, M. Chabert held his head directly over and in the midst of the fumes of arsenic, which, diffusing over a large room, speedily became too potent to be inhaled with impunity by any other being who was present. After all this (we add with something like satisfaction at his escape, and at our own good luck in not being accessories to murder or suicide), we had the pleasure to see the performer eat a good dinner and drink his wine, just as if he had taken a rusk and a sip of sherbet, by way of whet.

As it may be asked, to what useful purpose can these astonishing proceedings contribute? we should assert, that M. Chabert affirms his ability to save the lives of men from every species of poison; and that his antidotes, administered in adequate time after the poison has been swallowed, are as effectual as if previously taken. He farther says, that he has *three* antidotes,—one a preservative against vegetable, another against animal, and a third against mineral, poisons; so that those of the whole kingdoms may be met and overcome. Even the fatal hydrocyanic, or prussic acid, he professes to take with safety; and, from having withstood the bites of vipers and other venomous creatures, he is of opinion that his remedy would be a specific against the bite of mad dogs, and a cure for hydrophobia. Now, without pledging ourselves to unhesitating faith on all these points, we cannot, seeing what we have seen with our own eyes, doubt that M. Chabert's knowledge of antidotes, and experience with respect to poisons, is

eminently worthy of medical investigation; and, if he really possess such important secrets, that they ought to be ascertained, and he largely rewarded as a public benefactor. It is for these reasons that we have published this account, and that we invite our physicians, chemists, and other people of scientific intelligence, to inquire into M. Chabert's pretensions, and, if they are sooth, to establish them for the good of mankind.

We may here take the opportunity of mentioning that M. Orfila, the celebrated French chemist, has recently been making a series of experiments with hydrocyanic acid, chiefly for the purpose of ascertaining the proper means of restoring a person to life, where it is practicable, after taking that poison. Hitherto the remedies prescribed have been strong infusions of coffee and oil of turpentine; but seldom with good effect. M. Orfila recommends, first, an emetic; second, the application of ammoniacal or chlorurated water to the nostrils, bleeding from the arm, and the application of leeches behind the ears; third, the affusion of cold water, in the way prescribed by a German physician, M. Erbot. M. Orfila states that these means will restore the patient, unless the quantity of prussic acid taken has been very great. In order to ascertain the presence of this poison, he recommends the use of nitrate of silver, by which the acid will be precipitated in the form of cyanure of silver. In case of poisoning by opium, he recommends, previous to the administration of emetics, a strong decoction of nutgalls, for the purpose of decomposing the opium.

IV.

TUMOR WITHIN THE ILIUM.

Some Account of the Disease and Examination of the Body of the late Dr. J. G. Coffin, of this City; Communicated in a Letter to the late Dr. Gorham.

Brookfield, Jan. 26, 1829.

MY DEAR SIR,—It was the request of the late Dr. Coffin, that I should investigate the nature and seat of his disease by an examination after death, and should communicate the result to yourself and Dr. Hayward, who had administered to his relief while in Boston. This task I have most cheerfully performed, and feel happy that a man so distinguished by his scientific acquirements, should have made the request, accompanied with this noble sentiment,—that, “as he could be no longer useful while living, he wished to be so after death.” I prefix a short history of his disease, which (if you think it worth while to publish the notes of the examination) may be published with them in the Medical Journal. I am, dear sir, with much respect,

Your obliged servant,

JOHN HOMANS.

John G. Coffin, M.D., possessed a good constitution, which, though not of the firmest order, yet, for the last twenty years, enabled him to perform his professional labors without two successive days' confinement by bodily indisposition, until August, 1827. His labors did not consist merely in visiting the sick. In that month, he was attacked with severe pain in the right side, just below the ribs, which he supposed to be colic, having been subject to it for many years. This pain continued for

forty-eight hours with little or no intermission, attended with constipation of the bowels and nausea. On the 3d day, after copious dejections, he was so far relieved as to be able to ride a short distance. After this, his digestive organs became impaired; he grew feeble, had inclination to evacuate the bladder frequently, followed by pain over the symphysis pubis, and always felt uneasiness, varying in intensity only, in the right side, the seat of the first pain. In this state he remained for several months, but gradually declining in strength, and diminishing in size and weight, till the following June, when he went to Philadelphia, thence to Newberg,—whence he returned to Boston, much exhausted by an exacerbation at Newberg. In October he had another severe attack, and a fourth in December. After this he came to Brookfield by slow stages. For several months a diarrhœa had attended him; this now increased so as to reduce him to the bed, when, on the 17th and 18th inst., he underwent the last severe sufferings by an attack much like the former ones. He survived this but a few days, and died on Friday, the 23d inst. The symptoms in all these attacks were similar, the pain occasionally extending to the hips, and in the last attack the pain was more severe in the left hip and over the left side of the pubis. Frequent calls for passing urine attended him throughout the disease.

Examination, four hours after death.

Body exceedingly emaciated. The right side, between the diaphragm and the right ilium, prominent. On dividing the skin and muscles, the vessels of the omen-

tum were found turgid, and the omentum, the contracted blood-vessels of the peritoneum, and the colon and small intestines, except the duodenum, were distended. The liver, stomach, and duodenum wore a healthy appearance; spleen somewhat enlarged, and harder than usual: mesenteric glands were enlarged. The intestines on the right side adhered to each other in some measure. Between the umbilicus and the anterior superior spinous process of the ileum, was a tumor, nearly as large as the kidney, enclosed

by the intestine ileum at its junction with the cœcum and colon, hard, irregular, and sarcomatous.* On opening the tumor, pus was discharged; it consisted of flesh growing from the side of the intestine. The ileum, for twelve inches from this, was nearly purple. A concretion of the size of a pea, was found in the ductus communis. The coats of the bladder were rigid, and on the left side were two tumors, one of the size of an English walnut, the other of a common walnut, caused by rupture of the muscular coat.

SKETCHES OF PERIODICAL LITERATURE.

CAPACITY OF THE LUNGS.

THE amount of air which the human lungs are capable of receiving under a variety of circumstances, is very differently stated by authors who have written on the subject. With a view to obtain some accurate results on this point, Dr. Herbst, of Gottingen, has instituted some experiments, the results of which seem worthy of considerable confidence. The apparatus employed by Dr. H. is very simple, consisting of a graduated bell jar standing in a vessel of water, and having a stop-cock at its summit, connected with a glass tube shaped like a horizontal S. Breathing out of this jar, produced at first some embarrassment, and the function was not naturally performed. By a little practice, however, the difficulty was overcome, and the inspiration was made with the same ease as if performed in the open air. The accuracy of the results was verified by causing an equal number of

inspirations to be made into the jar filled with water.

The quantity of air inhaled in easy inspiration, was found to be from 20 to 25 inches in men of ordinary stature. The extreme capacity of inspiration and expiration varied much in different persons. A robust man, 22 years of age, after full inspiration, expired 180 inches; after full expiration, inspired 184. A small man of the same age, under like circumstances, expired 144 inches. Two fat men, otherwise stout and healthy, did not exceed 140. The greatest expirations noticed, were 232 and 244 inches; both in very powerful men, one tall, the other of middling stature. The capacity was much diminished by tight clothing, and the difference in men when dressed and undressed was very striking. In women, the capacity of the lungs is

* This tumor is now in the anatomical cabinet of the Massachusetts Medical College.

much inferior to that of men; the greatest expiration mentioned being 144 inches. From experiments of the bodies of men who died suddenly when in health, Dr. H. found that the lungs, when distended as far as possible without tearing them, never held more than 186 inches. This fact, in connection with those above stated, seems to show that very little air can remain in the lungs after a forcible expiration. The capacity of the lungs is very much diminished by disease. The full inspirations of two individuals affected with phthisis, were 42 and 46 inches. Animals, in proportion to their weight, have a much greater capacity than men; a fact which corresponds to the advantage they possess in point of muscular strength. The capacity of the lungs in grown up cats, is from 20 to 24 inches, and in dogs the disproportion is equally great. The speed possessed by these animals, and the length of time they can continue in motion without fatigue, must depend in part on this circumstance.

ULCERS ON THE CORNEA.

A VALUABLE paper on this subject appeared in the July number of the Edinburgh Journal. Mr. Wilson, the author, treats generally of those ulcers on the cornea which penetrate the stricture, and permit a discharge of the aqueous humor. This unfortunate occurrence may be known by a gradual failure of sight from morning till night, and a shrivelling of it in the morning; by a shrivelling of the ball of the eye in the evening; or by actual microscopic examination. The first symptoms are ascribed to

the circumstance, that the humor is discharged in the greatest quantity when the eye is in motion, and the well-known physiological fact, that this humor is reproduced with great rapidity. In the treatment of ulcers on the cornea, Mr. B. comes to the following conclusions:—

“1. Caustic ought to be very cautiously applied in ulcers of the cornea; for if, by its incautious application, repeated sloughs are formed, an opening will be made through the whole thickness of the cornea, and the eye will be exposed to the destructive changes of structure above described.

“2. When protrusion of the iris takes place from a sloughing ulceration of the cornea, no attempt should be made to replace it into its natural position. It is rather to be considered a fortunate event, as the only way by which the further destruction of the eye may be prevented.

“3. This natural process by which a breach in the cornea is repaired, may, in some cases where the evacuation of the eye is threatened, be advantageously imitated by art. This might be accomplished by making pressure upon the eyeball, or a small hook might be introduced through the opening in the cornea, with which a portion of the iris might be drawn out and strangulated so as to adhere. In performing this operation, care should be taken to draw out the ciliary rather than the pupillary part of the iris, in order that the size of the pupil may be diminished as little as possible.”

ACTION OF THE ARTERIES IN THE CIRCULATION.

THE question as to the seat of the motive powers which produce the circulation, has been more or less agitated ever since the time of Harvey, and seems likely to exercise the

ingenuity of physiologists for a considerable period. Among other doubts, it has been doubted whether an actual dilatation of the arteries occurs among the systole of the heart. To determine this point, some ingenious experiments were made by M. Poiseuille, of Paris, on the carotid ar-

tery of a horse. The result of these was, that at each pulsation the capacity of the vessel was increased by about a thirtieth part. Of course, during the diastole, the artery restored itself, by its elasticity, to the same diameter which it previously possessed.

BOSTON, TUESDAY, SEPTEMBER 8, 1829.

ANTIQUITY OF SMALLPOX.

THERE is certainly no subject connected with medical science, which, in proportion to its real importance, has been more earnestly and zealously investigated, than that of the analogy which may be traced between ancient diseases and those which constitute the nosology of modern times. Not only have the medical works of former days been most carefully translated and commented on with this view, but there is scarce a passage in any sacred or profane author descriptive of disease, but it has been so amended, explained, and amplified, as to become a complete description of some modern malady. Indeed, so great has been the ingenuity of some commentators, that all difficulties have vanished before them; and such their confidence, that neither the acknowledged ignorance of their authors in medicine, the paucity of the facts detailed, nor the ambiguity of the language in which they are described,—an ambiguity almost inseparable from the terms of science in the more ancient languages,—can inspire them with any doubt as to the accuracy of their conclusions. This, however,

has generally been noticed where there was some peculiar theory, a priori, to be supported. Men of learning, not biassed in this way, have acknowledged the difficulty attending these investigations; and the diversity of results obtained by different persons from the same premises, bear ample testimony to the sincerity of the confession.

These remarks have been suggested to us, in the present instance, by some speculations of Dr. Baron, the distinguished author of the life of Jenner,—the object of which is to show that the disease of smallpox, instead of being, as is generally imagined, of comparatively modern origin, has in fact existed from the earliest times, and certainly as far back as the days of Moses. Whether this point is sufficiently made out or not, we will not say; but some of the citations on which he builds his theory, appear to afford to it but a slender foundation. He finds smallpox in the boils inflicted on the ancient Egyptians, smallpox in the pestilences of ancient Rome, and smallpox in the plague of Athens. In respect to the first discovery, we apprehend the Doctor is indebted

for it, in a considerable degree, to his own imagination. In point of probability, it is very much upon a par with the irreverent suggestion of a late writer on syphilis, who conjectured that the malady with which David describes himself as afflicted, (Ps. 38,) could be no other than the one at present known by that title.

To suppose that a disease expressly recorded as miraculous, and as visited on a people for their punishment, was entailed on mankind from that period, although no allusion is made to such a fact in the sacred history, and no trace can be discovered of anything similar for a thousand years after, certainly seems a little extravagant. As for the pestilence which so often visited Rome, the accounts of it by the historians are too vague to warrant any precise inference, and many circumstances which must almost necessarily have been noticed in smallpox, are omitted. The plague of Athens is more accurately described by Thucydides, who possessed peculiar advantages, and probably recorded what he saw in language which, to those for whom he wrote, was perfectly clear and unambiguous; yet, as translated into English, his description conveys but an imperfect idea of the precise symptoms. The most striking and exact portion of it, is thus rendered by Dr. B. :—"Some persons, from no ostensible cause, but on a sudden, being in health, were first seized with violent heats of the head, and redness and inflammation of the eyes; and as to the interior of the head, the throat and tongue were immediately bloody, and the breath emit-

ted, bad and foetid. Next after these symptoms, sneezing and hoarseness came on, and in a little while the disease descended into the chest, with a violent cough. And when it settled in the stomach, it both turned it, and all offscourings of bile that have been named by physicians succeeded, and these with great distress. The greater part were affected with a fruitless hiccough, attended with strong spasm; with some, having immediate interval of ease, with others much later. And the body to the outward touch, was not very hot, neither was it pale; but somewhat red, livid, effloresced with small pustules and blotches." That some of the phenomena above mentioned are also those of smallpox, is certainly true; but the resemblance is by no means sufficient to determine the identity of the diseases, even making some allowance for the change which smallpox may have undergone in the course of transmission through a series of generations. A person disposed to prove that a severe form of measles or scarlet fever existed in former times, might find many points in the description of Thucydides to confirm his theory; and it is only by coming to the examination of such subjects with a mind wholly unprejudiced, that any one can hope to arrive at just and correct conclusions.

ANATOMICAL DISSECTION.

MR. WARBURTON'S bill for the regulation of anatomical schools in England, while its fate was uncertain, found very various degrees of favor in the eyes of different individuals of the profession. Its failure, however,

will check the cavils of its opposers, and will probably be regarded as a misfortune by the whole medical community. Its provisions were briefly as follows:—That a commission should be appointed, to consist of not more than seven persons, the majority of whom should be non-professional, and none of them engaged in any school of anatomy. These commissions were to have the power of granting licenses for the establishment of anatomical schools, of inspecting the mode in which they were conducted, and of forming a code of laws for their due regulation. That no person should keep a school for dissection of human bodies, or perform such dissection, or permit it to be performed, in any place belonging to him, without license from this commission, under penalty of one hundred pounds. That, whenever any person died in a prison, hospital, or workhouse, and the body was not claimed within three days by any friends or relatives, it should be lawful for the person having the care thereof, to deliver the same to any party duly licensed as above, for the purpose of dissection. That, if any person, during his life-time, by writing or before witnesses, declared his wish to be dissected after death, it should be lawful for his administrators, if they saw fit, to deliver up the body for that purpose. That, to any person wishing to dissect privately, not being connected with any school, the commissioners should be authorized to grant a license for a sum not exceeding two pounds. That every person receiving a body for dissection, should receive with it a minute

of the date of delivery, of the name, age, sex, and place of abode of the deceased, and enter the particulars on a book to be kept for the inspection of the commission. That the remains of every body after dissection, should, at the expense of the party dissecting, be enclosed in a separate coffin and interred with the rites of Christian burial, and an entry be made, in the parish register, of the date of burial, the name, age, and abode of the deceased, and the name of the officiating minister.

Such is a brief outline of this bill, which, in its technical form, includes eighteen separate enactments, and presents to the legally unlearned reader, a somewhat formidable and forbidding aspect.

We have said that there existed concerning it considerable discrepancy of opinion; and we may add that, on the whole, it was not viewed with much favor by those for whose benefit it was intended. Some inconvenience and difficulty were apprehended from the mode proposed for the granting of licenses; and the provision for the burial of the dead was regarded as useless and cumbersome. Such as it is, however, it would certainly, in its operation, have tended to prevent those gross outrages which the cultivators of anatomy are obliged to commit or encourage, and remove many of the obstacles which now oppose themselves to the acquisition of that science. The subjects were to be obtained from the prisons, hospitals, and almshouses,—all institutions supported at the public expense,—and the former because their inmates are

guilty of crimes which render them unworthy to associate with their fellow-men. Three days were allowed for the application of friends, and during this time the body might be taken by any person who claimed it, for interment. The provision which regards the minutes to be kept by the dissector, made it necessary for every one having a subject, to be ready to show that it came fairly into his possession; and the penalties affixed to the violation of this and the other provisions, were such as might be supposed to ensure their faithful execution. On the whole, it is the last effort for the legislative protection of anatomy abroad, that will probably be made for a long period; and the friends of humanity may well lament that it should have been attended with so little success.

SUBCARBONATE OF AMMONIA.

Its Effect on the Cutaneous Functions.

THE value of the Subcarbonate of Ammonia in diseases of the skin is but very partially known. Dr. Wilkinson wrote a pamphlet recommending it several years ago; but his praises were so extravagant, and his cases of cure so wonderful, that his work never received, we apprehend, the credence and general perusal which it merits. We have often found chronic diseases of the surface, which could not be reached by ordinary remedies, extremely ready to submit to the power of Ammonia. It should however be given in much larger doses than usually prescribed, and these should be repeated more frequently. By way of illustrating

this subject, we beg leave to refer the reader to the following satisfactory, and by no means extravagant case, which recently occurred at the Hospital St. Louis at Paris.

“P. M., 38 years old, emaciated, and of a very weak constitution, observed, in the month of July, a particular eruption on his forehead; this having been suppressed for a time, by a nostrum, the composition of which was unknown, soon returned again, with a tendency to form ulcers, and began to spread over the whole body. On his admission into the hospital in September, under the care of M. Biett, he was in the following state:—Almost the whole of his body, but especially the inferior extremities, were covered with ulcerating pustules of different sizes; in the centre of each pustule there was a prominent, black, very hard crust, surrounded by a white ulcerating margin; the epidermis round the ulcers presented a copper-colored defined areola. In these pustules, where the crusts had been detached, the surface was excavated, much indented, and covered by greyish-white tenacious matter; the skin between the pustules exhibited livid blotches, the scars of former ulcers. The patient had, in 1814, successively been affected with gonorrhœa, chancre, and bubo, and had never had recourse to a proper mercurial treatment; he was married, and his wife, who had borne several healthy children, had never presented any signs of infection. His general health was good.

“M. Biett, having for some time employed cinnabar fumigations, and the alkaline bath, prescribed the Subcarbonate of Ammonia, from the use of which he had, in similar cases, observed very satisfactory effects. The patient took a drachm daily; and this being borne very well, and without the least disturbance of the digestive organs, the dose was after-

wards increased to two and even to three drachms. The crusts were gradually detached, and the excavated ulcers became more superficial and assumed a healthy appearance; so that the patient, after having used the Subcarbonate of Ammonia for twenty days, was perfectly cured."

PREGNANCY, COMPLICATED WITH MALIGNANT TUMORS.

ROSALIA JULIEN was married in 1822, at the age of 27, and after the lapse of three months, miscarried, the fœtus apparently of about six weeks. Nine months after this her husband died. The widow, greatly affected, suffered from derangement of health; she observed, notwithstanding the menses were regular, that her abdomen increased in size; a sense of weight obstructed her in walking, and she had frequent desire to pass her urine. In the course of three years, the size of the abdomen increased slowly, and at the end of that time it assumed the appearance of a person about four or five months gone with child. M. Troussel, consulted in 1826, recognized in the hypogastric region a hard, round, indolent tumor, dipping down into the pelvis, easily detected by the touch either through the rectum or vagina, having about the size of the head of a full-grown fœtus. This tumor had depressed the uterus, but without deranging the menstruation, or disordering any of the other functions. From the above period the abdomen did not increase in volume, the general health continued good, and, in January, 1828, the woman was married again. In the month of April following, there was reason to suspect pregnancy: the abdomen enlarged so as to make walking troublesome; shooting pains in the hypogastrium, particularly on the right side, took place: nevertheless, the condition of the uterus could not be ascertained. The belly continued to increase, especially on the right side; the patient was obliged

to remain in the recumbent posture; the pain became more frequent and severe; sleeplessness, emaciation, fever, and diarrhœa ensued; and death took place on the 5th of September, 1828. On opening the body, the abdomen was found almost entirely occupied by an enormous tumor, of from 13 to 15 inches in diameter, having a fibrous appearance, and presenting within it several isolated cavities, formed in a scirrhous, encephaloid tissue, of a reddish white color, and of a variable consistence; the uterus was pushed into the left side of the abdomen, and contained a fœtus of four or five months. In the parietes of the uterus, four small tumors, of a fibrous nature, were found. The large swelling had been developed between the two layers of the broad ligament; it adhered to the uterus, for a considerable extent, by a dense cellular membrane, and by a kind of pedicle, short and broad, about an inch across, of a fibrous nature, intimately united to the fibres of the uterus, and fixed to the right side of that organ near the insertion of the vagina.

The reporter makes no mention of the relations of this tumor with respect to the ovary of the same side; but, from its situation, it may be presumed to have had its original seat in that organ.—*Bul. des Sc. M.*

Extirpation of the left Ovarium.—A woman, 38 years of age, had borne five children in the space of seven years. After her fourth delivery, she suffered from inflammation of the womb: from that period she complained of a dull pain in the left side of the hypogastrium, and about a year and a half after her last confinement, she perceived a small tumefaction on the left side: a few sulphur baths caused it nearly to disappear for a time, but latterly it had extended over the abdomen. Two years subsequent to this, her menses were followed by a malignant fluor albus, which added to the debility already

induced. Dr. Chrymer having decided on the nature of the affection, and the patient having consented to the operation, it was performed by making an incision from the xyphoid cartilage to the pubes, leaving the navel to the right. The opening made into the peritoneum caused a prolapsus of a great part of the intestines: they were immediately enveloped in a warm and moist cloth. The adhesions of the tumor to the peritoneum and to the edge of the pelvis were then divided, and a double ligature was applied to the pedicle of the tumor attached to the broad ligament, which was divided an inch below the ligature. The intestines, which had been wrapped in the towel about five or six minutes, were then replaced within the abdomen, the serosity accumulated in the pelvis was wiped off with a sponge, and the wound closed by suture. The operation lasted a quarter of an hour, and the patient lost only a few ounces of blood. An emulsion, containing nitre, was ordered immediately, and hiccough, with cold shivering, showing themselves after some little time, some doses of laudanum were administered. The cure was not interrupted by any accident, and at the end of six weeks the woman returned to her native place. Since this operation she has borne a healthy child. The tumor weighed eight pounds, exceeded in size the head of a child, was irregular on its surface, livid in some places, and within, presented cavities, some filled with a fluid of the consistence of honey, and others with a greenish and sanious liquid.—*Graefe & Walthe's J.*

Five cases (of which the above is the fourth) wherein operations for the extirpation of diseased ovaria were either attempted, or actually performed, are published in the "Archives Générales" for May. The above case was successful. In the first, the tumor was so attached that the extirpation could not be performed; the abdomen was there-

fore closed, and the woman escaped with difficulty from the consequences. In the second, the patient died thirty-six hours after the operation. In the third case, also, the patient perished at the same period. In the fifth case, the tumor was so firmly adherent that it could not be removed, but the operator cut away the sac, and was under the necessity of securing some arterial branches. The woman died in thirty-six hours.

Observations on the Influence of Cold on New-born Children.—Dr. Trevisan has been making researches in Italy, principally at Castel-Franco, analogous to those of MM. Villermé and Milne Edwards in France. The conclusions at which he arrives, are,—1. In Italy, of 100 infants born in December, January, and February, 66 died in the first month, 15 in the course of the year, and 19 survived;—2. Of 100 born in spring, 48 survive the first year;—3. Of 100 born in summer, 83 survive the first year;—4. Of 100 born in autumn, 58 survive the first twelve months. He attributes this mortality of the infants solely to the practice of exposing them to cold air a few days after their birth, for the purpose of having them baptised at the church. As well as MM. Milne Edwards and Villermé, Dr. Trevisan calls the attention of the ecclesiastical authority to measures suited to put a stop to such disasters, without violating the precepts or practices of religion.—*Brande's Journal.*

Fatal Mistake in a Prescription.—When we consider the hurried manner in which medical men often write their prescriptions, it appears wonderful that so few mistakes should occur; nevertheless, the following case will show the necessity of caution, and the propriety of the physician *invariably* reading over his prescription with care, before he sends it to the chemist.—Dr. B., of Montague, states, that he was consulted

about a child on the 26th of May, for whom he recommended ten grains of sulphate of quinine in a lavement. In writing his prescription, however, he inadvertently substituted the word MORPHINE for *Quinine*. The injection was administered, and the child died in a few hours! It is creditable to Dr. B. to give publicity to the fact, as a warning to others; and the manner in which he expresses himself shows the indelible impression which the event has made on his mind.

Death from Phosphorus.—A chemist at Biel, wishing to make experiments on the action of phosphorus, took a grain of that substance with sugar on the 20th of October last. Next day he took two grains; and on the 22d, three grains. Towards evening he experienced great uneasiness, particularly in the abdomen; but these symptoms he unaccountably attributed to rheumatism, and employed no remedies. On the 24th, he was seized with constant vomiting, and the matters ejected had the odor of garlic. Medical assistance was now called on, but without avail: inflammation of the alimentary canal took place; on the 29th he had spasms, and the left arm became paralyzed. He was delirious, and soon after expired, having fallen a victim to his incautious experiments.—*Med. Gaz.*

Anomalous Vertebral Artery.—M. A. Meckel, of Berne, on opening a dead body, observed a curious case of the above kind. There were three vessels on one side: the first, of middling size, arose from the posterior part of the subclavian, where it usually takes its origin; the second, larger in size, arose more deeply from the anterior portion of the same vessel; and the third, which was considerably smaller, was a branch of the inferior thyroid. These three vessels united above the transverse apophysis of the fifth cervical vertebra, and then formed one vessel,

which pursued its usual course to the head.—*Archives Générales.*

Singular Case of Cataract.—A robust peasant, about 60 years of age, who had never experienced any ill health, except slight attacks of gout, was occupied in cutting wood in a forest, when he was suddenly seized with a dimness of sight, which gradually increased till, at the expiration of a few hours, he was entirely blind, and obliged to be led home. He had no pain, and there was no inflammation visible. In a few days after, he was seen by Dr. Wondelstrom, who found that both eyes were affected with cataract. The operation of extraction was performed.—*Swedish Journal.*

Curious Phenomenon.—While the workmen were employed in laying and soldering the iron pipes for conveying water, in Winchester, Va., a few days since, "electric shocks were produced to such a degree as to cause them to discontinue their labors during the remainder of the day. Several citizens who were standing by, got into the ditch and tried the experiment, when the effect was the same on all." The pipes are united in the same manner as those in this city; and the Winchester Republican remarks, that "it was in driving closely the soldering lead that the shock was produced. The sun was nearly vertical, the thermometer at 93 degrees, the ditch somewhat damp, and the pipes warm from the action of the sun upon them. The principle is no doubt that of galvanism."—*Dem. Press.*

REPORT OF DEATHS IN BOSTON,

The week ending August 29, at noon.

Of bilious fever, 1—consumption, 3—canker in the bowels, 1—dropsy, 1—disease of the spine, 1—debility, 1—dysentery, 1—drown, 1—intemperance, 1—measles, 7—old age, 2—paralysis, 1—unknown, 2. Males, 10—females, 14. Stillborn, 1. Total, 25.

ADVERTISEMENTS.

CARTER & HENDEE have just published,—The Constitution of Man, considered in Relation to External Objects. By **GEORGE COMBE**.

From the Preface to the American edition.

“Mr. Combe’s work should be placed with those, of which so many within a few years have appeared, which are devoted to the all-absorbing topic of Education. It treats of moral, intellectual, and physical education. This is not formally done under so many distinct heads. But the whole course of reasoning of the author, and the whole array of all his illustrations, have it always obviously in view to show how the highest cultivation of each of these may be most surely brought about.

“The publishers have printed this edition from a belief that there is much in the work to interest the community.

“It has a novelty to reward the general inquirer, and it presents the well known under novel aspects. There is one class amongst us who may study it with much advantage. Scholars are referred to, a class here too small to form a distinct order with habits of their own, and who insensibly fall into those which, although not mischievous, to the multitude on the score of health, too often make ill health the portion of the sedentary student, and bring upon him premature decay.—To all classes it is recommended, and the various learning and acuteness of the author well fit him to write a book which addresses its instructions to the whole community.”

Sept. 8.

CONSOLIDATED COPAIVA.

“**COPAIVA** may be given in this form without the least inconvenience. Neither communicating taste, nor imparting odor to the breath, it is also retained without the least disquietude or uneasiness to the stomach; and I am informed by Dr. Rosseau, that in large doses it does not purge.”—*Phil. Journal of Med. Sciences.*

See an article in this Journal, Aug. 18th.

OIL OF BLACK PEPPER.

This is a much more active preparation of Piperine. One drop is fully equal to six grains of the latter. It is a valuable adjunct to Quinine. One or two drops, added to six grains, will greatly increase the efficacy of that medicine.

For sale by **NATHAN JARVIS**, 183 Washington Street, where Physicians will find medicines at as reasonable terms as at any place in Boston.

Aug. 25.

eoptf.

A TREATISE on the Scrofulous Disease, by **C. G. HUFELAND**, Physician to the King of Prussia, &c., translated from the French of M. Bousquet, by Charles D. Meigs, M.D., is just received and for sale by **CARTER & HENDEE**.

Sept. 8.

EUROPEAN LEECHES.

RICHARD A. NEWELL, Druggist, respectfully acquaints the physicians and families of the city, that he has made arrangements with one of the first mercantile houses on the continent, to be regularly supplied with the Genuine Medicinal Leech. He has now on hand a fresh supply, just received, which are for sale.

N. B. The difficulty of obtaining genuine Leeches by the usual way has induced him to make the above arrangement at considerable expense, and he hopes it will meet the approbation of the medical faculty. Summer-street, opposite Purchase-street.

Sept. 1.

3t.

BERKSHIRE MEDICAL INSTITUTION.

THE Annual Course of LECTURES will commence on the first Thursday in September, and continue fifteen weeks.

Matriculation ticket, \$3. Fee for Lectures, \$40. Library ticket, \$1. Graduation, \$15.50. Board, including washing, lodging and room, \$1.75 a week.

Pittsfield, July 22, 1829. aug4tsept30

EUROPEAN LEECHES.

CHARLES WHITE, No. 269 Washington street, corner of Winter street has just received a fresh supply of EUROPEAN LEECHES, extra large and in prime order. Also, by the late arrivals, a general assortment of MEDICINE.

** Strict personal attention paid to Physicians’ prescriptions and to the compounding and delivery of Family Medicine, and all favors gratefully received.

Sept. 1.

THE BOSTON
MEDICAL AND SURGICAL JOURNAL.

Vol. II.]

TUESDAY, SEPTEMBER 15, 1829.

[No. 31.

I.

GODMAN ON TIGHT LACING.

*Injurious Effects of Tight Lacing
on the Organs and Functions of
Respiration, Digestion, Circulation,
&c.*

IT is not without hesitation that the writer ventures to call attention to the injuries produced by TIGHT LACING, being well aware that he is exposing himself to the chance of severe animadversion for appearing to meddle officiously with the concerns of the fair sex, who never fail to punish every encroacher upon their rights and privileges. Notwithstanding, as our object is, if possible, to avert great suffering and much future misery, by setting forth the evils following manifest abuses, introduced and augmented by fashion, we hope due indulgence will be extended by our fair readers, whose real good we are most solicitous to promote.

The observations of various authors have satisfactorily shown, that certain errors in dress and exercise induce deformity of person and unhappiness of mind; but their attention is almost entirely devoted to the injuries done to the organs of support and motion, the bones and muscles.* Great as are the evils they treat of, they seem slight when compared with the

pernicious effects of similar causes, on organs more immediately essential to the life of the individual, the disarray of which, though not signalized by very obvious deformity, is inevitably followed by protracted debility and suffering, an early, rapid decay, or a painful and premature death. It is impossible for a benevolent mind, acquainted with the reality and extent of the mischief thus produced, to behold youth, grace and beauty sacrificing the dearest boons of life to the tyranny of perverted taste and preposterous fashion, without experiencing emotions of profound regret for the immediate victims, and sighing for the future condition of a posterity derived from such a parentage!

In what way can the hitherto irresistible torrent of fashion be stemmed? Have not reason and experience been appealed to in vain? Have not the shafts of satire, the serious remonstrances of morality, and even the awe-inspiring declarations of religion, too often fallen ineffectual to the ground? One mode of producing the desired conviction in the minds of females, has been left almost unattempted; and from the operation of this method much is to be hoped. It is by imparting to "nature's last, best work," a sufficient knowledge of the peculiar construction of the human system, to place in the clearest light the dreadful risks

* See the works of Shaw, Duffin, &c., on Deformities of the Spine, &c.

those run who indulge in the vices of dress, and the cruel maladies which are certainly induced in delicate frames by such as persist in disregarding the warnings offered by reason and science. To us it appears scarcely possible that a female of ordinary intelligence can become even superficially acquainted with the curious actions necessary to the processes of breathing, circulation, and nutrition, without shrinking in terror at the thought of the dangers to which those are exposed, who intentionally counteract nature in all her benevolent designs, by violently compressing their persons, according to whatever model capricious and ever-varying fashion may dictate.

That part of the human frame most immediately subjected to tight lacing, is not only one of its most lovely external proportions, but contains and defends the organs so important and indispensable to existence, the LUNGS and HEART, which perform the functions of respiration and circulation, to purify and perfect the blood, and send its rich and vivifying streams to the remotest extremities of the system. On the perfect action of these great organs depend all our vigor and elasticity; the roseate bloom and radiant eye of beauty; the joyous buoyancy of youth, and the steady sereneness of maturity. When these functions are impaired, pallid features, anguishing debilities, melancholy depression of spirits, agonizing decay, and a long train of ghastly maladies, destructive of hope, and rendering life a burthen, must necessarily ensue.

The part of our structure to which allusion is made, is popularly called "the chest;" and to judge them by their practice, many of our fair countrywomen regard it

as a mere empty, flexible case, which may safely be squeezed into whatever compass the possessor pleases. Unfortunately for them, this is far from the reality; the chest is an admirably complex contrivance, whose free motions are as necessary to breathing and circulation, as these processes are to health and life. Consequently, whatever diminishes the capacity of the chest, proves directly injurious by excluding the air, and every impediment to its movements prevents the proper transmission of the blood through the lungs.

* * * * *

As all the parts described [those concerned in forming and filling up the chest] are flexible and moveable from their peculiar nature and connections, it is obvious that the first effect of any tightness or constriction will be to impede their proper motions, and thrust them out of their natural position. Thus, the corset being laced tightest at the part of the chest having the shortest ribs, the longest and most flexible cartilages, and the most extensive motion, produces narrowing of the chest, renders its free movements impossible, and permanently deforms it by doubling the cartilages inward near their junction with the breast bone. As if this mischief were not great enough, another instrument of torture is added in the form of a steel or hickory *busk*, which is pushed into its sheath in the already too tight corset, immediately over, and extending along, the whole length of the breast bone. This busk is to keep the body from bending forward in the centre, and to prevent the dress and corset from "hooping up," as it is called. As the body cannot possibly be prevented from leaning forward to a certain de-

gree, the consequence is, that the whole weight of the superior part is sustained upon the lower part of the breast bone, which leans directly against the busk, at a point where it is least supported by the attachment of the cartilages of the ribs. The point thus injuriously pressed upon, is nearly opposite the lesser end of the stomach, and most of those who habitually lace tight, have a depression here, which would contain the size of half an egg. Either a constant feeling of aching and soreness is experienced at this point, or when the busk is taken out, it is so sore and painful that the individual cannot bear the slightest pressure without an exclamation of distress.

We have, then, among the first effects of the tight lacing and pressure of the busk, impairment of motion and deformity of the chest, accompanied by a constant soreness and irritation over the stomach, whose undisturbed action is one of the greatest essentials to health. If, however, this was the sum of the evil, we might regard it as tolerable, being apparently external. But when the lower part of the chest is compressed, the liver is by the same force squeezed upwards and inwards, and, being a large and solid body, it pushes before it the diaphragm, and forcibly prevents its descent in the act of breathing; while on the other side, the spleen and stomach are forced upwards, producing a similar effect on the diaphragm; and the functions of all these organs, the liver, stomach, and spleen, must be impaired in proportion to the pressure and displacement their delicate nerves and vessels suffer. In addition to these greater or more obvious injuries to the functions of individual organs, we may now add the evils caused

to the great vital functions. The same pressure which forces the liver, &c., inwards and upwards, by squeezing the texture of the organs together, prevents the free entrance of the blood into them, and by being thrust firmly back against the spine and lower part of the diaphragm, they compress the openings by which the blood passes to and from the heart, through the great vein and artery. The consequence of thus damming up the vital current, is the gradual development of irregularity of action in the heart, palpitations, tendency to faint, violent throbbings, and in some cases organic alteration in the heart itself. This same tightening of the lower part of the chest, and prevention of the enlargement of its cavity by stopping the descent of the diaphragm, acts with equal injury on the blood which should descend from the great veins of the head and arms to the heart at each breathing. The proper quantity of blood cannot be delivered therefrom, for want of proper dilatation of the chest, and the individual is subject to violent headaches, dulness, low spirits, extreme paleness, or leaden hue of countenance.

These readily observable consequences are but the commencement of ills from this source. The lungs being withheld from their proper actions by not being sufficiently dilated, the air cannot get access to the blood, and the blood cannot receive that purification or elaboration which renders it fit to sustain the body in health. Its watery, carbonaceous, and other impurities, are retained instead of being thrown off, and in place of a brilliant vermilion-colored fluid being sent to the left side of the heart for the general system, it returns of a dark

or bluish red, scarcely better than when it entered the lungs, and almost utterly unfit for any of the purposes of life. This condition, if kept up, is soon made sensible by defective energy in all parts of the body, by various local diseases, and slight morbid changes, sufficient to render life irksome. Cold extremities, pale visages, troubled sleep, excessive mobility of system, commonly called *nervousness*, evinced by great agitation from very inadequate causes, &c., are among the most generally obvious consequences of such impairments of function.

(To be concluded next week.)

II.

EPILEPSY.

DR. EPPS, lecturer on chemistry, has published an interesting case of epilepsy, in which he successfully prescribed the sulphate of quinine. The patient, a youth about seventeen years of age, the day after having been exposed to much rain, was seized with epileptic fits, which continued, with slight cessations, during the greater part of the day. Since the first attack (a period of two months), he had not passed a day without a fit, which came on *every morning* about nine o'clock. This circumstance indicating, in Dr. Epps's opinion, "an analogy between this species of epilepsy and intermittent fever," induced the Doctor to prescribe the sulphate of quinine. In order to prepare the stomach for its exhibition, the Doctor ordered the following powder:—

Take of Carbonate of Ammonia, 1 gr. ;
Ipecacuan Powder, $\frac{1}{4}$ gr. ;
Comp. Jalap Powder, 7 gr. ;
Rhubarb Powder, 10 gr. Mix.

Six grains of sulphate of quinine, with one grain of cinnamon powder, were administered the following day, at seven o'clock in the morning, and he was directed to take a cup of coffee about eight. By this practice the patient was cured. Dr. Epps also notices a case of periodical epilepsy, in which the sulphate of quinine succeeded in the practice of Mr. Mantell, an experienced surgeon of Newick, in Sussex. The patient ("a fine girl") was about thirteen years of age. The fits being preceded by giddiness and severe pains in the forehead, and the sanguiferous system being plethoric, Mr. Mantell "bled her from the arm, and prescribed a brisk purgative and a blister to the nape of the neck." The sulphate of quinine, in the dose of two grains three times a day, effected a cure.

Dr. Wedemeyer, a physician of Hanover, relates the case of an epileptic patient, who, after the use of nitrate of silver for eighteen months, was completely cured; but the skin, as generally happens in cases of this kind, became of a dark lead color. Some time afterwards the patient died from disease of the liver and dropsy. On examination of the body, the plexus choroides was of a dark blue color; and some of the viscera having been submitted to a chemical analysis, were found to contain a considerable quantity of silver.

About three months ago, we opened a gentleman who died of extensive disease of the lungs and of the spleen. On examining the liver, we were surprised to find the peritoneal covering of the under portion of the right lobe of a peculiarly dark lead color. The

substance of the liver was perfectly healthy. We have since ascertained the fact, that he had for some time been taking the nitrate of silver, under the direction of a physician, for morbid sensibility of the stomach. The skin was not in the slightest degree tinged by it.—*Gaz. of Health.*

III.

MELÆNA WITH HARDENING OF THE PANCREAS.

UNDER this head, a very interesting case of gastric and abdominal disease, accompanied with discharges of blood from the stomach and bowels, is related by Dr. Schirlitz in *Rust's Magazine*, No. 3, 1829.—Mary M., 51 years old, slender make, and of a meagre habit, with a jaundiced hue of the skin, had, from her 15th year, suffered frequent attacks of pain in the stomach, extending towards the back, accompanied with a vomiting of a watery fluid. The patient had ceased to menstruate for about a year. The discharge had always been trifling, and attended with pain in the loins. In the commencement of July, 1827, the pain in the stomach augmented greatly in violence. She had taken a variety of remedies without the advice of a physician. Dr. S. saw her, for the first time, September 12th, 1827. She was lying in bed, her knees drawn up to the abdomen, complained of a severe pain in the epigastrium and left hypochondrium, and was greatly exhausted. She had constant eructations, had twice vomited blood, and passed a quantity of the same,—black, coagulated, and of a fœtid smell,—by stool. There was a very distinct

pulsation at the epigastrium. Besides these symptoms, she was subject to horripilations, cold clammy sweats, violent pulsation of the heart, frequent faintings, ringing in the ears, and constant dragging pain at the spine. Her breathing was short and attended with a dry cough, and her pulse small and scarcely perceptible, disappearing under the fingers. Cold applications were directed to the epigastrium, and internally acetic ether, with sulphuric acid and water for drink. By this, the disposition to faint was entirely removed, and the pulse somewhat raised. In the evening, the abdomen was tumid, and the epigastrium very painful. Tamarind water with cream of tartar for drink, and an injection of whey. On the 16th, severe eructations: about six ounces of blood discharged by stool. The patient had taken some thin soup, which caused severe pain of the left hypochondrium, extending to the loins. The pulsation at the epigastrium was so considerable as to be perceived by the eye; pulse small, 90 in the minute. Seven leeches were applied to the anus. September 22d.—During the four last days, three discharges per anum, of a black bloody fluid resembling tar. The patient is now only able to lie on the left side; great debility; pulsatio epigastrica considerable; great thirst; frequent, small pulse; severe pain in the left hypochondrium. The symptoms continued pretty much the same, the vomiting of blood being occasionally repeated, with discharges per anum of an offensive tar-like fluid, until the 25th, when the fœces became natural in consistency and color, and the patient was able to turn on the

other side. To relieve the pain which still continued, from six to eight drops of laudanum were directed during the height of the paroxysm. Whey clysters were administered, and a solution of acetate of potassa, with ext. tarax. et gram., by the mouth. The patient had now from two to three natural stools per diem. On the 7th of October, the vomiting of blood returned, with the morbid discharges from the bowels already alluded to. There was constant pain of the epigastrium; the pulsation at the latter very considerable before each attack of vomiting; the abdomen tumid, but soft. From constant pain and loss of sleep, the patient now sunk rapidly. She could lie only on the right side, with her knees drawn up. On the 12th, a quantity of blood was discharged from the stomach, and on the 13th she died.

Sectio Cadaveris.—Both lungs adhered to the pleura,—their parenchyma studded with tubercles of the size of a pea. Heart natural, and filled with coagulated blood. The liver without any mark of disease; the gall bladder rather large, and nearly empty. The stomach filled with coagula of blood; its mucous membrane of a deep red color. The mucous membrane of the duodenum studded with numerous black points. The transverse arch of the colon distended; its inner surface covered, as was also that of the intestines generally, with a black, pitch-like substance. The pancreas was somewhat enlarged, and of so firm a texture that the scalpel could scarcely penetrate into it.—*Med. Gaz.*

IV.

TREATMENT OF SCABIES.

Dr. Walter C. Dendy, in his treatise on the Cutaneous Diseases of Children, offers the following remarks on the treatment of this disease:—

IN the treatment of scabies, a multitude of vegetable and mineral preparations have been eulogized by their respective advocates; but of all these remedies, that which has proved most generally efficacious is sulphur, the basis indeed of the majority of formulæ.

In the milder cases, especially of the scabies lymphatica, the internal exhibition of sulph. precipitat. will often be perfectly curative.

In the more severe form, it will be essential to combine the local application of ointment, of lotion, or of fumigation, with this mineral. I will present a few of these formulæ, premising that I consider the first, that of M. Alibert, the most congenial to all the forms of scabies, and the most successful.

R. Potass. sulphuret. ℥j. vel ℥ij.
Aq. fluv. lbj.—M.

R. Acid. muriat. ℥j. vel ℥ij.
Aq. distill. lbj.—M.

Misce ℥j. sing. lotionis aq. font. ℥iv.
et lave spongia.

R. Sulph. sublim. p. 2.
Potass. subcarbon. p. j.
Adip. suillæ, p. 8.—M.

Ima. die utere ℥j.—2da. terties indies.—3tia. balneum tepidum.*

R. Potass. sulph. ℥iv. Aq. dist. lbj.
Acid. sulph. ℥iv.—M. Bis indies pro diebus 6.†

* Alibert.

† Dupreytren.

The soapy sulphureous ointment
at St Louis.

R. Flor. sulph. ℥v.
Ol. Olivæ ℥iv.—Aq. ℥j.
Pot. subcarb. ℥ij.

Solve Potass. aq. tepid.—Adde ol.
deinde sulph.

Adde camphor ℥ij. ad libitum.*

R. Sapon. alb.—Sulph. prec. p. æq.
solve.

R. Sulph. sublim. p. 2.
Potass. purif. p. 1.

Axung. p. 8.—Ter die utend. cum
balneo sulph.

R. Potass. subcarb. ℥ss.

Aq. ros. ℥j.

Hyd. sulph. rubr. ℥j.

Ol. ess. burgamot. ℥ss.

Sulph. sublim.

Adipis. suill. aa ℥ix.—M.†

R. Zinci sulph. lact. sulph.

Baccæ lauri a p. æq.—Ol. 2 s. ut f.
unguent.

R. Hyd. oxyd. alb. ℥j.
Axung. ℥iv.—M.

R. Hyd. muriat. ℥ss.
Axung. ℥ij.—M.*

These two last ointments I have found very efficacious, combined with the sulphur fumigation, in the moderate forms of scabies porcina. In the pustular form, on the contrary, where there is much inflammation, these stimuli are inadmissible, and it will sometimes be requisite to apply for a day or two tepid fumigations, and to give purgatives previous to the employment of more active modes. In the debilitated and cachectic child, it will, of course, be necessary to administer tonics, and it is in this state that the combined employment of mild laxatives, of the sulphur fumigation, and of tonics, will be especially efficacious.

* Mr. Lugot. † At St. Louis.

* Jasser.

BOSTON, TUESDAY, SEPTEMBER 15, 1829.

MOTIVE POWERS OF THE CIRCULATION.

IN our last number we alluded to some experiments of Dr. Poiseuille, of Paris, with regard to the functions of the arteries. We propose, in the present article, to enter more fully into the subject of the circulation, and to lay before our readers the present state of our knowledge on this subject, as augmented by the investigations of the latest physiologists.

What is the motive power of the heart, or the force with which this organ acts upon the circulating fluid, is a point on which there has proba-

bly prevailed as much difference of opinion, as on any other in physiology. Keil estimated this force at five ounces, Hales at 51½ pounds, and Borelli at 180,000 pounds.

The conclusion of Hales was obtained by connecting the carotid artery of animals with a vertical tube, and noticing to what height the fluid ascended in the tube. His calculation, as well as those of the others, has been very carefully examined by Dr. Poiseuille, who shows that the two latter are wholly inaccurate, and their results unworthy of confidence. In the experiments of Hales, the column of blood obtained as

above mentioned, was found to vary from 32 to 116 inches in height; the average assumed by him for man was therefore 90 inches; and as the internal surface of the left side of the heart is equal to 15 square inches, he concluded that the pressure it sustained was ninety times 15 cubic inches of blood, or $51\frac{1}{2}$ pounds. There are, however, two sources of error in this calculation,—one arising from the average taken for man, which may be much too large or too small; and the other from taking the whole internal surface of the heart to represent the area on which the pressure is exerted. The column of blood should be multiplied, not by the area of the inner surface of this organ, but by that of a section through its left cavity, made from the base to the apex. This variation would reduce the result to one-fourth, and supposing the rest of the calculation accurate, to about 13 pounds.

This *static* force of the heart, or the pressure which the internal surface of the left side sustains in its contractions, it was the object of Dr. Poiseuille's inquiries to determine. To do this with exactness, he made use of a tube having a double curvature, and thus presenting a horizontal, a descending and an ascending portion, the turn below being somewhat abrupt, so as to bring the two latter portions near to each other. These two portions are filled to a certain height with mercury, and the horizontal part being adapted, by an ingenious contrivance, to arteries of different calibres, the quantity of the quicksilver displaced, and its rise in the ascending portion, determine the

force with which the blood is propelled from these vessels.

The experiments made by Dr. Poiseuille in this manner, though not strictly uniform in their results, establish one important fact; that the force with which the blood is impelled is not diminished by distance from the centre of the circulation; that it is the same in the large and the small arteries of the same animal; that it also corresponds in the vessels of different animals, notwithstanding their disparity in size and their diversity in situation. Under all these circumstances, the force which impels the blood may be represented by the pressure of a column of quicksilver of six and three-fourth inches in height, and of a size corresponding to the calibre of the vessel. Now since this has been ascertained to be true in animals of different species, and varying in weight from 3 pounds,—the weight of a small dog,—to 600 or 700 pounds,—that of a horse,—it seems not too much to infer that the same calculation is applicable to the human race. If this be admitted, it will follow that the force with which the blood is impelled in any vessel, is equal to the vertical pressure of as many cubic inches of quicksilver as are obtained by multiplying the area of the vessels given by 7,305. To determine what is the area of the vessel which forms the subject of inquiry, it ought to be subjected artificially to that amount of pressure which is assumed as the average. To apply this to a particular case:—In a man 29 years of age, the diameter of the aorta at the level of the semilunar

valves, was found, under a pressure of 6.3 inches of quicksilver, to be $1\frac{1}{3}$ inch. The corresponding area, which is 1.4 multiplied by 6.3, gives 8.88 inches of quicksilver, or about $72\frac{1}{3}$ oz. Avoirdupois, which represents the total static force of the blood in the aorta at the moment of the heart's contraction. And as it has been shown that one of the elements in the above calculation is invariable, it follows that the force which moves the blood in an artery, is in the direct ratio of its area, whatever be the situation it occupies; and that the area of an artery when under the usual pressure being known, the amount of force exerted on its contents by the heart's action, may at once be determined.

Such is Dr. Poiseuille's theory of the force of the heart's action; and disclaiming, as it does, to be absolutely demonstrable, it certainly conveyed to our own mind, at first sight, a full conviction of its truth. The mode of estimating the momentum of the blood is altogether unexceptionable; and the results obtained in this mode from the arteries near the heart, are doubtless a just criterion of the force exerted by that organ on the portion of the sanguineous column which is nearest to itself. The fallacy, if there is any, seems to lie in the inference, that because the blood moves with proportional momentum in other parts of its course, it does so in virtue of the unaided action of the heart. The question is not even stated, much less settled, whether the arteries themselves contribute in any way to keep up this equilibrium of

power. The very point at issue, the point on which a great portion of the disputes in regard to the circulation have turned, is apparently assumed as already determined, and beyond the reach of controversy. This we hold to be an unauthorized proceeding. What Dr. P. has really effected by his investigations on his main subject, is to determine the force with which, in different animals, the heart acts on the blood contained in the aorta; and his conclusion on this point, in regard to man, though confessedly founded upon analogy, seems so very probable, and so little likely to be controverted by more accurate experiments, that we are very willing to admit it as true.

But if the precise question as to the action of the arteries in the circulation has been left untouched by Dr. Poiseuille, it has received from another, and no less able physiologist, abundant consideration. In a learned and elaborate treatise lately published, Dr. Wedemeyer, of Hanover, has examined into the various theories which have been maintained as to the passage of the blood through the arteries and capillary vessels, and records his own investigations and conclusions on both these important topics.

Dr. W. denies that the middle coat of the arteries is in any proper sense muscular. To prove this assertion, he compares its mechanical and chemical properties with those of the true muscular fibre, and demonstrates them to be wholly distinct and widely different from each other. By a similar train of reasoning, Dr. W. satisfied himself that the

arteries do not possess any vital contractility, in virtue of which they act on the blood contained in their cavities. No fibre, unequivocally muscular, is insensible to the stimulus of galvanism. To this rule the heart has been said to form an exception; but later experiments prove that the fibres of that organ contract under the galvanic stimulus. On the contrary, the arteries, under the application of this agent, have remained entirely unaffected. Dr. W., in common with Bichat, views the pulse as produced partly by a change of place, and partly by a slight increase in size; but maintains that this increase, and its subsequent return to its previous calibre, are referrible to the mere property of elasticity, and do not imply any vital contractility on the part of the vessel itself.

In considering the subject of the circulation through the capillaries. Dr. W. adverts to the structure and disposition of the minute vessels, He finds, in common with other inquirers, that the fibrous coat of the arteries becomes less and less distinct as they increase in size, and at length disappears altogether. The same is the case with the inner coat of these vessels; so that at length they terminate in membraneless canals formed in the very substance of the tissues. It is in this way, for the most part, that the communication is formed between the arteries and the veins; a direct communication between them, though occasionally found, being comparatively rare. Such being admitted to be the form of the capillaries, the question, how is the blood carried through them, remains to be

answered. Bichat denies that the heart has any influence on this part of the circulation; but, as Dr. W. thinks, without sufficient reason. When fluids are thrown into the arteries from a syringe, they are found to pass through the capillaries with great ease; in fact, with a degree of force confessedly inferior to that which the heart exerts on the blood during life. Further, it has been asserted by Haller, and the observation is confirmed by others, that the sultatory motion given to the blood by the heart, may be noticed occasionally in the capillaries, and even in the veins. It seems probable, therefore, that under all circumstances, some portion of the momentum which is given by the heart to the blood in the arteries, extends itself to their ultimate ramifications in the substance of the various organs.

But it is not by this direct action only that the heart influences the blood in the capillaries; this part of the circulation is undoubtedly promoted by the suction power of the auricular cavities on the blood in the veins. Dr. Barry, as will be recollected, laid great stress on this suction power, and supposed it to be greatly increased by the vacuum formed during inspiration. This particular view of the subject has not met the approbation of other physiologists; and Dr. W. opposes it in a series of ingenious and apparently conclusive arguments. The true suction power of the heart is independent of respiration, arising from the dilatation of the auricles, and exerted synchronously with the pulsations, as has been proved by actual

experiment. The amount of this, however, is very inconsiderable, and the effect thus produced on the capillary circulation scarce worth estimating.

The next object is to determine the degree of vital contractility possessed by these vessels, and whether it is by virtue of this property that they propel the blood. The result of experiment on this point is decidedly against such a supposition. By the application of certain stimuli, contraction was produced in the minute arteries and in the capillaries of animals, but not such contraction as could be supposed, under any circumstance, to propel the blood; and there is no proof that any such takes place in a natural state of the circulation. On the contrary, when the web or mesentery of the living frog was examined with the microscope, no change could be observed in the diameter of the smaller arteries or capillaries. Dr. W. concludes, therefore, that the circulation in these vessels is wholly unaided by any such contraction.

In view of the difficulties which are met in attempting to explain the capillary circulation, some physiologists have proposed the opinion that the blood moved in these vessels, not in virtue of any external force acting on it, but by an innate power of motion possessed by itself. This doctrine, opposed as it is to received principles in regard to the animal fluids, has had its zealous and able advocates, and is not without some support from well established facts. On the whole, however, the arguments in its favor do not seem very

conclusive, nor need we recapitulate those which have been adduced in answer. The true explanation of the facts, so far as we are able to give any, is to be found in the vital attractive force residing in the tissues, by which the blood is drawn toward them, and which is itself regulated in its degree of energy by the nervous system. The permeability of living tissues has been amply illustrated by Magendie; and the experiments of Dutrochet on the transmission of fluids through organic membranes, bear full testimony to the development, under certain circumstances, of the vital attraction referred to. What is the amount of this during life, and what degree of power it exerts in propelling the blood through the minute vessels, is matter of mere hypothesis. Dr. W. himself confesses his conviction that it cannot be regarded as a moving power of any considerable consequence. It will be seen, therefore, that the results obtained by the labors of this individual, valuable as they are to us and creditable to him, add little to our means of explaining the motion of the blood from the point where the influence of the heart may be supposed to cease. They are almost wholly of a negative character. While they prove the insufficiency of the explanations hitherto given of this process, they fail to substitute in their place any, more definite or more probable; and, mortifying as it is to allow that our knowledge of phenomena daily passing before our eyes is confined within such narrow limits, the confession seems to be extorted from us by imperative necessity.

That the unaided power of the heart transmits the blood through its whole course, it is certainly not easy to admit; but what is the nature of the other motive powers concerned in the circulation, is a point on which much is still left for future researches to determine.

USE OF THE SPLEEN.

A PHYSIOLOGIST, by the name of Strauz, has thrown out a novel doctrine respecting the spleen. Having been some time engaged in examining the subject, and in experimenting on the spleens of elephants and other animals, he has arrived at the conclusion that this organ, which has puzzled the wise ones of every age, is no other than an electrical apparatus. "I can show," says he, "by experiments, and by facts from comparative anatomy, that the spleen is an electric apparatus, by the agency of which the blood undergoes a particular modification."

If it be true that some savage tribes cut out the spleen of their hunters in order to remove an obstruction to their speed, and if, as we have been taught to believe, this part has been taken from the dog without producing any perceptible functional derangement, we must believe that the *particular modification* of the blood by splenic electricity is of very little importance to the system. As, then, in nature there are no supernumeraries, it is altogether probable that, until the *facts* alluded to by M. Strauz are fully exhibited, the profession will consider themselves in as much uncertainty on the subject as at any former period.

CASE OF FIVE CHILDREN AT A BIRTH.

Furnished by Dr. Weiss, and communicated to the Clinic by M. Carus.

A WOMAN, 27 years of age, who had been married five years, of a middle stature and robust constitution, after having given birth to twins two years before, was put to bed with five children. The regular period of pregnancy was passed, and nothing in particular occurred, except that the woman felt herself more feeble than usual, with less inclination to eat or sleep. The abdomen had been very much distended, especially on the right side. The movements had been chiefly felt on the left side. The birth of the first child was very easy, and took place soon after the formation of the watery sac. The others came more slowly, and the last with much the most difficulty. Each was enclosed in a separate sac, and immediately followed by its particular placenta. All were born with the head presenting in the first position. The first that came were two boys, then a girl, next a boy, and then a second girl. Not one of them survived the third day. Their general length was from fifteen and a half to sixteen and a half inches. The second boy did not weigh two pounds after his death. Although all were regularly formed, they did not appear to have attained perfect maturity. With the boys, the umbilical cord was sixteen inches long, but only twelve with the girls; pulsation in it could scarcely be perceived at the moment of birth. The children had an old look; their voice was tremulous; they slept continually; and their temperature was very low. The mother, although very feeble, soon regained her health.—*Gemeinsame deutsche Zeitsch. für Geburtsh.*

This is certainly and very happily an uncommon case. Instances, however, are on record in which six

children have been born together; and Petrus Borelli tells us of a distinguished nobleman whose wife was delivered of eight at a single birth. This took place in Paris, in 1650. Two of these children were quite large, and six were very small. The history is generally considered authentic.

Peculiar Eruptive Disease, epidemic among Children.—It is stated in Rust's Magazine, 1829, that Dr. Stretcher, of Dingelstädt, has observed among children, most of whom had been already affected with scarlatina, a peculiar acute eruption, commencing with tolerably severe febrile symptoms and vomiting; the pulse quick and hard, the skin dry and hot. There was severe pain of the head, and inclination to sleep; great thirst, and sometimes delirium. With these symptoms there quickly appeared an eruption, principally confined to the neck, breast, and upper part of the abdomen, of a deep red, similar to erysipelas, interspersed with numerous small papulæ, resembling those of measles. There was no redness of the eyes, no symptoms of catarrh, nor any affection of the chest. By the third day, the eruption extended itself to the knees, but appeared very slightly, or not at all, on the arms and legs. The febrile symptoms continued, in general, for five days, or even longer; when, in most cases, a perspiration broke out towards evening. A desquamation now took place from the whole body, but most extensively from the neck. In some cases, the sudden repulsion of the eruption was followed by inflammation and suppuration of the glands of the neck.—The treatment pursued was very simple;—in the commencement, the patient was allowed to drink freely of cold water, subsequently of simple elder tea. The disease appears to have been attended with little or no danger.

M. Lisfranc's Treatment of Elephantiasis.—This consists, 1st, in reducing the nourishment one-fourth part, then a third, and finally one-half; 2d, in the employment of bloodletting, or application of leeches. Antiphlogistics persevered in until the inflammatory symptoms are entirely dissipated. After this, he has recourse to compression. When these means do not succeed, he applies numerous vesicatories, or resorts to scarifications, making one hundred at a time. In one case, the number of these amounted to three thousand.

But to ensure success, it will be necessary to use great numbers of leeches every time that inflammation supervenes. If this inflammation be of the erysipelatos kind, it must be left to run its course, at least if it be not too violent (in which case leeches and antiphlogistics will be required), since experience has shown that this form of inflammation is favorable to the resolution.—*Nouv. Biblio. Méd.*

Phrenology.—Dr. Elliotson related, at a meeting of the London Phrenological Society, the following case of a young lady under his care, who is diseased mentally in reference to cleanliness. This patient "suffers the greatest anxiety lest any dirt should touch her, or any dust get on her. If she treads on anything in the street that is in the form of dirt, she stands and examines it, and, after looking at it for some time, heaves a sigh and goes on. Sometimes she stops so long that a crowd collects, a coach is called, and she is carried away. When any person enters the room, she rises and tries whether the door is fast, lest any wind should blow dust in upon her. On being asked whether she felt any pain in her head, she replied 'yes,' and put her fingers on the organ of cautiousness."—*Lond. Med. & Surg. Journ.*

On blistering Infants.—The melancholy consequences which fre-

quently arise from the application of blisters to young children, renders every suggestion which it is probable may prevent them of great importance. We find that an hour, or an hour and a half, is a sufficient time for a blister to remain on a child, and although at the expiration of that time no vesication is apparent, yet, if the part be covered with any mild dressing or a poultice, a sufficient degree of irritation will be observed in a few hours' time; in fact, quite sufficient for the peculiarly delicate and susceptible constitution of children. When the emplast. cantharides has been employed in this manner, we have never witnessed any alarming result.—*Ib.*

Complete Amaurosis cured by the Application of Leeches to the Nasal Fossæ.—Dr. Guepinet, of Landrecies, relates, in the *Annales de la Médecine Physiologique, Vol. X.*, the case of a child, aged five years, who was suddenly attacked with complete amaurosis, without any known cause. The disease resisted the usual remedies for nearly two months and a half, when Dr. G. being consulted, he advised the application of leeches to the nasal fossæ. The day after the application, the child was able to see a little;—thus encouraged, Dr. G. had one or two leeches applied daily for a week, at the end of which period the child's sight was entirely reëstablished.

Anti-asthmatic Effects of the Tincture of Lobelia Inflata.—Mr. W. B. Andrews states, in a communication to the Editor of the London Medical Gazette, that he has been, for upwards of two years, afflicted with an inveterate asthma, which deprived him of rest, and the spasmodic effects of which were frequent and most distressing. When he finds these paroxysms coming on, he now takes fifteen drops of the tincture of the *Lobelia inflata*, which invariably

gives him immediate relief, although previously to his using it the violent coughing fits often lasted from one to two hours.

Chirayita in Asthma.—A mixture of the infusion of the chirayita herb, the tincture of the *lobelia inflata*, and the subcarbonate of soda, in the following proportions, have been taken with the most decided advantage by several nervous asthmatics, whose digestive organs were at the time much disordered:—

Take of Infusion of Chirayita, ℥vij.
Tincture of do., ℥i.
Tincture of Lobelia Inflata, ℥ij.
Subcarbonate of Soda, ℥ij. Mix.

The dose of this mixture is from two to three tablespoonsful three times a day.

Puerperal Fever.—A physician of Toulouse has published a case of puerperal fever, attended with very unfavorable symptoms, in which the application of ice to the surface of the abdomen, and drinking freely of iced water, after copious bleeding, proved successful. The day after the adoption of this practice, the patient perspired copiously, the mammary glands secreted milk, and the lochia reappeared. The patient entirely recovered in a few days.

Tic Douloureux.—Dr. P. Richet, of Metz, relates, in his thesis presented to the Faculty of Medicine of Strasbourg, four cases of this disease, which, after resisting the ordinary treatment, yielded to the administration of powdered Peruvian bark one grain, and snuff two grains, mixed and used as snuff. He says he always found the above dose sufficient, and in the course of two or three days to cure the malady as if by enchantment.

Among the new remedies for Tic Douloureux, that which is most highly praised by those who have used

it, is the *essential* oil of the *laurus nobilis* (the sweet bay.) It is said that the external application of this oil is immediately efficacious in relieving the pain and terminating the spasm. The strongest case we have seen noticed, is that of a medical gentleman in England who was several months severely afflicted with this disease in the face and forehead. The paroxysms were sometimes so violent as to produce delirium. He states that "this essential oil, gently rubbed over the parts affected, almost instantaneously allayed the pain, and always succeeded in procuring a good night's rest."

Hip Presentations.—In the *Maternité*, in Paris, in twenty thousand cases, three hundred and sixty were hip presentations. Of these, only thirty required the interference of art.—*La Clinique.*

Sulphate of Copper in Bread.—M. Orfila has detected sulphate of copper in bread made at Bruges. He was consulted by the authorities there on the subject, from a suspicion on their part that deleterious substances were employed by the bakers in that city, to improve the appearance of the bread.—Do the London bakers make us eat blue vitriol in our rolls?—*Med. Gaz.*

Supposed Artificial Diamonds.—M. Thenard gave an account of the experiments made by himself, MM. Dumas and Cagniard de la Tour, to verify the trials by which the latter thought he had obtained the power of crystallizing carbon, and forming diamond. An accurate analysis of these crystals, which had no color, proved, however, that they were only sicitates, and not artificial diamond.—*Annales de Chimie*, 1829.

Laurel.—The butchers of Geneva have a singular mode of preventing

flies from attacking the meat in their shops. They rub the walls and boards on which the meat is placed with the essential oil of laurel; the smell of which keeps away this troublesome insect.

Law and Medicine.—Where can you go, where there are not at least twice as many aspirants for the practice of law and medicine, as can find honorable subsistence and employment in these professions?—What must be the occupation of these supernumeraries, unable to dig, ashamed to beg, and with minds sharpened by cultivation, study, pride and ambition, and looking upon laws as men traps, and society as fair game? It is out of the question, that there is a ruinous propensity, in the great mass of the people, to train their children to live by their wits instead of their industry. We know not how others regard this unhappy inclination. To us it is one of the most fearful omens of our day. True, it must ultimately correct itself. But what formidable armies of scheming dandies, and of wordy demagogues, and reckless editors, will be forced upon the community, born to eat up the corn, and compelled to raise the wind, that, as moon cursers and wreckers, they may profit by confusion! Mr. Este recommends that the pursuit of agriculture swallow up these supernumeraries, who, instead of making harangues and stump speeches, and eulogizing king Caucus, may be more usefully employed to make two blades of wheat to grow where only one grew before.—*West. Rev.*

REPORT OF DEATHS IN BOSTON,

The week ending Sept. 11, at noon.

Of abscess, 1—consumption, 3—convulsions, 1—cholera infantum, 2—croup, 1—canker, 1—dysentery, 2—delirium tremens, 1—infantile, 4—lung fever, 3—measles, 2—sudden, 1—teething, 2—unknown, 2. Males, 16—females, 10. Total, 26.

ADVERTISEMENTS.

CARTER & HENDEE have just published,—The Constitution of Man, considered in Relation to External Objects. By **GEORGE COMBE**.

From the Preface to the American edition.

“Mr. Combe’s work should be placed with those, of which so many within a few years have appeared, which are devoted to the all-absorbing topic of Education. It treats of moral, intellectual, and physical education. This is not formally done under so many distinct heads. But the whole course of reasoning of the author, and the whole array of all his illustrations, have it always obviously in view to show how the highest cultivation of each of these may be most surely brought about.

“The publishers have printed this edition from a belief that there is much in the work to interest the community.

“It has a novelty to reward the general inquirer, and it presents the well known under novel aspects. There is one class amongst us who may study it with much advantage. Scholars are referred to, a class here too small to form a distinct order with habits of their own, and who insensibly fall into those which, although not mischievous, to the multitude on the score of health, too often make ill health the portion of the sedentary student, and bring upon him premature decay.—To all classes it is recommended, and the various learning and acuteness of the author well fit him to write a book which addresses its instructions to the whole community.”

Sept. 8.

HARVARD UNIVERSITY.

MEDICAL LECTURES.

THE MEDICAL LECTURES in Harvard University will begin in the Massachusetts Medical College, Mason-street, Boston, the third WEDNESDAY in October next, the 21st, at nine o’clock, A. M.

Anatomy and Surgery, by **Dr. WARREN**.
Chemistry, **Dr. WEBSTER**.

Midwifery and Medical Jurisprudence,
Dr. CHANNING.

Materia Medica, **Dr. BIGELOW**.

Theory and Practice of Physic, **Dr. JACKSON**.

Students attending the Medical Lectures are admitted, *without fee*, to the

Surgical Operations and Clinical Practice of the Massachusetts General Hospital, during the courses.

Aug. 4. **W. CHANNING**, *Dean*.
eptOct21.

A TREATISE on the Scrofulous Disease, by **C. G. HUFELAND**, Physician to the King of Prussia, &c., translated from the French of **M. Bousquet**, by **Charles D. Meigs, M.D.**, is just received and for sale by **CARTER & HENDEE**.

Sept. 8.

EUROPEAN LEECHES.

RICHARD A. NEWELL, Druggist, respectfully acquaints the physicians and families of the city, that he has made arrangements with one of the first mercantile houses on the continent, to be regularly supplied with the Genuine Medicinal Leech. He has now on hand a fresh supply, just received, which are for sale.

N. B. The difficulty of obtaining genuine Leeches by the usual way has induced him to make the above arrangement at considerable expense, and he hopes it will meet the approbation of the medical faculty. Summer-street, opposite Purchase-street.

Sept. 1.

3t.

BERKSHIRE MEDICAL INSTITUTION.

THE Annual Course of LECTURES will commence on the first Thursday in September, and continue fifteen weeks.

Matriculation ticket, \$ 3. Fee for Lectures, \$ 40. Library ticket, \$ 1. Graduation, \$ 15.50. Board, including washing, lodging and room, \$ 1.75 a week.

Pittsfield, July 22, 1829. aug4tsept30

EUROPEAN LEECHES.

CHARLES WHITE, No. 269 Washington street, corner of Winter street has just received a fresh supply of EUROPEAN LEECHES, extra large and in prime order. Also, by the late arrivals, a general assortment of MEDICINE.

** Strict personal attention paid to Physicians’ prescriptions and to the compounding and delivery of Family Medicine, and all favors gratefully received.

Sept. 1.

Published weekly, by **JOHN COTTON**, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

THE BOSTON
MEDICAL AND SURGICAL JOURNAL.

VOL. II.]

TUESDAY, SEPTEMBER 22, 1829.

[No. 32.]

I.

GODMAN ON TIGHT LACING.

Injurious Effects of Tight Lacing on the Organs and Functions of Respiration, Digestion, Circulation, &c.

(Concluded from p. 481.)

To say nothing farther of the actual mischiefs which tight lacing produces, the influence it exerts on all the motions of the body is entirely disadvantageous. Can anything on earth be more ungraceful than the gait, the walk of a female who is extremely corsetted? From the shoulders down, as stiffly inflexible as the parlor tongs, she can only advance by a sideling shuffle of the feet, which appear to get forward by stealth, instead of moving the body with that elastic mobility characteristic of its unrestrained natural condition. Instead of the easy graceful inclination of a flexible form, we have an awkward ungainly attempt to balance the body on the limbs; the shoulders stiffened backwards, as if shackled with iron; the chest girded in, till breath can scarcely be drawn; and the trunk of the body as rigid as if carved in wood,—the figure looking like a caricature upon nature, ease, and grace! When ladies in this trim enter a room, especially after walking, they can scarcely speak for several minutes, and their bosoms heave with an unnatural agitation. If

the busk be of the *fashionable* length, it is impossible for them to sit comfortably in a chair; they must perch on its outer edge, to prevent the busk from being pushed towards the chin, &c. All this torture, uneasiness, and inconvenience, is patiently endured, and for what? because it is fashionable! Grace, ease, elegance, and comfort, are alike immolated to this Moloch, who spares none who pretend to the rank of *fashionable*!

In persons of somewhat more robust frames, the use of tight corsets is followed by a very severe pain, which is experienced at the time of taking them off, and rather different in kind from that we have mentioned as occurring to delicate females. The pain in this case is caused by the return of the blood to the parts which have been violently compressed by the corsets, and enjoyed but a partial circulation while they were worn. It is exceedingly acute, and requires the corset to be very gradually loosened. Some idea of it may be formed by those who have occasionally taken off a very tight garter or other ligature, which has been worn for some hours. We feel less commiseration for such sufferers, who have not the shadow of excuse which is offered by the delicate; they do not need support, and are merely solicitous to make “a figure!”

Very probably it may be urged

that the evils we have indicated are confined to a comparatively small number, and that a much greater proportion of females wear corsets without suffering these inconveniences or injuries. However true it may be that some persons use corsets with impunity, it does not in the least diminish the force of the well-founded objections made to them in the preceding observations: it may be said with equal truth, that numerous individuals use spirituous liquors, or amuse themselves by occasional gaming, without injury; yet we know that the vast majority of mankind are but too prone to pass from the use to the abuse of both the latter; and as in the case of spirituous liquors, the transition from the use to the abuse is frequently so gradual as to be nearly imperceptible until the severest evils are produced, so it is most probable, especially in young persons, that the use of corsets and busk will speedily and imperceptibly advance to their abuse. There is one circumstance, moreover, which should be particularly remembered, which is, that although ladies properly educated, and aware of the danger of misusing corsets, might employ them without especial injury, the females of lower ranks in life, who imitate what they see in those above them, without reference to cause or consequence, will almost inevitably be led to do themselves the worst injuries. We see daily confirmation of this in the attempts of female attendants, &c., to imitate their employers, in the article of *lacing* at least, nor is it at all uncommon for such young women to be obliged to consult physicians for various supposed diseases, which are the immediate results of their prepos-

terous attempts to make themselves "fine figures." Many of them, with this view, keep on their corsets and busks all night, *tightening*, when they lie down, instead of loosening them, and again in the morning drawing them still closer, — considering every successive half inch in the compression and diminution of the lower part of the chest, as so much "clear gain."* The consequences that speedily follow are, loss of appetite, headache, palpitation, and most of the sufferings already mentioned.

After all our researches, we have not been able to discover the exact origin of this ridiculous and

* Not long since, the following scene occurred under our notice, at a boarding-house in Philadelphia.—The girl of the house, a tall, good-looking young woman, at the proper time in the afternoon filled the tea-kettle, and brought it to the kitchen hearth, where she placed it on a bench. To place it over the fire required considerable stooping, and this, as it turned out, was impossible to her. Repeated and fruitless were her attempts, by a sort of crouching attitude, to accomplish her object; there was no one present to assist or to relieve her from the restraint which prevented stooping, and at length in despair she gave up her trials, and stood by the kettle as if debating what she should do. The mistress came to inquire if the water was boiling, and found it not yet on the fire!—To her utter astonishment, "the young lady" confessed that she had her "*long busk*" on,—that her "*lacing*," which was excessively tight, was in a "hard knot," and that she "could not possibly stoop" to put on the kettle! On another occasion, the writer was obliged to stop and admire one of those faithful imitators of high life, who, attired in a rich yellow barege frock, with gorgeous balloon sleeves, and *laced* to a most fashionable degree, was occupied in sweeping out one of the filthiest gutters in Seventh Street! Nothing was wanting to complete the picture, but one of the exquisitely dressed and Russian belted "gemmen," we occasionally see in the streets, to have shaded her with an umbrella, while she was engaged in discharging this receptacle of "liquid sweets."

injurious mode of dressing. That in one modification or other it has been employed among Europeans for ages, we have unquestionable proof. The circumstance of its being confined principally to those countries whose moral and religious codes have a common foundation, forces us to conclude that the contrivances of stays, corsets, &c., were designed to *conceal*, as far as possible, the consequences of levity and imprudence. The idea of improving the figure by their use, was originally a mere excuse to cover the *real* object for which they were worn. The disposition to imitate, so common to the human race, favored the views of the depraved and designing, and multitudes of elegant and innocent women fell into a fashion which promised improvement to their personal charms, while in reality it was productive of their destruction. The same phantom of augmenting attractiveness by their employment, contributed to prolong the illusion to the present time, and as our fashionable females have felt the influence produced on their mothers by this folly, we have now the superadded excuse of need of support, on account of muscular debility, urged for its continuance. It is not a little curious to observe the effect that has been produced on female sentiments, by the operation of this cause. The object being to look slender (graceful is utterly impossible, if the body thus dressed be in motion), all rotundity of person is regarded as vulgar or inelegant, though nature has taken infinite pains to render all living forms round and swelling, both externally and internally. Hence the youthful and unmarried are exceedingly desirous, by aid of cord and busk, to look *flat*, and in every sense of

the term are successful;—the same horror of rotundity follows them through life, and nothing is so common as to find those who have lived and dressed with an exclusive view to gain husbands, with all the mawkishness of false delicacy, using injurious efforts to conceal their approach to the endearments and respectability of maternity. Far be it from our thoughts to wish that our matrons should, in the slightest degree, abate of their sensitiveness on this or any other subject connected with purity of mind; but a close and somewhat protracted observation has fully convinced us, that, from the cause we have mentioned, and others we dare not speak of, an excess of false delicacy under such circumstances has become fashionable. If all the rest of the world were to resolve on the use of tight lacing, mothers should determine to lay it aside, if only in compassion to their offspring, whose health and happiness may otherwise be entirely sacrificed. If we make strict examination among children of *fashionable* parents, we shall find proof sufficient of this, even if nothing worse be discovered than pale, delicate, rickety, or scrofulous subjects, whose appearance proclaims imperfect health with enfeebled and easily injured constitutions. The injuries produced on many delicate females by tight lacing, before and after marriage, have been sufficiently great, in numerous instances, to destroy all the joyous hopes and anticipations which are incident to maternity, and rendered the conjugal condition one of unceasing disappointment and gloomy solitude.

Enough, however, has been said on this subject, although we have given but an imperfect catalogue

of the mischiefs produced by tight lacing. Much of what we have said will be regarded by tight lacers as a mere attempt to alarm, because they have not yet especially suffered from this cause. If inquiry be made of physicians residing in our cities, ample confirmation of all we have stated may be obtained, and proofs of still greater evils from this cause afforded.* We cannot, however, hope to effect much against the preponderating influence of fashion, considering how often it has been attempted by others unsuccessfully. Nevertheless, we have esteemed it a duty to make even this imperfect essay, hoping that possibly *one* parent might be convinced, or one female saved from injury.

II.

LAWS RESPECTING DISSECTION.

Salem, Sept. 1, 1829.

SIR,—The Massachusetts Medical Society having appointed us a Committee “to consider if any change can be effected in the laws of the Commonwealth, in

* The writer has twice opened the bodies of females who were addicted to excessively tight lacing. In both, the liver, stomach, spleen, diaphragm, lungs and heart were permanently and injuriously displaced. Many of the “*liver complaints*” suffered by fashionable ladies are entirely owing to the same. The following is extracted from a Baltimore paper, and is an illustration in point.

“**SUDDEN DEATH.**—A colored woman, recently from New York, in the employ of Mr. F. M. Diffendoffer, of Baltimore, died suddenly on Thursday last, while standing at a table ironing clothes! An inquest was held over the body, during which it was opened by a physician who was called in. It appeared that the deceased had been in the habit of tight lacing to such a degree as to force the liver from its natural seat. The more immediate cause of her death was the rupture of a bloodvessel near the heart.”

relation to human dissection,” we have the honor to solicit your influence and interest to cooperate with us in devising means to advance the welfare of the community, and of our common profession, so deeply involved in the prosecution of Anatomical Science.

It must be obvious to you, Sir, that the difficulties and dangers which now oppose the practical study of Anatomy in this Commonwealth, are such as operate almost to the complete discouragement of the student and practitioner in pursuing this study; and that these difficulties and this discouragement grow out of the popular prejudice, which regards dissection with horror, and blinds the community to a view of the importance of the knowledge which is sought for, and the facility with which this knowledge may be obtained, without any outrage upon the good order or the genuine good feelings of the public. It is to the removal of this popular prejudice, especially as it exists in the minds of the members of our Legislature, that we wish to direct the efforts of the influential members of the Medical Society; and the following are some of the statements on which it is intended to rely, in presenting a petition to the Legislature for a modification of the existing laws:—

1. Anatomical knowledge is absolutely necessary in all branches of our profession. No conscientious man will venture to perform surgical operations without this knowledge; and it is equally necessary, to enable the physician to distinguish the seat of the different internal diseases, and direct the application of remedies.

2. This knowledge can only be

acquired by dissection. For it is manifestly as absurd to expect to learn the intricate structure of the human frame by means of plates and models, as for a mechanic to acquire a practical acquaintance with the structure and movements of a watch, without being allowed to inspect the interior of the mechanism, and to take it in pieces.

3. So far as the poor are concerned, it is for their especial benefit that all physicians should be enabled to learn Anatomy thoroughly, and practise it occasionally during life. Riches may procure medical or surgical skill, at whatever cost, and from any distance; and so long as the rich are willing to pay for this skill at its highest rate, a few individuals will be found who will seek it abroad or at home, at immense expense, or personal sacrifice and risk. But the poor must be dependent for medical and surgical relief on those who are nearest to them; and, generally, not on those who have had the *most* opportunities of acquiring skill in the long-continued practice of their profession.

4. In confirmation of the foregoing argument, the Committee would refer to the observation of any competent member of the profession to say, if there are not among the paupers who are supported at the public charge, many whose diseases and lameness have passed from a curable to an incurable condition, for the lack of that surgical skill which could only have been derived from a knowledge of practical Anatomy. It is not meant to be asserted, that all fractures, dislocations and surgical diseases can be cured, without *some* cases occurring in

which such lameness will unavoidably result, as will occasion inability to labor. But so numerous are these cases now known to be, and so great the amount of loss which the public sustains by the loss of their labor, and the expense of their support, that the interest which the community has in affording the means of lessening the number of these cases, is direct and obvious.

5. All lovers of good order and good morals must feel desirous to prevent amongst us the growth of a body of people, who make it their business to violate the sepulchres of the dead. Late experience in Europe has shown, that the bands of resurrectionists are among the most *hardened* and *desperate* villains in society; and that even *murder* has been resorted to by them. These desperate people are always encouraged by whatever tends to create obstacles to the *lawful* presecution of Anatomy, and will always find *some* means of supplying bodies, while a high price is paid for them by those engaged in anatomical studies. The perfect safety of the sepulchres of the dead may be insured, and the feelings of the living preserved from the least outrage, by a proper selection from among the bodies of the dead.—If the bodies of persons who are unclaimed by the friendship or relationship of a living individual, are devoted, under proper regulations, to anatomical purposes, there will be found in all our large towns an adequate supply of those, whose death no one is left to regret, and to whose remains no one is willing to show respect.

In fine, it is certain that the public, as a body, have a greater

degree of interest in this matter than even physicians ; and it is to be hoped they may be made to view this interest in its true light.

We respectfully request of you, Sir, that you will give us your assistance in promoting the object for which the Committee was appointed ; and especially by laying the subject, with such arguments as we have used, and others which will occur to yourself, before the consideration of those members of the Massachusetts Legislature with whom you are acquainted.

We also request you would forward to the Chairman of the Committee any important views which may occur to you on this subject, and of what appears to you, from your personal knowledge of the course of public opinion in your vicinity, the prospect of success in the anticipated application to the General Court.

If you should have anything to communicate, please to forward it previous to the 1st of October.

We are your obedient servants,

A. L. PEIRSON,
WILLIAM INGALLS,
JOHN C. WARREN,
GEO. C. SHATTUCK,
JOHN BROOKS,
JOHN D. WELLS,
JOHN WARE.

III.

ACUPUNCTURATION.

The following account of this remedy, the rage for which has never yet crossed the Atlantic to this new world, is from the spirited pen of Dr. Johnson, who has probably assigned it just the place that it merits.

In nothing is fashion, omnipotent fashion, more conspicuous than in medicine. A little while ago the town rang with "acupuncture ;" every body talked of it ; every one was curing incurable diseases with it ; but now not a syllable is said on the subject, and acupuncture would seem to be quietly consigned to "Lethe's silent stream." In France, however, the advocates of the measure would seem to be as hot as ever, and cases are constantly recorded of the wonderful benefits and cures it has accomplished. In the Archives Générales for last October, two cases are reported from the practice of M. Trouve, where it *seemed* (for alas! in these matters we are frequently sadly taken in) to produce good effects. The first was that of a young woman laboring under many of those strange hysterical symptoms so commonly met with in practice, and that to a very distressing degree. A great variety of general and local means were put in practice with little or no effect, when M. le Médecin en chef resorted to the needles, and employed them assiduously for many days, as often as the slightest premonitory symptom of a hysterical paroxysm made its appearance. The patient soon left the hospital cured. The second patient was also a young woman, who had suffered for seven years from paralysis of the right lower limb following a fall upon the back, and obliging her to go constantly on crutches. Four applications of the needles sufficed to give her perfect use of the long palsied limb, and shortly afterwards this patient also left the hospital.

We suppose the *modus operandi* of acupuncture, at least in

cases of this description, is to be considered similar to that of incantations, cauls, &c., for it is notorious that many a malady has yielded to the potent spell of some old beldame, which had long resisted the professional skill of the regular descendents of Hippocrates. Whatever the *mode* in which the needles act may be, if they *have* an action, and that a good one, they are worth a trial now and then in those nervous or hysterical disorders, on which scientific measures are completely thrown away. We have seen a most salutary salivation produced by *bread pills*, in a very hypochondriacal patient, who fancied he had syphilis, and that he *ought* to be put under the influence of mercury. The pills of course were said to be mercurial, and particular injunctions were given him to leave them off as soon as the mouth should be affected.

IV.

OPIUM EATERS.

From Mr. Madden's Travels in Turkey.

I HAD heard so many contradictory reports of the sensations produced by this drug, that I resolved to know the truth, and accordingly took my seat in the coffee-house, with half a dozen *Theriacis*. Their gestures were frightful: those who were completely under the influence of the opium talked incoherently; their features were flushed, their eyes had an unnatural brilliancy, and the general expression of their countenance was horribly wild. The effect is usually produced in two hours, and lasts four or five; the dose varies from three grains

to a drachm. I saw one old man take four pills, of six grains each, in the course of two hours: I was told he had been using opium for five-and-twenty years; but this is a very rare example of an opium eater passing thirty years of age, if he commence the practice early. The debility, both moral and physical, attendant on its excitement, is terrible: the appetite is soon destroyed, every fibre in the body trembles, the nerves of the neck become affected, and the muscles get rigid. Several of these I have seen in this place, at various times, who had wry necks and contracted fingers; but still they cannot abandon the custom: they are miserable till the hour arrives for taking their daily dose; and when its delightful influence begins, they are all fire and animation. Some of them compose excellent verses, and others address the bystanders in the most eloquent discourses, imagining themselves to be emperors, and to have all the harems in the world at their command.

After trying the experiment on himself, Mr. M. gives the following history of his sensations:—

My faculties appeared enlarged: every thing I looked at seemed increased in volume; I had no longer the same pleasure when I closed my eyes which I had when they were open; it appeared to me as if it was only external objects which were acted on by the imagination, and magnified into images of pleasure; in short, it was “the faint exquisite music of a dream” in a waking moment. I made my way home as fast as possible, dreading, at every step, that I should commit some extravagance. In walking, I was hard-

ly sensible of my feet touching the ground ; it seemed as if I slid along the street, impelled by some invisible agent, and that my blood was composed of some ethereal fluid, which rendered my body lighter than air. I got to bed the moment I reached home. The most extraordinary visions of delight filled my brain all night. In the morning I rose, pale and dispirited ; my head ached ; my body was so debilitated that I was obliged to remain on the sofa all the day, dearly paying for my first essay at opium eating.

SKETCHES
OF

PERIODICAL LITERATURE.

SOMETHING NEW RESPECTING CREPITATION OF THE LUNGS.

A. M. PIEDAGNEL has undertaken to prove that crepitation of the lungs, so far from being a proof of their healthy state, is always an indication of disease. He has ascertained that where death has occurred without laborious breathing or any injury to the lungs, these organs do not crepitate on pressure. When this phenomenon is found, therefore, it is to be attributed to a partial emphysema, that is, to a rupture of the air-cells, and the escape of the air into the common cellular substance. This may be produced, as he thinks, by the struggle for breath which occurs in many instances before death. After inspiration, the glottis is contracted spasmodically, and the expiratory action of the muscles, under these circumstances, is sufficient to cause rupture. It may also be occasioned by forcible inflation of the

lungs, as in the attempt to produce respiration by this means in stillborn children. In one instance where this attempt was made without success, considerable emphysema was, on examination, found in the lungs, and the inference was, that the emphysema had been caused by the inflation. Some experiments, subsequently made on living animals, tended to confirm this conclusion. Inflation produced embarrassed respiration, and shortly after, death ; and in the dead body the lungs were found pale and emphysematous.

SURGERY OF GALEN.

IN the course of some observations on the degree of sensibility possessed by the heart, Dr. J. R. Coxe cites a case from Galen which proves this medical patriarch possessed more anatomical knowledge and skill in surgery than is generally supposed. A boy had received a blow on the sternum. This being neglected, led to an abscess on the part, which was opened and seemed to heal. Matter formed however a second time, and was again evacuated ; but the wound thus made continued open, notwithstanding every effort made to heal it. "On this account," says Galen, "a consultation was called, at which I was present. The sternum was so much affected by caries that the motion of the heart could be seen through it on the left side. No one however dared to propose the removal of the diseased portion ; because it was thought to involve a perforation of the thorax. Notwithstanding this danger, I undertook to perform the operation ; but stipulated that as the

extent of disease in the parts subjacent to the bone could not be judged of, I would not answer for its effecting a cure. On denuding the bone, the extent of disease was found to be nearly such as had been observed externally; the margins, beneath which were the veins and arteries, being healthy,—a circumstance which enabled me to operate with great confidence. Having removed the part affected, I found that the pericardium was involved in the disease, and that the heart was laid bare. This caused me some apprehension at first; but in the course of a short time the patient was restored to health; an event which could not have been hoped, had no one been willing to operate, and the operation itself could not have been performed, except by one versed in the science of anatomy.”

CHOREA—WITH DISSECTION.

AN interesting case of chorea has occurred at the Sunderland Dispensary. The subject of it was a girl 16 years of age. The disease affected the left side of the body. She grew worse, convulsions came on, and she died. On dissection, a calcareous concretion was found in the medullary substance of the left hemisphere of the brain. This stone was of an irregularly cubical figure, each of its sides measuring about an inch. The medical gentleman who reports the case states that he has seen two others in which partial passed into general convulsions, followed by coma and death. In neither of these was there opportunity for post mortem examination of the brain. From the great similarity of the symptoms to those of the present case,

he judged that they, and indeed most other analogous cases, arise more frequently from direct irritation of the brain, with increased afflux of the blood hither, than from sympathetic excitement of that organ.

It will be recollected that the concretion above alluded to occurred in the same side of the body as the convulsive movements it occasioned.

SMALLPOX IN PENNSYLVANIA.

IN the last No. of the American Journal, we see the account of an epidemic smallpox which occurred in Pittsburg, Pa. toward the close of the year 1828, and continued for six months. A few of the facts are interesting, as they bear on the point of the prophylactic power of vaccination. One individual is mentioned, whose case was known to the reporter. He had been vaccinated twelve years before, and retained the mark of the genuine vaccine vesicle; yet he went regularly through the smallpox, though in a mild form. Several other instances are mentioned, where persons who had gone through the vaccine disease were greatly exposed, but escaped the infection.

CATARRHUS VESICÆ.

THIS disease, so common with old people in the higher ranks of society, has been particularly attended to of late by M. Civiale. He is of opinion that it is a chronic inflammation and thickening of the coats of the bladder, occasioned by diminished tone in its muscular structure. A direct consequence of such diminution is an imperfect emptying of the sac. The remaining urine produces irrita-

tion, and this passes into chronic inflammation. He relies on the catheter for a remedy.

BOSTON, TUESDAY, SEPT. 22, 1829.

WE conclude to-day our extract from the recently published work of Dr. Godman, of Philadelphia. This extract comprises the whole of his treatise on Tight Lacing, with the exception of his description of the parts concerned in the process of respiration,—a portion which seemed unnecessary for medical readers. Some account of this work we propose to give in our next.

LAWS RESPECTING DISSECTION.

WE have given in this number a copy of the Circular of the Committee of the Massachusetts Medical Society, to whom was referred, at their last meeting, the subject of Dissection. This Circular has been forwarded to members of the Society, and we would call their earnest, immediate, and devout attention to the propositions it contains. The subject of this Circular is of incalculable weight; it is the key-stone of the arch on which all medical and surgical science rests; its importance is measured only by the practical value our profession is capable of acquiring, and the blessings it is capable of extending to mankind. Give up dissection, and the beautiful and stupendous fabric which the learning and labors of medical men, in all past ages, have been spent in rearing, must inevitably fall; the fountains of the healing art will become dry, and the learned and ju-

dicious physician, the skilful and accomplished surgeon, will be lost in the impostor charlatan.

The time is arrived when it is necessary for the profession to take some active measures to facilitate dissection in this country. Every member of the faculty ought to feel that to move or be quiet in this matter is not left at his option; a duty,—a high and commanding duty,—urges him to spend his time and talents, to use the utmost of his influence, in correcting the popular error on this subject, and convincing the people,—the true rulers of the land,—that every obstacle the law opposes to dissection, is a stepping-stone to the very evil it would avert. So long as no subjects are specially allowed by law for purposes of anatomy, violation of the grave will be indiscriminate. Just in proportion as these obstacles are increased, the price offered for subjects will be enhanced, and the temptation increased to procure them at the sacrifice of every feeling of the heart,—to procure them, if by no other means, by those horrible deeds which have immortalized the great city of the North in the annals of crime.

This is not a fanciful picture. The effect of legal restraints on the means for dissection in Scotland, have passed through all these stages to the last,—the climax has there been surmounted. In this country, it has made an alarming progress; the sanctuary of the dead is often violated, without regard to the number or character of the friends who followed the corps to its supposed resting-place: and nothing can be more cer-

tain than the fact, that the closer we shut the grave against the resurrectionist the sooner will he find his prey elsewhere ;—debarred from the depositories of the dead, he will seek it in the retired dwellings of the living ; shut out from sacrilege, he will fly to murder.

It is very evident that by devoting to the purposes of anatomy the bodies of those who die in houses of correction, the current of events which is drawing near to the shocking catastrophe to which we have alluded, may be effectually checked. Such regulation would moreover be a strong motive with the vicious to restrain their evil passions, and thus act with a double power in promoting the good order, good morals, personal security and happiness of the people.

The last session of the British Parliament was rendered one of the most memorable in the history of the nation by the emancipation of the Catholics. It would have crowned the glory of that Parliament, had they exercised as enlightened a policy toward the Surgeons. Mr. PEELE exercised his energies successfully in satisfying the just claims of the former, without injury to church or state ; but Mr. WARBURTON could not effect the emancipation of the Surgeons from the severer thralldom in which they are held by the laws of the land.—The Catholics were not eligible to office ;—the surgeons are the only persons eligible to certain offices, and yet subjected to heavy penalties if they discharge ably and faithfully the duties which those offices impose on them ; for no man

can, in the nature of things, discharge either ably or faithfully the duties of a surgeon, without such a knowledge of the minute structure of the part on which he operates, as dissection alone can give him. If a surgeon operate *badly*, an action will lie against him for malpractice, and he loses his professional reputation ;—if he takes the only possible measure to enable him to operate *well*, the laws of his country meet him with greater severity, and the popular voice is still louder against him.

Let us hope that the proud distinction of leading the way to a more enlightened policy respecting dissection, remains for this country.—If this is to be effected at all, it must be done by the individual efforts of medical men. Great and salutary changes in our laws must originate in the people, and any attempt to effect them in the legislative hall, before the minds of the people are convinced of their necessity or expediency, will be inevitably abortive ; it is working against a current which can never be stemmed. It is not the water poured on the branches of the oak which gives it verdure and vigor ; it is the moisture taken in drop by drop at its roots, and the influence, however small, which is exerted at the extremity of its minute tendrils, is that alone which can produce any great changes in its more conspicuous part. Let every member of the profession be fully apprized of the importance of his own private personal influence, and let him exert it never so quietly, but with judgment and power, and the great result will astonish him.

HEALTH OF OUR CITIES.

THE Yellow Fever continues to prevail to an alarming, and, we believe, unprecedented extent, at New Orleans. From thirty to forty are said, by good authority, to die daily of this disease, and very few attacked by it recover. Its ravages have been particularly great among those Spanish Refugees who, driven from their homes by an arbitrary decree of the Mexican Government, sought a refuge where so many of them have found a grave.

At Savannah but three cases of Yellow Fever have occurred, and the city is esteemed unusually healthy.

Charleston has escaped this scourge thus far. The Carolinians complain more of injured cotton crops than the ravages of disease. The subsidence of the recent freshet in the Pee Dee, will leave pools of water scattered over a large tract of country, which, becoming stagnant and subjected to the heat of a southern sun, must produce fever in great abundance. The only safety of the river inhabitants will be the continuance of the rains into October.

We have no reports of the existence of any malignant or other prevalent disease in Baltimore, Philadelphia, or New York.

The Dysentery is unusually rife on the banks of the Susquehanna, and its vicinity; whole families are confined at once to their beds, but the mortality is as yet inconsiderable.

Our autumnal fever, of which there is more or less in this city every fall, is more frequently met with this season than usual. Although the cases are numerous and recovery generally

slow, it proves fatal but seldom, as may be seen by our bills of mortality. A good practical treatise on this disease is much wanted, and it is to be hoped the Prize offered by the Boylston Committee for the best essay on the subject, will be the means of supplying this deficiency in our medical literature. For the terms on which this Prize is offered, our readers are referred to No. 27, Vol. 2d, of this Journal.

MEDICAL MANUFACTORIES.

THESE establishments appear to be uninterrupted in their operations by the pressure of the times. Within three or four weeks, 42 medical Doctors have been finished off at Bowdoin College, 10 at Williams College, 35 at Yale College, and many others which we have not time to enumerate.

Several new laborers have been also engaged, viz.,—At Bowdoin College, JAMES McKEAN, M.D., of Topsham, as Professor of Obstetrics, and JOHN DE LAMATER, M.D., of Fairfield, N.Y., as Professor of the Theory and Practice of Physic.—At Burlington College, BENJAMIN LINCOLN, M.D., of this city, as Professor of Anatomy and Surgery.

These gentlemen, with their Collaborators and others, will commence operations at their respective Institutions as follows:—

At Bowdoin College, about the end of January or the beginning of February. By a very happy arrangement, the lectures commence at this seminary about the time they end elsewhere; so that pupils who desire

it can avail themselves, in a single season, of the advantages of two schools.

At the Boston Medical College of Harvard University, on the third Wednesday in October.

At Rutgers Medical College, New York, on the first Monday in November.

At the University of Pennsylvania, on the first Monday in November.

At the University of Maryland, on the last Monday in October.

At the Medical Department of Washington College, on the first Monday in November.

At the Berkshire Medical Institution, the Lectures commenced on the first Thursday of this month.

At the late Commencement at Yale College, the Honorary Degree of M.D. was conferred on Drs. Nathaniel S. Perkins, Bela Farnum, Luther Ticknor, and Darius Hutchins.

We do not learn that any other of our literary institutions found any medical gentlemen within the sphere of their knowledge worthy of similar honors.

TRANSATLANTIC QUACKERY.

WE know not if our readers have heard or not of a famous worker of wonders, who is making a great parade in London, and imposing most egregiously on the credulity of John Bull. The thing we refer to is called by a very long name; to wit, *Mr. LONG SAINT JOHN LONG,—ARTIST.* Now the art which this man is exalting by the workings of his transcendent genius, is no less than the *art of healing*;—the art of healing not only diseases which others have healed before him, but that triumphant ene-

my of the faculty, *pulmonary consumption.* Various newspapers in the British metropolis blazon forth the unprecedented cures performed by this *rara avis*, and extol beyond measure his method of treatment, which, by the way, is a profound secret. One young gentleman, whilst under the treatment of Long St. John for “confirmed consumption,” was recently seized with enteritis, and died in four days. On inspecting his body after death, “the lungs were found perfectly sound, and no trace of tubercles, or other phenomena of phthisis, existed in the chest.”! Had not the melancholy event occurred which terminated the career of this patient whilst in the midst of St. John Long’s treatment, how glorious a case would this have been to have published to the world! A case of “confirmed consumption” wholly and permanently cured by the wonderful skill of Mr. St. John Long, the healing Artist.—Another remarkable case, in which the cure was attested by a Master of Arts and Doctor in Divinity, is thus noticed by Dr. Johnson in his Medical Journal:

By the post of this morning (June 15th) we received two newspapers, Bell’s Weekly Messenger, and the Leeds Mercury. In the former was printed very conspicuously the letter with its testimonials (No. I). In the latter (Leeds Mercury) a single line dispelled the fair illusion of hope on one hand, and unprincipled mendacity on the other! Mr. St. John Long and his puffers require some strong opiates to make them sleep with easy consciences.

(1.)

London, August 17, 1828.
My dear Sir,—For seven years

previous to placing myself under your care, I suffered great general debility, with violent cough, and expectoration, and was dreadfully emaciated. I was also afflicted with spitting of blood, pains in the chest and side, extreme difficulty in breathing, could not lie down in bed without a chair for my support, and despairing of recovery. Now, my flesh has become firm and healthy, I have appetite, can sleep, and walk five or six miles without much fatigue.

MARTHA HUDSON.

Hipperholm, Halifax, Yorkshire.
Feb. 16, 1829.

It is some months since I left your care, and I have gone on progressively gaining health, having stood the severity of the winter months astonishingly well, though a cough still remains. The full history of my case is recorded in your book, which bears testimony of the merits of your important discovery.

Gratefully yours,

MARTHA HUDSON.

We, whose names are under-written, with pleasure attest the truth of the above statement :—

RICHARD HUDSON, M.A.

Father of Martha Hudson.

RICHARD HARTLEY, D.D.

Brother in-law of Martha Hudson.

(2.)

DIED—On Saturday last, at Hipperholm, Martha, the second daughter of the Rev. Richard Hudson.

But Mr. St. John Long seems to be a man of uncommon kindness of heart, as well as medical skill, as evinced in the following history recorded in another English periodical.

A young lady, subject to cough, came to London, to place herself under the care of this pretended curer of consumption of the lungs, under the impression that he was an *eminent* physician. The patient attended regularly, and agreed, by a solemn promise, not to reveal his mode of treatment. The humane and liberal-

minded John St. John Long felt so much interested in her case, that he, good soul, agreed to receive her on a Sunday; and such was his desire to be accommodating, that he even condescended to take the fee on the sabbath day.

STATISTICS OF DENTISTRY IN FRANCE.

THE following is a translation from a late French publication ("Sur l'art du Dentiste") recently received from Paris by Dr. Parsons, Dentist, of this city :—

The business of the Dentist has been so much increased within thirty years in France, that when it is considered in its mechanical part, and as comprehending, also, all which relates to the treatment of diseases of the mouth, it produces an annual income of nearly six millions of francs.

At no period have all the departments of France united contained twice the number of dentists that practise in Paris; for it will be understood that we call none dentists but those who practise solely in that branch of surgery which relates to the diseases of the mouth; for if we shall give this name to all who only extract teeth, we should find at least one in every little village.

In the year 1790, there were only five dentists in Paris; in 1814, there were twenty; and in 1828, about a hundred and forty. We may place these hundred and forty dentists in ten classes, according to their annual receipts, as in the following table :—

Class.	Number in the Class.	Ann. inc.	Whole amount received by all of this Class.
1	5	40,000 fr.	200,000 fr.
2	6	30,000	180,000
3	6	25,000	150,000
4	8	20,000	160,000
5	8	15,000	120,000
6	12	12,000	144,000
7	15	9,000	135,000
8	20	6,000	120,000
9	25	4,000	100,000
10	35	2,000	70,000

Total 140 who rec. annually 1,379,000 fr.

We may number in the Departments about two hundred dentists, who receive annually, one with another, about 5000 francs each. This would give a total of one million of francs, which added to the income of the dentists in Paris, is 2,379,000. The apothecaries, perfumers and others in Paris and in all other parts of France receive from the sale of powders, elixirs, opiates, and other articles used for the mouth, an amount equal at least to that of the dentists of Paris and of the departments together,—to wit, 2,379,000 francs.

Now if we admit that among thirty millions of inhabitants in France, there are fifteen hundred thousand who attend to the preservation of their teeth, and who use only one tooth-brush a year at 75 centimes, we shall have a new total of 1,125,000 francs.

In bringing together these different products, we find that—

The annual receipts of the dentists in Paris are	1,379,000 fr.
———— of the dentists in the Departments	1,000,000
	<hr style="width: 100px; margin-left: auto; margin-right: 0;"/>
	2,379,000
———— of the apothecaries, perfumers, &c., in France	2,379,000
———— of the sellers of tooth brushes	1,125,000
	<hr style="width: 100px; margin-left: auto; margin-right: 0;"/>
Total	5,883,000 fr.

But granting that of this sum there is paid 630,000 francs for indispensable operations, such as the extraction of teeth and other services which properly come within the province of surgery, it results that the business of the dentist, considered in its mechanical part, occasions an annual expense which, at the lowest estimate, we must value at 5,253,000 francs. This result may surprise many, but we engage that it is as exact as it is possible calculations of this kind can be, in which we cannot, of course, avail ourselves of mathematical accuracy.—*Daily Adv.*

Aboriginal Skeletons.—Several skeletons of the aboriginal inhabitants were recently found at South Salem in this state, whilst the workmen in a manufacturing establishment were levelling the yard. They were buried but about two feet below the surface and in a state of preservation remarkably good, since more than 200 yrs. must have passed over them. These skeletons were found arranged in groups, two or three together, and lying on the side, with their faces turned to the east,—ready to greet the rising sun on the morning of the resurrection. Most of the bodies were adults, but three are said to have been children. It is supposed by the peculiar situation of the groups of skeletons, that those who make up each group must have been buried at the same time;—perhaps in the year 1617 when the plague raged with such mortality among the aboriginal inhabitants of that place.

Roots and Herbs.—One of the Steam and Herb fraternity, who calls himself Hiram Burnet, apologises in the newspapers for deviating from the "Thompsonian Practice;" it seems that this deviation caused his expulsion from the Root and Herb Steepery, and deprived him of his patient. The Delaware Gazette says, "The unfortunate sick man was taken from Dr. B. by some of his brother practitioners, and done for so that he died by steam in a reasonable time."

Deaf and Dumb.—Mr. Gallaudet, principal of the Asylum for Deaf and Dumb, at Hartford, advertises that in consequence of arrangements made with Massachusetts and Maine, a new class will enter on the 28th of October next.

REPORT OF DEATHS IN BOSTON,

The week ending Sept. 18, at noon.

Of accident, 1—cholera, 1—consumption, 3—complaint of the heart, 1—dysentery, 3—drown, 1—dropsy in the head, 1—inflammation in the bowels, 1—infantile, 2—liver complaint, 3—measles, 3—mortification in the bowels, 1—old age, 1—typhus fever, 1—unknown, 2. Males, 15,—females, 10. Total, 25.

ADVERTISEMENTS.

MEDICAL INSTRUCTION.

THE subscribers continue to receive and instruct Medical Pupils upon the terms formerly announced.

The Pupils are admitted to the medical and surgical Practice of the Massachusetts General Hospital, and receive private instruction from the subscribers.

JAMES JACKSON,
WALTER CHANNING.

For terms, apply to Dr. Channing, Tremont street, opposite Tremont House.
Sept. 22. 3t.

CARTER & HENDEE have just published,—The Constitution of Man, considered in Relation to External Objects. By GEORGE COMBE.

From the Preface to the American edition.

“Mr. Combe’s work should be placed with those, of which so many within a few years have appeared, which are devoted to the all-absorbing topic of Education. It treats of moral, intellectual, and physical education. This is not formally done under so many distinct heads. But the whole course of reasoning of the author, and the whole array of all his illustrations, have it always obviously in view to show how the highest cultivation of each of these may be most surely brought about.

“The publishers have printed this edition under a belief that there is much in the work to interest the community.

“It has a novelty to reward the general inquirer, and it presents the well known under novel aspects. There is one class amongst us who may study it with much advantage. Scholars are referred to, a class here too small to form a distinct order with habits of their own, and who insensibly fall into those which, although not mischievous, to the multitude on the score of health, too often make ill health the portion of the sedentary student, and bring upon him premature decay.—To all classes it is recommended, and the various learning and acuteness of the author well fit him to write a book which addresses its instructions to the whole community.”
Sept. 3.

CONSOLIDATED COPAIVA.

“**C**OPAIVA may be given in this form without the least inconvenience. Neither communicating taste, nor impart-

ing odor to the breath, it is also retained without the least disquietude or uneasiness to the stomach; and I am informed by Dr. Rosseau, that in large doses it does not purge.”—*Phil. Journal of Med. Sciences.*

See an article in this Journal, Aug. 18th.

OIL OF BLACK PEPPER.

This is a much more active preparation of Piperine. One drop is fully equal to six grains of the latter. It is a valuable adjunct to Quinine. One or two drops, added to six grains, will greatly increase the efficacy of that medicine.

For sale by NATHAN JARVIS, 188 Washington Street, where Physicians will find medicines at as reasonable terms as at any place in Boston.

Aug. 25.

eoptf.

BERKSHIRE MEDICAL INSTITUTION.

THE Annual Course of LECTURES will commence on the first Thursday in September, and continue fifteen weeks.

Theory and Practice of Physic by H. H. CHILDS, M.D.

Anatomy and Physiology, J. D. WELLS, M.D.

Medical Jurisprudence, S. W. WILLIAMS, M.D.

Theoretical and Operative Surgery, S. WHITE, M.D. and S. P. WHITE, M.D.

Materia Medica, Pharmacy and Obstetrics, C. B. COVENTRY, M.D.

Chemistry, Botany, Mineralogy and Natural Philosophy, C. DEWY, M.D.

Matriculation ticket, \$3. Fee for Lectures, \$40. Library ticket, \$1. Graduation, \$15.50. Board, including washing, lodging and room, \$1.75 a week.

Pittsfield, July 22, 1829. aug4tsept30

MEMOIR OF DR. HOLYOKE.

JUST published, and for sale by CARTER & HENDEE,—A Memoir of EDWARD A. HOLYOKE, M.D. LL.D., prepared in compliance with a vote of the Essex South District Medical Society.

Carter & Hendee have just received the American Journal of the Medical Sciences, No 8, August, 1829.—C. & H. receive subscriptions for this valuable work, and can supply the numbers from its commencement.
Aug. 18.

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

I.

HAY ASTHMA.

Observations on the Nature, Cause and Treatment of Hay Asthma.

By WILLIAM GORDON, Surgeon, Member of the Royal College of Surgeons, Edinburgh, &c. &c. &c.

THE variety of asthma which forms the subject of the present memoir, has scarcely, if at all, been glanced at by any systematic writer on the practice of medicine. We are furnished with various instances of dyspnœa, and other pulmonary affections, being produced by the inhalation of the effluvia arising from certain odoriferous and other substances, examples of which I myself have witnessed; but the catarrhal and asthmatic symptoms, occurring in particular individuals during the ripening of grass, and evidently caused by the smell given off from its flowers, have been but slightly noticed; and by some practitioners their existence is considered very questionable, if it be not altogether denied. There can be no doubt, however, that the complaint which is termed (though perhaps not very correctly) "hay asthma," does really exist; and although occasionally mild in its nature, yet for the most part it assumes a very formidable character, as will appear from the following history of it, which is taken from some well-marked cases that have fallen under my observation.

The disease first commences with a slight sensation of chilliness, accompanied with thirst, lassitude, drowsiness, and other indications of fever; at the same time the Schneiderian membrane becomes dry and irritable, and the patient is affected with an almost incessant sneezing, and an inexpressible itching or pricking in the fauces and trachea, and along the external auditory passage: the head is occasionally vertiginous or painful, but more generally it feels heavy or indescribably uncomfortable. These symptoms are soon succeeded by inflammation of the tunica conjunctiva, which comes on very suddenly, and after remaining for an uncertain length of time, vanishes as suddenly as it made its appearance.

After the lapse of two or three days, though sometimes much earlier, a tightness is felt about the chest, and the respiration begins to be obstructed, especially in the evenings, and is then always attended with a wheezing noise. This obstruction at first is but very trifling, and occasions little or no inconvenience; but it daily becomes more and more oppressive, and at length arrives at the very acme of severity. At this crisis a dreadful sense of suffocation comes on, together with an intolerable weight at the lower part of the sternum, and a deep, hard, dry, frequent cough, which tends very much to aggravate the difficulty of breath-

ing. The condition of the patient is now most distressing,—he cannot for a moment remain in the horizontal position; he gasps for breath; his eyes protrude; his face and lips are of a deep purple color; he throws open the doors and windows; rushes from one room to another in quest of a refreshing current of air; but, unable to find relief, he sinks down exhausted or half insensible. From this state he is roused by stimulants, or he gradually recovers by himself; but probably only to undergo a repetition of his sufferings. These symptoms, which usually make their attack about seven in the evening, but not unfrequently long before this period, continue five or six hours; they then begin to subside, and as the morning approaches, the patient falls into a short but restless slumber, from which he awakes with a sense of great debility, and a feeling of constriction across the chest.

Although there commonly takes place towards morning a considerable remission of the asthmatic fit, yet the symptoms never quite go off, but remain throughout the night and following day, and in the evening assume their accustomed severity. During the paroxysms the pulse is weak and irregular, and ranges between 85 and 100; the tongue is white, and the urine is high-colored, and discharged in small quantities.

The paroxysms do not always present themselves in so violent a form as I have now described; the patient sometimes experiences nothing of that overwhelming dread of suffocation which I have mentioned above, and in some instances the attack is so remarkably mild, that he is affected with only sneezing, headach, and inflammation of the conjunctive and Schneiderian membranes.

The cough is never attended with any expectoration, and very often it does not come on till the other symptoms have in a great measure abated. In the latter case it is never so frequent nor distressing as when it appears in the earlier stages of the disease.

Hay asthma seems to be peculiar to youth and middle age, and is never observed in the later periods of life.

Many examples, as I before intimated, have been recorded of great distress and disorder of the respiratory organs being occasioned by the odor exhaled from aromatic or pungent bodies; and there can be no doubt that the cause of the singular complaint which I have endeavored to describe, is the aroma emitted from the flowers of grass, particularly from those of the *anthoxanthum odoratum*, or sweet-scented vernal grass. If the patient remain closely shut up in a house, even although this be situated in the midst of the richest grass, he suffers considerably less than if he walk abroad into the fields; and if he remove from the country to the centre of a large town, or go out to sea, he is never at all affected; but the moment he comes into, or approaches a meadow, he immediately begins to sneeze, and returns home with inflamed eyes, wheezing, and difficult respiration. I have known a patient wander about his flower garden for several hours, or ride through corn fields or plantations, and yet not experience one disagreeable sensation; but as soon as he arrived at the vicinity of a meadow, the sneezing and ophthalmia have instantly appeared. I have said that the *anthoxanthum odoratum* seemed to be the principal exciting cause of hay asthma, and I am induced to come to this conclusion—first, because

this plant is one of the most strong scented of the grasses ; and, secondly, because as soon as it begins to flower, and *not till then*, the asthma commences ; as the flowers arrive at perfection, the disease increases ; and after they have died away, I have remarked that patients could pass through the most luxuriant meadow with total impunity. The disease then should rather be denominated grass asthma than hay asthma, since hay seems incapable of producing it. This asthma appears, from the scanty excretion of mucus from the lungs which attends it, to consist chiefly in a spasmodic constriction of the bronchial vessels, and of the muscles concerned in respiration.

It will be evident, that residing in a large town, or a voyage at sea, during the season in which the flowers of grass, and especially of the *anthoxanthum odoratum*, are in bloom, and in a state of their greatest vigor, will prevent the accession of hay asthma. But these remedies are not always convenient, nor feasible. It therefore becomes necessary to invent some other means of administering relief, and such as may be at the command of every one. I shall, therefore, give an account of what measures I have adopted, and have found most successful, not only in mitigating or removing the paroxysms when present, but in warding off their attack altogether.

[The Treatment, in our next.]

II.

ON A DISEASE OF THE TYMPANUM.

By JOSEPH SWAN, Esq.

IN tracing the tympanine branch of the glosso-pharyngeus nerve, which has been so particularly de-

scribed by Jacobson, much of its distribution may be seen on the transparent membrane lining the tympanum when this part is perfectly sound, but when it is diseased a very considerable difficulty is experienced. In an attempt to trace this nerve in the head of an old woman, the membrane lining the tympanum was not only thickened, but there was at the same time some roughness of the bone. In the head of a man, who had a suppurating node on the forehead, and whose posterior nostrils were stopped up by adhesions of the soft palate, this membrane was also thickened ; the spheno-palatine ganglion was very considerably enlarged. In the dissection of the head of a very young woman the schneiderian membrane, covering the inferior turbinated bone of the left nostril, adhered very considerably to that of the septum, so that a very little passage was left for the air ; there was a perforation in the *membrana tympani* of the same side, and purulent matter was contained in each tympanum. The membrane lining the tympanum was so much thickened that the nerves could not be observed.

I believe deafness does not so often depend on a disease of the *portio mollis* as has been supposed, but much more frequently on an inflammatory action attacking the membrane lining the tympanum, and involving these small branches of the tympanine nerve. There are very few deaf people who cannot hear music or singing, or who cannot hear conversation, whilst they are in a carriage in motion. But it is not so with those who are nearly blind, for when the optic nerve is paralysed, no light, nor any modification of it

can produce perfect sight, and it must be the same with the auditory nerves with respect to sound. I will not deny that a very strong light may enable a person who has a slight degree of vision to see some objects almost in the same manner as a very deaf person hears with a speaking trumpet. I believe, therefore, that deafness depends very frequently on the inflammatory action having impaired these minute branches of the glosso-pharyngeus nerve, which are distributed on the tympanum; and although many of the noises may depend on the disordered functions of the portio mollis, I nevertheless think they may arise, too, from these small branches of the glosso-pharyngeus, and their communication with the grand sympathetic in the carotic canal. It may be asked how music, &c. dispose the ear for receiving the fainter sounds, as those of the voice. I conceive these excite the parts about the tympanum in the same way that stimulating things would any other organ; and that by this excitement such a degree of action is imparted to the whole as is present in a healthy state of the organ. When the functions of the gustatory nerves are impaired, people cannot taste properly; but when these have been stimulated with a little wine, the taste again becomes exquisite. This may not be thought a fair argument; but I conceive the wine becomes a local stimulus, although it may, at the same time, be a general one, and by both means effect the same purpose.

The consideration of the distribution of the tympanine branch of the glosso-pharyngeus, leads to the conclusion that the tympanum performs more important functions in

the production of hearing than have been usually ascribed to it; and that the failure of remedies in cases of deafness, which have been termed nervous, may have proceeded very much not only from the obscure situation of the tympanum, but from the misapplication of the remedies themselves. And I conceive, therefore, as a thickening of the membrane lining the tympanum, and involving such delicate nerves, can be so often observed, that many of the diseases of the ear may be more within the reach of art than has been contemplated; and that by subduing the inflammatory action at its very onset, before the structure of the delicate parts has become so much changed as permanently to impair their functions, many of the worst cases might be prevented.

Medical Gazette.

III.

LIVING MONSTERS.

Observations on a Human Monster belonging to a new Genus.

M. GEOFFROY ST. HILAIRE, in May 1829, read to the French Academy of Sciences a memoir on a new production of the human species, struck with monstrosity in the fourth month of intra-uterine life, and on the occurrence of circumstances which produced the monstrosity, by disturbing a formation, which until that period was regular. On the 26th April last, was born, in the Rue du Faubourg St. Martin, of a woman aged 24 years, who had no children previously, a child of regular period, and of large size. On measuring it, from the projection of its eyes, its length was found to

be twenty inches. The upper region of the cranium was wanting. The woman had been attended by Madame Fremaux, midwife, and Dr. Brion, both residing in the same street. The latter has drawn up a notice, in which he has described the defects of the conformation which the child presented. M. St. Hilaire remarked, that it is to him, therefore, that the observation in question belongs. At a meeting of anatomists called by Dr. Brion, one of the medical men present made the most singular assertions as to the causes of the monstrosity. "The monster has large eyes," said he, "which is because the mother had her view constantly fixed on large eyes which she singularly loved. It has long and pointed ears, because the imprudent mother had her caressing hands continually upon the long ears of her dog." M. Geoffroy St. Hilaire mentioned this fact for the purpose of ridiculing the explanations which some medical men still give of cases of monstrosity. After enumerating the different kinds to which the monster in question may be referred, he showed that it comes nearest to the *Thlipsencephali*. Now, in this monstrosity, the fœtus going on in a regular manner until about the fourth month, only deviates at a later period, and under the influence of some violent cause, from the normal organization. Confiding in his previous researches, he did not hesitate to declare, that the mother of the new and very singular *thlipsencephalus* which was before him, had been rudely struck about the third or fourth month of gestation, and even added that it was probably by a violent kick. This explana-

tion was utterly rejected by the medical man who had proposed the singular one mentioned above. On questioning the woman, it was in fact discovered, that, at the period of four months' gestation, she had actually been struck and severely wounded by a violent kick, which hit upon the right side of the uterine region. Dr. Brion's inquiries led him to the following results:—

Conception took place on the 19th June, 1828; lesion produced by wound, 17th November, 1828; birth accomplished on the 26th April, 1829; total duration of gestation, 282 days.

Until the period when she was struck, that is to say, during the first four months of gestation (112 days), the mother enjoyed excellent health; but from the 17th November to the period of delivery (during the next five months) she did not cease to experience in the lower abdomen, and in the whole pelvic region, pains more or less acute, which she attributed to the brutality of which she was the victim. It was also a kick on the lower belly which had produced the organic deviations of the second species of *thlipsencephalus* observed by M. Geoffroy; but this species, as well as the first, presented smaller dimensions, the individuals to which they belong having been only sixteen inches in length. On examining with more attention, and with the aid of dissection, the new *thlipsencephalus* which was submitted to him, he found that it differed from the first two by characters so important, that he was led to consider it as a new genus, to which he gives the name of *Nosocephalus*. Like the *thlipsencephalus*, it is the natural and al-

most necessary result of a violence exerted upon the organ which contains the product of conception, only at a more advanced period than that at which the deviation would lead to the production of a *thlipsencephalus*. The author concluded with some considerations respecting the theory of monsters. Recurring to the observation which formed the subject of his memoir, he remarked, that the manner in which it was possible to guess, from the inspection of a monstrous production, the cause to which the monstrosity should be referred, and the differences of deviation observed in the *nosocephalus*, which accord so well with the more advanced period at which the perturbing accident took place, leave no doubt respecting the theory of the formation of these kinds of monsters; so that at least, in well defined cases, science possesses facts which may be considered as attaching themselves to principles sufficiently demonstrated to be capable of being applied to use in the practice of medicine. The theory is so perfect in this respect, that, on the inspection of certain monstrosities, it is possible to assign the month, the week, and almost the day, on which the perturbing accident has interrupted the regular order.

Jameson's Journal.

A Double-headed Female.

A late London journal gives a description, accompanied with an engraving, of a female infant, now living in the town of Sassari, in Sardinia, of the age of five months, having two heads and four arms, or the upper part of two well formed bodies united at the breast. The rest of the body with the legs

are of ordinary form and proportions. The child is thin but in all respects well. One head sleeps while the other is awake, one is nourished by the mother and the other by the nurse, and they are nursed alternately. One head sometimes cries while the other is quiet. The left head is somewhat larger than the other.

American Traveller.

Connected Sisters.

In the following letter we have to record another instance of monstrosity. The appearance among us of the Siamese boys has called attention to this subject throughout the country, and will be the means probably of bringing before the profession many similar cases which have never yet been known beyond the town or neighborhood in which they have occurred.

Madison Barracks, Sacket's Harbor, N.Y., Sept. 9, 1829.

SIR,—As the arrival of the Siamese youths has excited much interest in your city, and among medical men generally, I take the liberty of reporting a similar case, and one that came under my own inspection.—I attended a lady who was delivered of twin female children between the eighth and ninth month of gestation; and without giving the details of the delivery, I will only observe that their probable weight was about twelve pounds,—that they were firmly united from the clavicles to the last false ribs, having apparently one sternum common to both, and one umbilical cord entering at the point of union below. There was a perfect development of every external part, and they were living five minutes before delivery.

If you think this case of any importance, you are at liberty to make such use of it as you please.

Respectfully,

SAM'L G. J. DECAMP,
Assistant Surgeon, U. S. A.

BOSTON, TUESDAY, SEPT. 29, 1829.

DR. GODMAN'S ADDRESSES.

DR. JOHN GODMAN, of Philadelphia, has lately published a series of occasional addresses possessing greater variety in their subjects, and exhibiting more spirit in the manner of treating them, than could have been expected from the nature of the occasions which called them forth. The subjects of these essays are as follows:—1. Monitions to Students of Medicine. 2. Anatomy taught by Analysis. 3. Professional Reputation. 4. Dissection. 5. The study of General Anatomy. 6. Natural History. 7. Design. 8. The Mechanism of the Human Body. 9. A valedictory Address to Students. With an Appendix on Tight Lacing.

The first, third, and last of the addresses, contain excellent advice to medical men about to commence their course of study. Dr. G. is disposed to place the standard of medical character sufficiently high to be worth the ambition of the most gifted members of the community. The physician must not only acquaint himself with every branch of his profession, but he must keep pace with the learning, the intelligence and the spirit of the times; he must qualify himself to meet on fair if not equal ground, men of finished education in other professions and

pursuits; he must also be prepared to instruct the ignorant, to decide the wavering, and to give aid and counsel in the various embarrassments and difficulties which his friends may meet. Above all he must, in his professional course, act from cool deliberate judgment. He is not to commence a mere routine, and follow on, regardless of new facts, and unconscious of the improvements which are taking place in his science. Dr. G. observes, with great truth and force of expression, that the physician has no right to content himself with doing as well as he can. His duty is to learn to do absolutely well; and it is a shameful apology, when the health or life of a patient has been sacrificed through his ignorance, that he acted to the best of his ability. He is answerable for his ignorance as well as his neglect; not indeed to others, because they cannot judge how far his acquisitions have been limited by his capacity; but to himself and his own conscience he is answerable, if he has let the opportunities and means of acquiring knowledge pass unimproved, and has in consequence found himself unequal to the duties which he undertakes to execute.

Anatomy taught by Analysis.

Under this title, Dr. G. considers the advantage of dissection being performed in the lecture-room in the presence of students, rather than exhibiting to them a subject in which the parts have previously been separated for demonstration. He thinks the amount of information imparted and the clearness of the notions in-

culcated, to be infinitely greater in the former mode. The student sees the parts in their natural positions, as they are presented by the removal of successive layers, as it were, of integument, and while he acquires the science of Anatomy, receives also a practical lesson to guide him in making his own researches.

There is much truth in this reasoning, and the mode of lecturing alluded to is, to a certain extent, undoubtedly the best. Few lecturers however on anatomy devote sufficient time to their course to perform all the dissections required in presence of their classes; nor would a lecture thus conducted have sufficient animation and interest for the majority of students. The truth is, that it is impossible for young men to learn anatomy in a lecture-room, however excellent the demonstrations which may be given. To acquire any knowledge of this science, they must dissect for themselves. It is true that they will commence doing so more neatly and adroitly, if they have once or twice witnessed the movements of a skilful dissector;—but for the anatomist to go through the whole dissection of a subject in order to teach his pupil how to use his knife, would be as absurd as for a novice in *Masonic* mysteries to watch the erection of a complete edifice, that he might learn how to place one brick accurately upon another. Some dissection in a lecture-room is inevitable; because successive portions of a demonstration may require states of the parts absolutely incompatible with each other; and therefore their relations may require

to be altered during the delivery of the lecture. This contingency provided for, the subject may be very properly prepared for demonstration beforehand; the parts carefully separated, and then replaced so as to be called up in their natural order by the lecturer. The whole is shown, the parts also are exhibited, and the problem proposed to the student is, to take another whole precisely similar in its construction, and separate that whole into similar parts. That anatomy ought to be taught by analysis is certainly true; we apprehend no man in his senses would think of teaching it by synthesis; and provided the true method of teaching be adopted, we regard the greater or less use of the knife in the lecture-room as a point of minor importance.

Study of General Anatomy.

In the fifth essay, Dr. Godman vindicates the importance of an accurate acquaintance with anatomy to the medical practitioner; and deprecates with great earnestness the existence of those prejudices, among all orders of society, which oppose the greatest obstacle to its successful cultivation. He declaims vehemently against the hostility exercised against dissection, and the opposition of friends to post-mortem examinations. Such prejudices he maintains ought long since to have been exploded, along with the superstitions of the dark ages, of which they make part. Their continuance at the present day is a disgrace to the age; a foul blot on the character of a Christian people, who, professing to believe the immortality and immateriality of

the soul, yet regard with such degrading attachment the frail tenement of clay, which its vital inmate has quitted forever.

We confess ourselves not without apprehensions that the eloquence lavished on this topic by medical writers here and abroad, has been most unprofitably spent. We may call it ignorance, prejudice or materialism, as we please, but it is certain that there is something revolting to the human mind in the idea of mutilating the remains of one, who but a few days since was living and breathing like ourselves; and that it is much more according to our notions of respect to our deceased friends to deposit their bodies in the earth, than to consign them to the knife of the anatomist. Nor can this repugnance be regarded as one of the errors of our education. The sentiment has existed in all ages, and in every degree of civilization. The bodies of deceased friends, whether buried, burned or embalmed, have been universally held sacred and inviolable. To the professed anatomist, in whom habit has produced familiarity with his occupation, there may seem to be nothing more unpleasant in prying into the structure of a corpse than in examining that of a watch, or any other piece of mere human mechanism. But these notions are not so easily received by the generality of mankind. By the majority, the idea of dissection, and even of examination, is viewed with horror; and the proceedings of the dissecting-room, whether seen or described, are regarded as an utter abomination. It is true that from considerations of respect

to a physician, or from the more patriotic desire of promoting public welfare, examinations are permitted. This is obviously a sacrifice of feeling to duty; and even the strongest sense of obligation frequently fails in reconciling the mind to what is still held as a sort of sacrilege. Who then are they that are to go farther, and to give up the dead to the knife of the anatomist? Not the rich surely; this is scarce even pretended to be hoped for. We may safely add, not the poor; for the price is too much, at which even the poorest will barter away the objects of their respect and affection. Of all these things we should be fully apprised.

But let us remember, and urge the consideration on others, that there are those who die *without friends*; and it is on the circumstance that individuals die in public institutions, whose remains are allowed to be interred without the attendance of a solitary mourner, that anatomists, both here and abroad, have founded a strong claim to legislative enactment in behalf of their science. It is needless to say how strong is the appeal which they have made, on this ground, to the good sense and good feeling of assemblies composed of those entrusted, as the wisest and the best, with the solemn duty of making laws for the human race. The answer which may be expected to such appeal, in the present state of public sentiment, may be learned from the history of the late bill introduced into the British Parliament. They manage things better in France, it is true; but whether they are to be managed any better in this country,

must depend entirely on the profession itself. If every individual member of the faculty will exert his influence in his own private circle, then may we hope for such a change as will enable us to heal the sick, and the public to feel secure against the ravages of the resurrectionist.

In the address on the study of General Anatomy, Dr. G. reviews the discoveries of Bichat and the doctrines of Broussais, which he thinks have united to introduce juster views in regard to the nature of diseases, and more judicious modes of treatment, than had before been possessed by medical practitioners. Too much honor certainly cannot be paid to the name of Bichat. His labors prove a union of genius and industry such as fall only to the lot of the favored few, destined to mark and ennoble the character of the age in which they live; and the philosophical mode of investigating morbid changes which his works have so much contributed to promote, has produced almost a new era in medical science. Whether Broussais is entitled to equal distinction among the benefactors of mankind, may be better decided when his peculiar views have been more fully submitted to the test of experience.

Natural History.

In discoursing on Natural History, Dr. G. traces the various forms of life, as it is exhibited in various degrees of perfection, from the amorphous vegetable, scarcely to be distinguished from the rocky bed to which it is attached, through the different orders of animals up to man.

He remarks on the singular fact, that some vegetables evince a sensibility and irritability independent of those which serve to maintain their vitality and growth. Instances of this are found in the sensitive plant, and likewise in the *Dionea muscipula*, or Venus' fly-trap, which grows in some of the southern states. The latter plant is said to possess the singular property of folding its leaves, when a fly lights upon them, so as to detain or crush the aggressor. The author conceives this to be a strong argument that these plants actually *feel*, in the common sense of the term, though he is not ready to admit that they exercise volition. We are unwilling to allow that the two properties are separate in the instances alluded to, nor do we see the necessity of admitting the existence of either. If the plant moves because it feels a touch, it seems unreasonable to deny it the intervention of a will. Again, it appears very improbable that a sensibility to, and the wish and power to avoid injury, should be limited in its operation to a single noxious agent, and that of the slightest description. Sensibility and motion in animals are always commensurate, and they constitute their security against danger and injury. In this instance, on the contrary, the sensibility would appear to be peculiarly exquisite, and the means of resistance or escape almost nothing. We should be disposed to regard the phenomenon, in both these productions, as depending on a principle of *irritability* distinct from sensibility.

In speaking of the nervous constitution of animals, our author follows

the classification of Bichat, and considers it divisible into two systems,—those of organic and of animal life. He appears however to have somewhat deviated from the path laid out by his illustrious guide, and the distinction between the two systems, as made by him, wants much of the clearness which it possessed as laid down by the author of the *General Anatomy*. A single quotation, and a short one, will serve to illustrate our meaning.—“The nervous system of organic life is found in all those animals which, though destitute of brain, are capable of performing some of the curious actions which, studied by themselves, would imply the highest efforts of reason and forethought, did we not know that such actions are performed without reference to reason, and are entirely independent of all influence of education. Such are the actions of the bee in constructing the cells of her comb, of the wasp in gathering the materials for the construction of its nest, and in procuring food for its young.” If by this extract is understood, as the words obviously seem to imply, that the bee and the wasp are destitute of animal nervous organization, the assertion is wholly at variance with the views of Bichat; since, according to this author, all action and motion which are voluntary on the part of the animal, take place in virtue of such organization. The organic system, properly so called, serves merely for the preservation of the animal itself, and has no more to do with the movements of the bee in constructing her cell, than with those of the man in building his ha-

bitation. We notice this instance of inaccuracy as one of a very small number in the work. The author himself remarks that most of those who condemn the system of Bichat, show that they either have not read his works, or have mistaken his meaning. We regret that he should have led us to advert to the fact that some of his admirers have laid themselves open to a similar accusation.

The distinction intended to be set up, however, between the superior and inferior orders of animals, is one of no small moment, since it establishes a boundary between reason and instinct; attributing the former to the superior tribes, and limiting the inferior to the possession of the latter. Whether our author has taken too bold a step in admitting any portion of the brute creation to a share of this much contested prerogative, we know not; but we do not well see how he could have done otherwise, in view of those facts which the study of *Natural History* presents to every candid observer. Speech and reason, it is said, are the characteristics of man. But what is reason? We venture to maintain that no definition can be given of this faculty which will include the human race and exclude the animal. Is it the province of reason to propose to itself an end, and to devise means suitable for the attainment of that end? The dog, whose master has met with an accident which disables him from proceeding on his journey, sets off at once in pursuit of assistance; attracts if possible the notice of some passenger; urges him by every mode of entreaty to turn and follow; and guides

him quickly to the scene of suffering. The bee, whose waxen structure has been injured, repairs the damage inflicted with the greatest despatch and the most consummate skill. The elephant, whom some unthinking visiter has been wanton enough to provoke, makes no show of unavailing rage, but marks out the aggressor, knows him again at the end of weeks or months, even among a hundred others, and generally contrives, by some unexpected mode of retaliation, to make him pay a severe penalty for his malice or folly. If then forethought and contrivance constitute reason, we see not how we can deny its possession, in a considerable degree, to the more favored of the animal creation.

But it is said that animals are not susceptible of being improved by education. So far as this relates to successive generations, the assertion cannot and need not be answered. It is evidently not intended by nature, that the habits and mode of living of the inferior animals should be materially altered in this manner. Yet the domesticated animals transmit their acquired pacific habits to their offspring, and thus produce a sort of hereditary improvement. A more curious fact is, that pointers which have been properly trained, communicate to their young, in an increased degree, the faculty of acquiring the habit which renders them valuable to their possessor. In a more limited sense, all animals are improved by education. The powers of song and of flight, acquired by the young bird from its parent, are a proof of this, no less than the artificial en-

dowments conferred on learned pigs, dogs, &c., by human instructors. This capacity for receiving instruction is confined confessedly within narrow limits; nor is it sufficient to say that these are formed solely by the want of oral communication; for the deaf and dumb, among human beings, learn much farther and faster than animals: it is limited by the constitution of nature; but still its existence cannot be denied; and this is quite as much as is necessary to the point in question.

It is perhaps proper to advert to one view of this subject, in which it assumes apparently a higher importance than is at all due to it as a mere speculative discussion. It may be said that, in admitting the affirmative of this question, we necessarily allow that the inferior animals have souls,—and thus involve ourselves in the dilemma of denying that the soul is immortal, or of admitting that these, our humble companions on earth, are to share with us the enjoyments of another state of existence. We do not regard either alternative with any excessive alarm. We have better security for a future life than can arise from any speculative distinction between discernible and indiscernible, between matter and spirit; and if the annihilation of soul is every way possible in itself, it is still impossible for those who have the promise of immortality. Neither has the creed of the poor savage, that “admitted to an equal sky, his faithful dog shall bear him company,” the power to inspire us with any terror, though the notion is too vague and visionary for serious discussion.

On the other hand, is there nothing to dread in admitting an instinct arising out of organization merely? If something so near reason can result from a mere skilful arrangement of parts, it is by no means extravagant to infer that reason itself is the product of a still nicer construction. To admit this, were to countenance materialism in its grossest form. Met on both sides by difficulties so serious, we seem compelled to adopt in our conclusions a middling course. Some share of the reasoning faculty may safely be conceded to the inferior animals without material injury to our own prerogative; and at all events it is better to raise them toward our own rank in the scale of being, than by vilifying those faculties which we possess in common, to involve ourselves and them in a common degradation.

Design.

In his address to the academy of Design, our author makes some very judicious remarks on the anatomical knowledge required by the artist, in distinction from that which is needed by the physician and surgeon. The models of Grecian sculpture, in which every part of the form is so perfectly developed, receive from him a just tribute of admiration. It is obvious, that in order to produce symmetry in a living body, it is necessary to have given to each muscle its due proportion of exercise. Hence the difficulty of finding, in an artificial state of society, a perfectly proportioned figure. Artisans, according to their various occupations, exercise particular sets of muscles; and thus

in each class of these persons, one portion of the frame will appear to be developed out of proportion to another. The want of due muscular development is still more obvious, though for a different reason, in the studious and sedentary class. On the other hand, the savage himself is led, from habit or necessity, to adopt peculiar movements in preference to others, so that his gait becomes awkward and his form impaired. The best forms among savage tribes are, according to our author, those of the Osage Indians, and others similarly situated. As their principal exercise is horsemanship, they are free from the defects observable in other Indians; their frames are remarkably well proportioned, and their movements almost uniformly graceful.

Mechanism of the Human Body.

The eighth essay, according to its title, treats of the mechanism of the human body. This subject is a novel one, and when pursued further than it appears to have been as yet, will be extremely interesting.

The remarks on Tight Lacing, which conclude the volume, contain an eloquent and forcible appeal to the ladies on their indulgence in so pernicious a practice. As these remarks have already appeared in our pages, it would be superfluous to say that we admit their correctness, and approve of the spirit in which they are written. With regard to the good which is to be done by writing on this subject, we are not very sanguine in our hopes. Fashionable follies are not easily put down by

direct attacks, either from the pulpit or the press. Something may be done by rendering a custom ridiculous, but very little is to be effected by gravely proving it to be wrong. The Doctor's anecdote about the servant-maid and the tea-kettle is, for domestic use, fairly worth the whole of his argument and his invective together. If those who decry tight lacing really expect to make converts among the fair victims of this injurious practice, they need do no more, in order to be undeceived, than to attempt enforcing their doctrines on their own wives and daughters. Reform, like charity, may well begin at home; and if the reformer fails there, he will be the less disappointed by ill success abroad. The truth probably is, for we will not be positive on this point, that the existing rules in regard to dress do not require lacing to be carried to that degree in which it is attended with injury or danger; and to deny that in a moderate degree it improves the figure, would imply, in respect of taste, something little short of total depravity. Those who, from excessive vanity or a worse motive, choose to straiten their persons to one half the natural dimensions, deserve the ill consequences of their folly and wickedness; but to hold a custom answerable for all the evils of its abuse, seems scarcely conformable to reason and to justice.

It is needless, perhaps, after this analysis of Dr. G.'s work, to add that it will not diminish the high reputation which the author has already acquired for his labors in Natural History and Physiology. The volume is replete with excellent philo-

sophy, pure morality, and an evident zeal for the promotion of science; and the sentiments are conveyed in a style which, if sometimes too ambitious for the subject, is always animated, and generally elegant. The title, after all, scarce does justice to the collection. It is in fact, as we have considered it, a series of medical essays, and as such ought to have a place in the library of every practitioner.

EXCISION OF THE SUPERIOR MAXILLARY BONE FOR OSTEO-SARCOMA.

THIS operation, which has hitherto been followed by fatal consequences, has been successfully performed in the Hospital at Lyons, by M. Gensoul, Chirurgien-en-chef. A professional gentleman who visited the cabinet of M. G., which is peculiarly rich in specimens of diseased structures, says:—

Among others, he produced a specimen of osteo-sarcoma of the maxilla superior of the left side, which he had extirpated some months previously, together with the greater portion of the maxilla. The method pursued was, to use his own expression, "chiseling" out the disease; and I was astonished to hear him say, it was completed with scarcely any hemorrhage, no vessels requiring ligature after the superficial branches divided by the first incisions were secured. The mass excised was of considerable thickness, and contained six teeth, the farthest incisor and five beyond. The patient recovered without anything remarkable occurring, and M. Gensoul exhibited a drawing taken when he left the hospital, in which, though the scar presented rather a formidable appearance, the deformity in outline was not very considerable. He did not expect any return of the disease.

M. G. also mentioned a second case of the same kind, which he had

operated on since the former, and with an equally favorable result. The tumor was smaller, and had not been preserved. This patient, however, had but just left the hospital.

Ligature on the Aorta.—We understand that the operation of applying a ligature on the aorta has been very recently performed at the Exeter Hospital, by that able and intelligent surgeon, Mr. James, for an aneurism of the external iliac artery, situated very high up. A ligature was, in the first instance, placed on the distal side of the aneurismal sac, on the femoral artery; which measure having failed to produce the desired effect, and symptoms of the most urgent description having supervened, the aorta was secured after the manner adopted by Sir A. Cooper. The patient survived the operation but a very few hours.

Prov. Med. Gazette.

Quicksilver in Constipation.—A severe case has been recently published in a London Journal, in which a stricture of the rectum proved fatal, after many potent remedies had been administered without the least benefit. Calomel, colocynth, and croton oil failed to force the barrier, and half a pound of quicksilver was given two days before the patient's death.

On examining the intestinal canal, the rectum was found to be of the enormous length of three feet, and so much contracted, about six inches above the sacrum, as scarcely to admit the tip of the finger. Above the stricture the bowel was greatly distended with fæces, and part of the quicksilver was lodged in the sigmoid flexure of the colon.

Close Imitation of Nature.—Dr. Abner Horton, of New-York city, has succeeded in forming an artificial eyelid for a black boy. This important operation was performed in a short time, and in a few days afterwards the boy had a very sightly eye, answering all the purposes of a natu-

ral one. The ball of the eye had been gored by an ox, and several attempts had been made to unite or restore the detached eyelid by other physicians, which all proved abortive.—*Daily Adv.*

Triple Dentition.—A gentleman in Portland, Maine, at the age of 75, years, had an entire new set of teeth, which he lived to exercise and enjoy as long as the first set. This gentleman, who is since deceased, was a relative of the Editor, who can vouch for the correctness of the statement.

A Dyspeptic.—There is now in the Hospital near York, Pennsylvania, a young woman, aged about 16 years, who weighs 364 pounds, and measures 4 feet 9 inches in height, and 4 feet 6 inches round the waist.

A black man, with a wooden leg, made application to the commissioners of the alms-house for assistance. "What do you do for a living?"—says one. "Why," said the black, "I opens oysters in season, and picks up a crumb." "And what else?" "Why I cleans boots when I can get any to clean." "Well, nothing else?" "Why yes, I sometimes *Doctors.*" "Ah, and can you cure the rheumatism?" "Yes sir," said Cuff, when it does'nt reach the marrow of the bone."

WE acknowledge the receipt of a treatise entitled, *Instructions and Observations concerning the use of the Chlorides of Soda and Lime*; by A. G. Labarraque. Translated by Jacob Porter.—ALSO, *A New Theory of Life*; by Dr. Baker, of Pennsylvania.

DIED.—In Providence, Dr. Harvey Robinson, æt. 42.—In Warner, Dr. Henry Lyman, æt. 43.—In Louisville, Ky. Dr. Joseph Buchanan, æt. 43.—In Cornwall, Dr. Isaac Marsh, æt. 53.—In Chillicothe, Dr. Edward Tiffin, æt. 64, formerly Governor of Ohio, and late Surveyor General of the United States.—In Keene, Dr. Josiah Goodhue, of Hadley, Mass. æt. 70.—In New Orleans, Dr. Samuel Ellis, Surgeon Dentist.—In Belfast, Dr. William Poor, æt. 53.

ADVERTISEMENTS.

ANATOMICO - SURGICAL DRAWINGS, and Descriptions of all the Surgical Operations, according to the most approved methods. By L. J. VON BIERKOWSKY. Translated from the German. In two volumes, and 570 drawings on 58 folio plates.

EXTRACTS FROM THE PROSPECTUS.

"Encouraged by the approbation of the Medical Profession, it is proposed to publish a work under the present title."

"This work contains 570 drawings, on 58 plates folio; to which is annexed, in two volumes 8vo. a concise explanation of each surgical operation. The plates exhibit not only the parts interested in operations, in their natural position and size, but, what is much more important, represent the different acts or stages of the whole operation, while others exhibit delineations of such morbid affections as consist in the change of the natural position, structure, color, &c. In order to afford the work at a moderate price, the plates will be Lithographic; and for the purpose of securing perfect accuracy, engagements have been entered into for their preparation in Berlin, under the especial direction of two of the most distinguished Professors of the University of that city."

A specimen of the translation, and the plates, is deposited for inspection at the Bookstore of CARTER & HENDEE, who receive subscriptions for the work.

Subscribers will be furnished with the work, and the first impressions of the plates, at the price of \$30.

The subscription list will be open until the 1st of November, 1829, after which period the price of the work will be raised to \$40.

P. S. For the accommodation of subscribers the work will be issued in five Numbers, at \$6 each, payable on delivery. Sept. 29. 18202N1D.

BERKSHIRE MEDICAL INSTITUTION.

THE Annual Course of LECTURES will commence on the first Thursday in September, and continue fifteen weeks.

Theory and Practice of Physic by H. H. CHILDS, M.D.

Anatomy and Physiology, J. D. WELLS, M.D.

Medical Jurisprudence, S. W. WILLIAMS, M.D.

Theoretical and Operative Surgery, S. WHITE, M.D. and S. P. WHITE, M.D.

Materia Medica, Pharmacy and Obstetrics, C. B. COVENTRY, M.D.

Chemistry, Botany, Mineralogy and Natural Philosophy, C. DEWY, M.D.

Matriculation ticket, \$3. Fee for Lectures, \$40. Library ticket, \$1. Graduation, \$15,50. Board, including washing, lodging and room, \$1,75 a week.

Pittsfield, July 22, 1829. aug4tsept30

MEDICAL INSTRUCTION.

THE subscribers continue to receive and instruct Medical Pupils upon the terms formerly announced.

The Pupils are admitted to the medical and surgical Practice of the Massachusetts General Hospital, and receive private instruction from the subscribers.

JAMES JACKSON,
WALTER CHANNING.

For terms, apply to Dr. Channing, Tremont street, opposite Tremont House. Sept. 22. 3t.

HARVARD UNIVERSITY.

MEDICAL LECTURES.

THE MEDICAL LECTURES in Harvard University will begin in the Massachusetts Medical College, Mason-street, Boston, the third WEDNESDAY in October next, the 21st, at nine o'clock, A. M. Anatomy and Surgery, by Dr. WARREN. Chemistry, Dr. WEBSTER. Midwifery and Medical Jurisprudence, Dr. CHANNING. Materia Medica, Dr. BIGELOW. Theory and Practice of Physic, Dr. JACKSON.

Students attending the Medical Lectures are admitted, *without fee*, to the Surgical Operations and Clinical Practice of the Massachusetts General Hospital, during the courses.

Aug. 4. W. CHANNING, *Dean*.
eoptOct21.

ATREATISE on the Scrofulous Disease, by C.G. HUFELAND, Physician to the King of Prussia, &c., translated from the French of M. Bousquet, by Charles D. Meigs, M.D., is just received and for sale by CARTER & HENDEE.

Sept. 8.

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

THE BOSTON
MEDICAL AND SURGICAL JOURNAL.

VOL. II.]

TUESDAY, OCTOBER 6, 1829.

[No. 34.

I.

EFFECTS OF PHOSPHORUS AND OF
HEAT ON THE ANIMAL BODY.

THE only *novelty* that we know of at present likely to interest our readers, is the appearance on the stage of a M. Chabert, who professes to eat arsenic and drink prussic acid, and with the wonders of whose exploits some of the newspapers have lately been teeming.

The general impression of those who have seen Chabert is in his favor, in so far as regards the fact of his swallowing certain substances which, on the generality of mankind, act as poisons. At his last exhibition, for instance, he swallowed twenty-two grains of phosphorus; and on a former occasion is said to have taken two scruples. The phosphorus was brought by Sir G. Farrant, and Chabert rapidly bit off some pieces, amounting to the quantity above mentioned. These were put into a spoon; and while he kept his hands behind him, to prevent the idea of any undue interference on his part, they were apparently, and we believe really, taken down his throat. He held the head back, with the mouth open, and the tongue slightly protruded, performing the act of deglutition very rapidly, so as to avoid allowing the phosphorus to remain in contact with the tongue. This is unquestionably an extraordinary feat, and shows a power of

resisting the effects of such doses of this substance as would probably destroy most individuals: still there is nothing in it which appears to us absolutely marvellous, as phosphorus, in smaller quantity, has frequently been taken with impunity.

Mentz, a German physician, recommended phosphorus, in 1751, as a powerful stimulant, and published some cases illustrative of its efficacy; and on his authority, it has since been occasionally used in Germany.—In France, Alphonse Leroy experimented with it on his own person, and took three grains in treacle. This caused great uneasiness, which, however, was relieved by copious draughts of cold water; and he affirms that next day his muscular strength was considerably increased. He relates the case of a young man who recovered from the advanced stage of typhous fever under the use of phosphorus, and of an old man who was restored by it from a state of extreme debility.—Dr. Conradi also asserts that he has known it succeed when other stimulants had failed. All the experiments, however, did not terminate so favorably.—Weikard was consulted by a Jew, who had lost his speech and the use of his limbs, in consequence of an apoplectic seizure. Two grains of phosphorus were administered to him, rubbed up in a conserve: next day three grains were given in some honey; and Weikard

informs us that it was his intention to have increased the dose still farther next day, but that in the meantime the unfortunate Jew was taken ill, and died on the fourth day in great agony.—In our number for July 11th will also be found the case of a chemist at Biel, who was poisoned by three grains.—Brera likewise tried it in a case of paralysis. He gave two grains dissolved in mucilage of gum arabic, and directed it to be taken in divided doses, so that each should contain half a grain of phosphorus. His patient appeared to be better after the first dose, but scarcely had she taken the last, before she was seized with burning pain in the stomach, and died in twenty-four hours.—Alibert tried a series of experiments with this substance, principally in epilepsy. The method he adopted was to incorporate a grain in an ounce of mucilage, and to give it in the course of twenty-four hours. The general result was, that it impaired digestion, without curing the disease for which it was given.—The latest publication on this subject, so far as we know, is that of M. Lobstein, which appeared in 1815; and the opinion he expresses with regard to the medicinal powers of phosphorus is so favorable, that we cannot but regret that it is not corroborated by others. He used it chiefly in fever, and states that the pulse improves, and delirium diminishes very speedily, under its exhibition. He also mentions that the evacuations become luminous in the dark, when it is given in sufficient quantities.—Hufeland says that a small portion of phosphorus, if allowed to come into contact with the stomach, is apt to excite inflammation, but

speaks favorably of it as a stimulant, in doses of about one grain in the day, when carefully mixed with mucilage by long-continued trituration.—To return to M. Chabert:—It appears that the internal exhibition of phosphorus in small doses has often been practised; and that one individual (Leroy) took so much as three grains. But it is the result of general experience, that the system may become reconciled to large doses of the most powerful agents, provided they are very gradually and cautiously increased;—witness opium. Half a grain is the usual dose of lunar caustic, but we have known an individual take sixty grains in the course of twenty-four hours, in five-grain pills,—a feat scarcely less wonderful than that of Chabert.

As to arsenic and prussic acid, it will be time enough to inquire about them when it appears that he has actually taken them. At present his ability to do so with impunity rests on his own authority. With regard to holding his head for a short time in the fumes of arsenic, it is of very little importance even if he really did it. Nor can we avoid hinting, that throwing sulphuric acid upon a chafing dish, so as to raise sulphurous acid vapors, and thus half choke those who came near, savored very much of trickery, as did several other parts of his conduct. Neither do we attach much importance to the feat of swallowing oil at 310 degrees. The effect of any body, at a high temperature, in producing a sense of heat, depends very much on the rapidity with which it parts with caloric; in other words, on whether it be a good or bad conduct-

or. Thus, it might have been observed, that though Chabert suffered the oil to be put into his mouth, he avoided letting the spoon even touch his tongue, because the metal, though it could not be hotter than the oil which it contained, parted with its heat much more rapidly, and would thus have burnt him.

M. Chabert is represented in the *Literary Gazette* as possessing three antidotes—one, a preservative against vegetable, another against animal, and a third against mineral poisons; nay, he even holds out that he has an antidote to hydrophobia, and is able to save men “from every species of poison.”

If he really possess such important secrets, the Editor of the *Literary Gazette* thinks “that they ought to be ascertained, and he largely rewarded as a public benefactor.” It is only the notice which has been taken of these performances in so respectable a publication which induces us to advert to them at all; and we agree that the secret of his antidotes ought to be purchased, “if he really possess such;” but we do not believe that he does. That the same thing should prove an antidote to all the poisons taken from one kingdom—to arsenic, for example, and corrosive sublimate, and verdigris, and sulphuric acid,—agents having nothing in common in their chemical composition, or in their action on the animal body—is too monstrous an improbability for any intelligent person to credit. And even if it should be found that Chabert can really take these poisons with impunity, which we do not imagine, we should still hold it more probable that he had gradually ac-

customed himself to them than that he possessed any one general antidote. We may mention, too, that Chabert retired to change his dress after he had taken the phosphorus and oil, and remained long enough absent to have vomited these substances, if he was desirous of so doing, and that he took no poison after he had been in the oven. We suggest this merely as a possibility, but if so it would deprive the experiment of much of its anomaly, as it is expressly stated by Lobstein that the effects of a dose of phosphorus are scarcely ever perceptible in less than four hours. The subject, however, is worthy of some attention; but then the investigation would require to be carried on by much cooler heads than those who have already volunteered their testimony in Chabert's favor, and who seem inclined to swallow all his assertions with as much avidity as they did his beef-steak. And this brings us to the last part of the performance, which, though it excited the greatest admiration on the part of some of the spectators, was in reality the least wonderful of the whole. An oven was heated, into which Chabert entered in a flannel dress and thick-soled shoes, being provided with a sort of funnel, communicating with the external air, through which he breathed. So far from having any means of guarding against the effects of the heat, he was dreadfully oppressed, and at the end of eight minutes and a half burst out panting and exhausted, being evidently quite unable to bear it a moment longer. His breathing was performed very rapid, the expirations being performed forcibly and with much puffing. What the ex-

act heat of the oven was, we are unable to say, as no thermometer was placed in it at the time Chabert entered ; but shortly after he came out, one which was placed in it (much against his inclination) only rose to about 180 degrees !

The heat of the oven in this case, therefore, was probably not greater than that of the rooms in which Sir Charles Blagden, Sir Joseph Banks, and others, remained for a considerable time without any communication with the external air, and with comparatively little inconvenience. According to M. Tillet, girls who had been accustomed to attend an oven, bore for ten minutes a temperature equal to 280 degrees Fahrenheit ; and a Spaniard, named Martinez, within this twelvemonth, used to exhibit at the Tivoli, in Paris, who remained in an oven, at the temperature just mentioned, long enough to have a fowl roasted beside him, and to eat it.

The most scientific experiments of this kind, and consequently the most interesting, are detailed by Dr., afterwards Sir C. Blagden, in the sixty-fifth volume of the Philosophical Transactions. As these may not be within the reach of all our readers, we subjoin some extracts.

“ Soon after our arrival, a thermometer in the room rose above the boiling point : this heat we all bore perfectly well, and without any sensible alteration in the temperature of our bodies. Many repeated trials, in successively higher degrees of heat, gave still more remarkable proofs of resisting power. The last of these experiments was made about eight o'clock in the evening, when the heat was at the greatest : a very

large thermometer, placed at a distance from the door of the room, but nearer to the wall than to the cockle, and defended from the immediate action of the cockle by a piece of paper hung before it, rose one or two degrees above 260. Another thermometer, which had been suspended very near the door, stood some degrees above 240. At this time I went into the room, with the addition to my common clothes of a pair of thick worsted stockings drawn over my shoes, and reaching some way above my knees. I also put on a pair of gloves, and held a cloth constantly between my face and the cockle. All these precautions were necessary to guard against the scorching of the red-hot iron. I remained eight minutes in this situation, frequently walking about to all the different parts of the room, but standing most of the time in the coolest spot, near the lowest thermometer. The air felt very hot, but still by no means to such a degree as to give pain ; on the contrary, I had no doubt of being able to support a much greater heat ; and all the gentlemen present, who went into the room, were of the same opinion. I sweated, but not very profusely. For seven minutes my breathing continued perfectly good ; but after that time I began to feel an oppression in my lungs, attended with a sense of anxiety, which gradually increased for the space of a minute. I thought it most prudent to put an end to the experiment, and immediately left the room. My pulse, counted as soon as I came into the cool air, for the uneasy feeling rendered me incapable of examining it in the room, was found to beat at the

rate of 144 pulsations in a minute. A chief object of this day's experiments was to ascertain the real effects of our clothes in enabling us to bear such high degrees of heat. With this view I took off my coat, waistcoat, and shirt; and in that situation went into the room as soon as the thermometer had risen above the boiling point, with the precaution of holding a piece of cloth constantly between my body and the cockle, as the scorching was otherwise intolerable. The first impression of the heated air on my naked body was much more disagreeable than I had ever felt it through my clothes, but in five or six minutes a profuse sweat broke out, which gave me instant relief, and took off all extraordinary uneasiness. At the end of twelve minutes, when the thermometer had risen almost to 220 deg. I left the room very much fatigued, but no otherwise disordered, my pulse being 136 in the minute. Several of the gentlemen present, as well as myself, went into the room without our shirts many times afterwards, when the thermometer had reached almost to 260 deg., and found we could bear the heat very well, though the first sensation was always more disagreeable than with our clothes. To prove that there was no fallacy in the degree of heat shown by the thermometer, but that the air which we breathed was capable of producing all the well-known effects of such heat on inanimate matter, we put some eggs and a beef-steak into a pan or tin frame: in about 20 minutes the eggs were taken out roasted quite hard, and in 47 minutes the steak was not only dressed, but almost dry.

Another beef-steak was rather over done in 33 minutes. In the evening, when the heat was still greater, we laid a third beef-steak in the same place: and as it was now observed that the effect of the heated air was much increased by putting it in motion, we blew upon the steak with a pair of bellows, which produced a visible change on its surface, and seemed to hasten the dressing: the greatest part of it was found pretty well done in 13 minutes.

“The same person, who felt no inconvenience from air heated to 211, could not bear quicksilver at 120, and could just bear rectified spirit at 130; that is, quicksilver heated to 120 deg. furnished, in a given time, more heat for the living powers to destroy than spirits heated to 130 deg. or air at 211 deg.”

Dr. Dobson and several others went into the sweating-room of the hospital at Liverpool, when it was heated to 224, without inconvenience.

The above remarks from the editorial department of the London Medical Gazette, were elicited by some experiments which were described in our Journal for Sept. 8.

II.

Observations on the Nature, Cause and Treatment of Hay Asthma.

(Concluded from p. 513.)

REGARDING spasm as the proximate cause of the disease, I exhibited, in the first cases which came under my notice, the powder of ipecacuan and the tartrate of antimony, (sometimes in combination with camphor and extract of hyosciamus), in such doses as to create a constant nausea; which, by its antispasmodic effect, never failed

to afford considerable relief. Nausea, however, is too unpleasant and depressing a sensation to be long endured; and in some idiosyncrasies it cannot be in the least produced without leading to constant vomiting, or efforts to vomit, which only serve to augment the headach and general distress. Finding that nauseating medicines were but of limited application, I made trial of the hydrocyanic acid, in doses of half a drop, or a drop, every two or three hours; giving, in the intervals, from three to five grains of the carbonate of ammonia, with a quarter or half a grain of powder of ipecacuan. This plan invariably alleviated the symptoms; and when they were not exceedingly violent, removed them entirely. Sometimes I administered the carbonate of ammonia, with ipecacuan, alone, and certainly never without greatly facilitating the difficulty of breathing.

No medicine, however, which was had recourse to, was of such utility, and so speedily and effectually removed the paroxysms, as the ethereal tincture of the *Lobelia inflata*. It was given in doses of one drachm, repeated every three or four hours. The obstructed respiration was always rendered more free by the first dose, and after the second it became perfectly easy and natural; and to this soon followed the disappearance of all the other symptoms.

During the continuance of the asthma, the patient should confine himself to the house as much as possible; and should eat biscuit, and the more digestible kinds of food. He should sedulously abstain from all spirituous and fermented liquors, and use only coffee for drink. He should also abstain from fresh vegetables and fruit of

every description; because these, by readily entering into the acetous fermentation, generate within the stomach an abundance of gaseous matter, whereby this organ becomes distended, and respiration of course greatly impeded.

Care should also be taken to obtain a daily and free evacuation of the bowels, by the exhibition of one or two drachms of the sulphate of magnesia every morning. Purgings is improper. Diuretics, likewise, should be given, in order to preserve a plentiful secretion from the kidneys; for I have often noticed that whenever the urinary discharge was copious, the fits were generally less severe than when this discharge was scanty.

As soon as the inflammation of the eyes, and irritability of the mucous lining of the nostrils supervenes, it should be subdued by keeping a piece of fine linen, wetted with an evaporating lotion, constantly applied to the forehead and across the nose. If this measure be not persevered in, the bronchiæ will become affected by the spreading of the morbid action, and the asthmatic symptoms will soon make their appearance. But if the ophthalmia and irritable state of the schneiderian membrane be timely reduced, the paroxysm will be postponed, and often entirely averted; and if it should come on, it will be not only milder, but shorter in its duration.

Opium I found to be decidedly injurious. It increased the fever, headach, wheezing, and suffocating tightness across the chest. Vegetable acids were given, but without success; and blisters and tartar emetic ointment were of no utility; nor was any material diminution of the symptoms ever observed to succeed the inhalation of steam, or

the abstraction of blood by leeches, which were occasionally applied to the chest.

The warm bath was not of the least service, but immersion of the feet in hot water generally proved beneficial. Hay asthma, like every other variety of asthma, depends on a state of general or local debility; and, as far as my experience extends, its best prophylactic is the cold shower bath, which, by its tonic properties, removes that weak and irritable condition which forms the foundation of the disease. This preventive, where it has received a fair trial, has succeeded most completely. It should be commenced in about six or eight weeks previous to the expected recurrence of the complaint; and employed every morning, without intermission, until the hay is being gathered in. Its effects are speedy and most agreeable. If the patient feel any obstruction in the nostrils, heaviness of the head, tenderness of the eyes, tingling in the throat, or impediment of respiration, which he not unfrequently does when he first awakes in the morning, he no sooner uses the cold shower bath than all these threatening symptoms disappear, and he feels light, vigorous and active, and can breathe with the most perfect ease and freedom.

During the employment of the bath, the alvine canal should be gently and regularly acted on by means of saline aperients; and if any thoracic uneasiness be experienced during the day, a dose of the ethereal tincture of the lobelia inflata must immediately be had recourse to.

If the cough continue after the other symptoms have terminated, it is best relieved by opiates, by stimulating embrocations rubbed

on the chest and along the spine, and by change of air.

From what I have witnessed, then, I am disposed to conclude that the cold shower bath, used in the manner and with the precautions I have laid down, will prevent the access of hay asthma; and that the asthmatic fit will at all times yield either to the hydrocyanic acid, or to the ethereal tincture of the lobelia inflata.—*lb.*

III.

DISEASES RESEMBLING INFLAMMATION.

Remarks on a Peculiar Class of Diseases resembling Inflammation.

By Mr. GEORGE NEWSTEAD.

A NUMBER of cases have occurred in my practice* during the last four years, which, with all the external characters of active inflammation, have not been relieved by bleeding, and, in fact, could not bear it to any great extent. The form chiefly assumed by the disease, when I first observed it, was that of pleuritis. Cold chills or shivering, uneasiness in the back and limbs, and frequently vomiting, were succeeded by very acute pain in the side. The tongue had the appearance exhibited in typhus mitior; the pulse was sometimes accelerated, but very often was not disturbed in the beginning; the secretion of urine was remarkably scanty, very high colored, and deposited a thick sediment. It sometimes terminated in three or four days with profuse sweats, and sometimes in a week or ten days by expectoration, tinged often with blood. The pain was so urgent, and the breathing so obstructed, that I did not

* At Howden, Yorkshire,

hesitate to use the lancet ; but the first bleeding generally put me on my guard. I was astonished at the small quantity which commonly flowed before syncope was produced, and also at the slight relief of pain, even where larger abstractions could be borne. Cases like peritonitis began to occur, and I then found that whether the patient complained of the chest or abdomen, the pain was not confined to one part. On examining those complaining of the chest, there was great tenderness to the *touch* there (a circumstance I never remarked in inflammation of the lungs or pleura), and not only there, but on the abdomen, and very often down the back; and those who said the pain was in the abdomen were affected, in like manner, by pressure on the chest and back, as well as the belly. In some, even the arms and thighs were affected; and whatever part was touched, they shrunk like the subject of acute rheumatism on handling an inflamed joint. This diffused pain on pressure, and the diminished secretion of urine, I fixed upon as the characteristic symptoms of the disease. Although the region of the kidney was usually pointed out as the seat of the most acute pain in the abdominal disease, and the secretion of urine was so much disordered, there was not that frequency of making water, and pain in voiding small quantities, which mark nephritis. The state of the bowels was various;—frequently diarrhœa came on with green stools, or a discharge of bloody mucus; but, as calomel was freely given, I attributed these symptoms to its use. One young man, however, before any medicine was given, had frequent

discharges from the bowels of a thin bloody serum, without tenesmus, and totally different from anything dysenteric. I observed some, where the chest was chiefly complained of, spit up the same kind of serum, like bloody water. The stomach was often irritable throughout the abdominal disorder, and a green fluid was occasionally discharged. I felt an awful responsibility at first, when I dared to treat this complaint without, or with very little, depletion; for patients themselves, identifying what they felt with what they had heard of inflammation, would ask to be bled, but I was alarmed by the exhaustion I had seen follow, and I never, except in two cases, ventured on more than one bleeding, trusting afterwards to leeches, a dozen at a time. My reliance was on opium and calomel, or mercurial frictions. I was partly encouraged to withhold the lancet by the state of the pulse, which was often not above 80, and natural to the feel, when the chest, back and abdomen could not be touched without agony, and even the weight of the bed-clothes was irksome; for, although I am aware that fatal inflammation of the bowels may exist without an accelerated pulse, I fancy that commonly it is when it proceeds from some mechanical obstruction, and that in pure enteritis or peritonitis there must be a quick pulse, though the feel may be variable. The pulse did not often continue in this state,—it generally got to be 100 or upwards after two or three days, when the febrile disorder, which seemed to modify and give a peculiar character to the inflammatory symptoms, had time to develop itself. My cautious practice

has been successful. Out of a number of persons afflicted in this way, I cannot say how many, but I can readily bring forty to my memory, three died. Two of these had been freely bled, and the third was a woman seventy-eight years of age. Within the last month I have treated two cases successfully, even without leeches. I will give you a daily report of one of them.

Jane Cotham, æt. 61. July 7, 1829.—Attacked suddenly, after tea this afternoon, with excruciating pain all over the abdomen, and vomiting.—Eight o'clock, P. M. Complains of great pain in the abdomen, which is very much increased on pressure,—does not mention pain elsewhere; but, on examination, the whole of the left side of the chest, as high as the axilla, and the back, are as tender to the touch as the abdomen. Pain came on suddenly, but she has felt chilly and not very well all day,—has been uneasy and stiff in her back and limbs two or three days,—has never been subject to any spasmodic affection. Pulse 72, with a sinking feel; tongue pretty natural; bowels moved both yesterday and to-day. Warm bath; two grains of opium immediately.

Pulv. Ipecac. c. gr. x. Hydrarg. Submur. gr. ij. cum dosi mist salin. 4tis horis postea. Ol. Ricini ʒj. primo mane. Rub the parts affected, as much as can be borne, with camphorated oil.

July 8th, 10 o'clock, A. M.—Is easier. The pain on pressure continues, however, particularly acute on the left side of the chest, and the right side of the abdomen; cannot take a full inspiration; has no cough; urine said to be very

little in quantity; no stool; has not yet taken the oil; pulse 72, without any sinking; tongue furred. Ordered to take the oil and a black draught every four hours, until the bowels are opened.—Eight o'clock, P. M. Opening medicine has not operated; does not complain much when she is still, but the whole of the abdomen is exquisitely tender to the touch; also both sides of the chest, as high as the armpit: can bear pressure now on the back; pulse 65; tongue a little moister; urine in very small quantity, but nothing particular in its appearance; has vomited after taking an opening draught.

July 9th.—Has been purged freely; does not complain of pain; can bear pressure tolerably well on the abdomen, excepting the right side, which is still tender; has a little tenderness on the right side of the chest, but shrinks from the slightest touch on the left side. Pulse 86; tongue loaded with a moist fur in the middle; evidently febrile action: has continued the calomel and comp. powder of ipecac.

July 10th.—Is easier; has slept well; bears pressure on the abdomen without pain, but it feels hard, and as if the muscles were spasmodically contracted; some soreness to the touch all over the chest. Pulse 80; gentle diaphoresis; urine exceedingly scanty, depositing a thick sediment; tongue rather improving, dry and foul in the middle; bowels open; has vomited repeatedly.

July 11th.—Severe gripings; constant efforts to stool, but evacuates only small quantities of very bloody mucus; has passed, however, during the night, a large quantity of dark green feculent

matter, mixed with scybalæ ; no pain on pressing the abdomen ; a little still on touching the left side of the chest.

Chalk mixture with Tinct. Opii ; three grains of Opium for a suppository.

July 12th.—The griping and tenesmus abated after a dose or two of the mixture ; returned this morning with some discharge of blood : used the suppository, and has been quite easy since ; no pain on pressure ; gums swelled and tender. Pulse 100 ; urine still very scanty.

Continue chalk mixture. To take ʒss. Ol. Ricini in the morning.

July 13th.—Has had an easy night ; castor oil has produced three good motions ; mouth very sore ; pulse 86 ; tongue beginning to clean ; left off taking medicine.

July 19th.—Has been quite free from pain ; bowels regular ; fast regaining her former health.

Two puerperal women have been severely attacked by the disease. One had two dozen leeches, and the other only one dozen very ineffective ones. Calomel and opium were given, and the bowels were opened once or twice with ol. ricini, combined with ol. terebinth. ʒij. Both recovered.—*Med. Chir. Review.*

SKETCHES OF PERIODICAL LITERATURE.

MEDICAL NOMENCLATURE.

THE difficulty of acquiring a familiarity with the technical names of parts, is, if not the greatest, certainly the most provoking obstacle experienced at the outset by the student of anatomy. We recollect well the strong though ludicrous expression of dismay, with which one of our fellow-students assured us that he had spent two whole months in acquiring a perfect acquaintance with the names of the muscles, which he forgot again at the end of three weeks. We availed ourselves of his experience, and declined undertaking so useless a labor ; but we doubt not there are many others who have had reason to regret an equal sacrifice of their time. He must needs possess a good memory, who can, without frequent reviewal of his text books, keep in his mind the mighty host of names which they contain ; and one

who neither recurs to these, nor is led to engage in practical anatomical researches, will be likely, at the end of a few years, to find that a large proportion have escaped his memory entirely. A late writer in one of the foreign Reviews (the Glasgow Journal), has taken up this subject very seriously. He considers the whole system of anatomical names to be a relic of barbarism, and utterly unworthy to be retained at this period of improvement and civilization. He proposes an entire reformation of this system, not only in regard to the muscles, but also to the bones, the vessels and the nerves. For the plan which he proposes as a substitute, as it is given at great length and with considerable formality, we will not attempt to do it justice. The great principle, however, is to make the different regions of the body the ground of a primary division, and to

distinguish the individual muscles, nerves, &c., in each region, by a simple numerical classification. The names of the regions themselves are to be the most simple and familiar, and thus this formidable array of *technical*s, which now presents so serious an impediment at the very portal of science, is at once to be abandoned.

The plan thus proposed is certainly ingenious, but we should doubt its claim to any higher praise. The defects of the present system, though considerable, are by no means such as to warrant this sweeping reformation. We object, moreover, to the principle on which this change is proposed. Because the names now applied are in many instances inappropriate, and express very awkwardly the qualities of the objects they indicate, it cannot follow that it would be better to reject the aid of analogy altogether, and to make the connection between objects and their names entirely arbitrary. The general idea has been that numbers must be fixed in the memory, by associating them with objects; the plan of remembering objects by numbering them, seems to be a retrograde step in the science of mnemonics.

The great principles of association of which anatomists have agreed to avail themselves in designating the various parts, are derived from three circumstances,—their form, their situation, and their use. The bones, which form, as it were, the groundwork of the classification, and which present a well-defined, prominent and permanent outline, are with

great propriety named from their forms; and the names which designate these are, for the most part, sufficiently expressive and appropriate. The analogies on which they are founded are sometimes fanciful, and some of the terms employed certainly deficient in euphony; but these faults are not of frequent occurrence, and certainly will not justify a condemnation of all. Neither do the names of the bloodvessels or nerves seem open to any very serious objection. The former have their titles mostly from their situations; and for describing these, their relation to the bones in the extremities, and to prominent parts in the great cavities, afford an obvious facility. The nerves are, for the most part, named on the same plan; but as many of these have evident and peculiar uses, their designations are very properly made to express these uses. The additional numerical names of the first twelve pairs of nerves, which would, on the system above mentioned, form the best part of the classification, seem to us rather the most indifferent. Expressing a gradation which does not exist in the parts themselves, they mislead rather than instruct us. Their best claim is to the title of a harmless superfluity.

We come now to the muscles,—parts confessedly difficult to remember by their present names, and presenting the fairest ground for improvement, in this respect, of any portion of the system. The great difficulty in regard to the nomenclature of the muscles seems to be, that it has no reference to any fixed and definite principle. Some are named

from their form, some from their situation, some from their uses, and many from circumstances wholly distinct from either. This variety of itself is calculated to perplex and embarrass ; and when to this is added the want of propriety in some, and the barbarous sound of others, this certainly seems the least attractive part of the catalogue. Now there is one circumstance common to all the muscles, which would seem to present an obvious ground for a uniform nomenclature. Every muscle serves, as its principal use, to connect together two parts, which parts are approximated by its contraction. The united names of these two parts, therefore, must furnish a name to the muscle, expressive at once of its situation and its use ; thus furnishing a double aid to the memory, while the only burden it imposes is that of a new association of terms, which are supposed to be already familiar.

That a nomenclature of the muscles, on this plan, would be an improvement in our system, is by no means a new idea. It is suggested, as is well known, in the *Elements of Anatomy* by Munro ; and a table of the muscles is there given in which a name is applied to each, formed on this principle. Some of these are, perhaps, unnecessarily complicated, and approach too nearly to the nature of description. These, however, are but few in number ; the rest are unexceptionable, and wherever they differ from the names in common use, are certainly much superior. A nomenclature of the muscles formed on this principle, if adopted gene-

rally in our elementary works of anatomy, would materially facilitate the progress of the student.

THE ABSORBENT SYSTEM OF SAILORS.

A PAPER in one of the late numbers of the *Medical Gazette* contains some interesting speculations with regard to the absorbent system, as modified in its functions among a particular class of persons. It is mentioned as a well known fact, that among sailors, complaints or accidents accompanied with effusion are cured with considerable difficulty. Bruises of the skin and integuments, attended with discoloration, heal very slowly ; the glands, when enlarged, are not disposed to return to their former state ; and dropsy is a frequent result of inflammatory action. It is also noticed with respect to this class of persons, that mercury requires a long time to produce its specific effect ; and the occasional occurrence of scurvy, even under a regulated diet, is another fact of the same class. These circumstances would seem to imply an imperfect action on the part of the absorbents, connected with the defective nutrition supplied by the articles of diet to which the maritime class are for the most part limited. This idea was confirmed by finding that in the blood drawn from two or three individuals, not suffering at the time from acute disease, the serum bore to the cruor a proportion of 7 to 2 ; the fibrin was deficient, and the taste of the whole saline and alkaline. It is noticed that the sailors when at sea do not bear bleeding well ; and that in the complaints to which they are subject,

unless acute inflammation is present, exercise and a generous diet answer much better.

RESPIRATION OF BIRDS.

MESSRS. ALLEN and PEPYS have lately instituted some experiments on this subject, by confining a pigeon in a glass vessel filled with the air employed, which was re-supplied from a gasometer as it became unfit to support life. In the first experiment, made with common air, oxygen was abstracted by the respiration, and an equal volume of carbonic acid substituted. In the second and third, made with pure oxygen, a similar portion of oxygen was removed, the place of which was in part supplied by carbonic acid, and in part by azote. In the fourth, a mixture of oxygen, hydrogen and azote was employed, (the oxygen in the same proportion as in common air,) and it was found that while the volume of the former gas remained undiminished, the mixture parted with its hydrogen, and received in return an equal volume of azote.

CASE OF BULIMIA, WITH DISSECTION.

A MAN aged 60, came under the care of M. Gaultier, affected, as was supposed, with diseased liver. He was very fat, his skin of a yellow tinge, and his belly prominent. His appetite was voracious, requiring three large meals a day to satisfy it. He died with symptoms of pulmonary consumption. When examined, the lungs were found to contain collections of matter. The stomach was large and very muscular. The structure of the liver was healthy. Not-

withstanding a minute examination, no trace of a gall-bladder could be found, or any circumstance which indicated its former existence. The duodenum adhered directly to the liver, and a very short canal leading from the intestine, ramified at once in the liver, without sending any branch in the usual direction of the ductus cysticus. It is not unlikely, as suggested by the author, that the rapid digestion and great appetite in this case, were owing to the bile constantly poured into the duodenum keeping up an excitement of this organ, and sympathetically influencing the stomach.

EMPYEMA.

IN the last number of the Western Journal is an account of a case of this disease, successfully treated by operation. The patient, a youth of 19 or 20, had been attacked with pleurisy, which was succeeded by gradual enlargement of the left side, general debility and hectic. On examination the heart was found beating with considerable force on the right side, with general "œdema" of the left, which measured nearly twice as much as the former from spine to sternum, and had an indistinct fluctuation.

The incision was made between the sixth and seventh ribs, as nearly as possible to the latter. On puncturing the pleura a volume of pus issued, which continued to run for about forty minutes, when the patient became faint and the wound was dressed. The next day, a canula was introduced, and the pus allowed to discharge itself through it,

which it did for several weeks, after which the wound healed, and his health rapidly improved. The whole quantity of matter discharged, from first to last, was supposed to amount to about four gallons.

EFFECTS OF MORPHINE.

THE *Annali Universali di Medicina* contains an account of some experi-

ments on the effects of morphia on three persons in health, to whom it was administered in doses of one-eighth of a grain, and a grain. The effects were, a pain in the epigastric region, increased frequency of the pulse, dilatation of the pupils, and headach; and subsequently, sleep and diaphoresis. All these symptoms were increased with the dose of morphia taken.

BOSTON, TUESDAY, OCTOBER 6, 1829.

It has been suggested to us by an obliging friend from the country, that in a recent number of the *Journal* a paragraph was so expressed as apparently to convey an idea prejudicial to the reputation of our brethren out of the city. If any one received this impression, it is proper we should say that such was not the intent of the paragraph, or the spirit in which it was written. The case was a *supposed* one, and supposed expressly and *solely* for the purpose of illustrating an argument:—nothing was further from our intention than to intimate anything unfavorable to the general or professional character, talents, or zeal, of the faculty in the country. On the other hand, about ninety out of every hundred of our subscribers are country practitioners, and it is to them we are indebted for a large proportion of all our communications; *we* therefore should be the last to depreciate their zeal or their ability.

We avail ourselves of this opportunity again to extend to our professional friends, in town and country,

an invitation to favor their brethren, through our pages, with the results of their studies, reflections and experience. The department of the *Journal* more strictly editorial, we endeavor to render as useful and interesting as our opportunities will allow; the reader will judge whether in this our duty is performed or neglected. He also must judge whether any remissness exists on *his* part, by the appearance of the first pages of the *Journal*, which are designed more particularly for his *Original Communications*.

PHRENOLOGICAL DEVELOPMENT OF BURKE.

“Two principles in human nature reign, Passions to urge, and reason to restrain.”

AN article has been current in most of the newspapers in this country, which is calculated to mislead the public respecting the phrenological development of Burke the murderer. It asserts that the disciples of Spurzheim, on examining the head of this monster, found to their confusion that the organ of Destructiveness was small, and that of Benevolence large.

This is not true. The last number of the Phrenological Journal contains a minute account of the admeasurement of this cranium, and the results are stated with an impartiality which forms a strong contrast with the prejudice which first prompted the newspaper paragraph alluded to.

It is unnecessary to copy here the entire minutes of the examination. Suffice it to say that the organs named were both large—"Benevolence, full," "Destructiveness, very large." It seems that Burke in his schoolboy days was an apt scholar, and not remarked for vicious propensities. When he first went to Edinburgh he "lodged in one of those haunts of wretchedness and vice quaintly entitled the BEGGAR'S HOTELS." Bad company led him on from one degree of crime to another, till at last penury and temptation assailed him together, and found him an easy prey.

Supposing that the organs above mentioned were equally large, so as to neutralise each other, the circumstances mentioned would be sufficient to turn the scale in a person who had few if any moral principles early implanted in his mind: when

therefore Destructiveness got the control, and temptation increased, and success urged him on, it is not at all *confounding* to the Phrenologists that he should have terminated his career on the scaffold.

We pretend not to believe in all the doctrines of Gall and Spurzheim, but, in justice to the science, an erroneous statement of so notorious a case ought not to pass uncorrected.

Smallpox.—A vessel arrived in this port from London, on Saturday last, on board of which a young gentleman died during the voyage, of smallpox. No other person on board has broken out as yet, but as this case may be productive of others, our citizens should, if unprotected, be thoroughly vaccinated without delay.

University of Maryland.—Dr. John D. Wells, of this city, now Professor of Anatomy at Bowdoin College, is appointed to deliver the annual Course of Lectures on Anatomy at the University of Maryland, during the approaching winter.

The "New Theory of Life," acknowledged last week, was by *David Porter, M.D.*, of Brownsville, Penn.; and not, as was accidentally stated, by Dr. Baker.

WEEKLY REPORT OF DEATHS IN BOSTON,

Ending September 24, at noon.

Date.	Sex.	Age.	Disease.	Date.	Sex.	Age.	Disease.
S. 17.	F.	2 yrs	unknown		M.	3 m.	infantile
18.	F.	2	lung fever		M.	11	measles
	F.	19 m.	canker		F.	17 yrs	typhous fever
	M.	31 yrs	hemorrhage		F.	2 1-2	lung fever
	F.	5 1-2	measles	22.	M.	14 1-2	atrophy
19.	F.	9 m.	bilious fever		F.	43	consumption
	F.	13	teething	23.	F.	16 m.	inflammation of the brain
	F.	2 yrs	measles		M.	3	infantile
	M.	10 m.	cholera infantum	24.	F.	56 yrs	consumption
20.	M.	38 yrs	consumption		F.	27	unknown
	M.	15 m.	lung fever		M.	65	cancer on the heart
	F.	4	cholera infantum		F.	9 m.	unknown
	F.	11	do. do.		M.	48 yrs	scrofula
	F.	5 yrs	dropsy in the head		M.	9 m.	unknown
21.	M.	34	consumption		M.	3 yrs	measles
	M.	6 m.	infantile				

Males, 14—females, 7. Total, 21.

ADVERTISEMENTS.

LEECHES, CHIRAYITA HERB,
&c.

EBENEZER WIGHT, 46 Milk Street, has made such arrangements as will enable him to be constantly supplied with the genuine *Medicinal Leech*. He has now on hand some of very large size, and in prime order.

Just received, by late arrivals, a few pounds of *Chirayita Herb*,—Concentrated Compound *Decoction of Sarsaparilla*,—Laurel Water,—Silver Wire Tooth Brushes, from the manufactory of James Prout, of London.

Also, from the manufactory of Shepherd, of London, the following variety of *Medicated Lozenges*, viz.:—Coltsfoot—Rhubarb—Soda—Tolu—Heartburn—Purgoric—Magnesia—Steel—Camomile—Nitro—Cayenne—Opium—Fruit—Ginger—Anniseed—Ipecacuanha—Lemon—Rose—Peppermint and Sulphur.

** Strict personal attention paid to Physicians' prescriptions, and family medicines. Oct. 6. eop.

MORBID ANATOMY.

CARTER & HENDEE have just received,—The *Morbid Anatomy of the Stomach, Bowels and Liver*; illustrated by a Series of Plates from Drawings after Nature, with explanatory letter press, and a Summary of the Symptoms of the Acute and Chronic Affections of the above-named Organs. By JOHN ARMSTRONG, M.D.

The above work will be completed in six numbers, at \$6,00 each. Three numbers are already published. Subscriptions received by C. & H.

Oct. 6. 2am3m

CONSOLIDATED COPAIVA.

"**C**OPAIVA may be given in this form without the least inconvenience. Neither communicating taste, nor imparting odor to the breath, it is also retained without the least disquietude or uneasiness to the stomach; and I am informed by Dr. Rosseau, that in large doses it does not purge."—*Phil. Journal of Med. Sciences*.

See an article in this Journal, Aug. 18th.

OIL OF BLACK PEPPER.

This is a much more active preparation of Piperine. One drop is fully equal to

six grains of the latter. It is a valuable adjunct to Quinine. One or two drops, added to six grains, will greatly increase the efficacy of that medicine.

For sale by NATHAN JARVIS, 188 Washington Street, where Physicians will find medicines at as reasonable terms as at any place in Boston.

Aug. 25.

eop^{tf}.

MEDICAL INSTRUCTION.

THE subscribers continue to receive and instruct Medical Pupils upon the terms formerly announced.

The Pupils are admitted to the medical and surgical Practice of the Massachusetts General Hospital, and receive private instruction from the subscribers.

JAMES JACKSON,
WALTER CHANNING.

For terms, apply to Dr. Channing, Tremont street, opposite Tremont House.

CARTER & HENDEE have just published,—The *Constitution of Man*, considered in Relation to External Objects. By GEORGE COMBE.

From the Preface to the American edition.

"Mr. Combe's work should be placed with those, of which so many within a few years have appeared, which are devoted to the all-absorbing topic of Education. It treats of moral, intellectual, and physical education. This is not formally done under so many distinct heads. But the whole course of reasoning of the author, and the whole array of all his illustrations, have it always obviously in view to show how the highest cultivation of each of these may be most surely brought about.

"The publishers have printed this edition from a belief that there is much in the work to interest the community.

"It has a novelty to reward the general inquirer, and it presents the well known under novel aspects. There is one class amongst us who may study it with much advantage. Scholars are referred to, a class here too small to form a distinct order with habits of their own, and who insensibly fall into those which, although not mischievous, to the multitude on the score of health, too often make ill health the portion of the sedentary student, and bring upon him premature decay.—To all classes it is recommended, and the various learning and acuteness of the author well fit him to write a book which addresses its instructions to the whole community." Sept. 8.

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

THE BOSTON
MEDICAL AND SURGICAL JOURNAL.

Vol. II.]

TUESDAY, OCTOBER 13, 1829.

[No. 35.]

I.

BELLADONNA.

Its preservative Power against Scarlatina.

By Drs. TAYNTON and WILLIAMS.

DURING the months of April and May the scarlet fever was very prevalent in this town and neighborhood, and in many cases it proved fatal. Our attention was called by a friend to a notice in the *Lancet* of the 2d of May, "on the prophylactic powers of belladonna against scarlet fever, by Hufeland."

We were at that time attending in a boarding-school, where the disease had attacked twelve of the boys, many of whom had been most dangerously ill, but none had died. There still remained several boys (perhaps twenty) who had not taken the infection; also four young children of the master's, and several servants.

We immediately commenced the use of the belladonna, in the exact manner and dose advised by Hufeland. Only six or seven persons in the house took the disease afterwards, and in every instance it assumed the mildest form.

In another small school we were called to visit a child about two years old, who had been attacked the evening before. The disease was of the most malignant character, and the child died on the following morning, the third day from the attack.

The house is a very small one. There were in it three other young children and five boarders, and a servant girl. The belladonna was faithfully administered, and not one individual took the disease.

We will not offer any conjecture on the *modus operandi* of the belladonna, or whether it did or did not prevent the other members of these families from taking the disease. The facts are stated exactly as they occurred, and we entreat our medical brethren to make trial of the belladonna whenever a favorable opportunity offers.

The following is the manner of giving the medicine:—Three grains of extract of belladonna dissolved in three ounces of proof spirit. Of this solution as many drops are to be taken as the patient is years old, twice a day.

As our readers may not be fully aware of the circumstances alluded to in the above paper, we subjoin some observations on this subject, made by Professor Koreff, in a letter to the late M. Laennec, published in the *Bulletin des Sciences Medicales*:—

"Observation clearly proves," says he, "that the belladonna, taken for some time, either in powder or in extract, produces, especially in infants, a redness of the skin, which is sometimes transient, but at others more durable; dryness of the mouth, with a sense

of heat in the throat ; dilatation of the pupil ; anxiety ; and occasionally swelling of the sub-maxillary glands : symptoms having a great resemblance to those which accompany the eruption of scarlatina. The effect of the belladonna has also this in common with scarlatina, that neither of them produce the redness of the skin invariably, whilst the symptoms about the throat are always present. I confess to you, however, that all these analogies did not appear to me sufficiently strong to persuade me that in this plant was really to be found a preservative against scarlatina, similar to that which the cowpock affords against variola. It was not till I had received the authority of the celebrated Soemmering, who informed me that he had obtained the most satisfactory results with it when the disease raged epidemically, that I determined to employ it. This malady, accompanied by the most unfavorable symptoms, and having entirely changed its usual character, was at that time producing ravages almost as fatal as the contagious typhus. I then, for the first time, had the happiness to protect from this dreadful contagion almost all those who took the belladonna with a little perseverance, and of these there were many thousands. Since that time I have never lost sight of this discovery, which becomes the more valuable as the scarlatina has increased during the last thirty years, both in violence and extent, in many countries ; and I have always found the same effects in different climates, and in epidemics of opposite characters. Many other physicians have equally confirmed the preventive powers of this plant, and the German journals are daily filled with proofs of a benefit which, with respect to some

countries, equals that of vaccination. In France, the capital and the provinces of which appear less subject to these fatal epidemics than Germany, Switzerland, the Tyrol, Poland, and the north in general, less attention has been given to this discovery, and it has been rejected, it must be said, too lightly, and without any sufficient examination, as may be seen in the article *Belladonna* in the Dictionnaire des Sciences Medicales. I only remember a single observation on this important subject, by Dr. Meglin,* who gives an account of a trial which he gave to this preservative during an epidemic of scarlatina at Colmar, and which confirms all the assertions of the German physicians. The absence of present danger is, perhaps, the cause of this indifference towards a discovery, which, important in itself, might also be fruitful in results applicable to other diseases. At present, however, I shall confine myself to an account of the results which have been ascertained (by repeated observations, and by a great number of individuals placed in very different circumstances), without incurring the reproach of having proceeded in a manner not sufficiently rigorous.

* * * * *

“ The powder mixed with sugar, or the extract made very carefully from the juice of the recent plant, are employed after the following formulæ :—Extract of belladonna three grains, dissolved in an ounce of cinnamon water. Powder, or root of belladonna, two grains, mixed with drachms of white sugar, divided into sixty doses. From half a dose to a whole one is given to a child, from six months to two years old, four times a day ;

* Nouveau Journal de Medecine, 1821.

to children from three to six years old, from a dose to one and a half; to those from six to nine, two, to two and a half; to those from ten to twelve, three, to four and a half. Of the solution, a drop is given for every year of the child's age, once a day and fasting. Observation has shown that, when the epidemic is very fatal, or the intercourse with the patients very frequent and intimate, it is prudent to increase the dose a little. It has not yet been possible to determine, in a satisfactory manner, the length of time which is necessary to eradicate, by this remedy, the susceptibility to the contagion. Everything leads us to believe that the remedy, if used during a time too short to ward off the contagion, moderates very much the malignity of the disease. We know for certain that the remedy does not permanently overcome the disposition to scarlatina; and it is necessary to resume its use on every occurrence of an epidemic. We have always observed that the most intimate communication with the sick does not produce the disease, provided the medicine has been employed eight or nine times previous to being exposed to the contagion, and continued to the period of desquamation; a circumstance important to nurses. It appears more certain to begin with rather strong doses in order to guard against the first impression of the contagion, and to diminish the quantity after a few days. No sensible effect has been observed to follow the continued use of this small quantity of belladonna. Up to the present time, neither season nor locality, nor any other circumstance, has appeared to diminish the preservative effect of this plant. * * *

“Do not believe, my learned colleague, that these results have

been too lightly deduced, or from a small number of individuals, or from epidemics of little violence. It is from entire provinces,—from cities affected with this terrible scourge,—from epidemics the most fatal, in all seasons, and in localities the most diversified,—on individuals of every age and of every condition, that observations have been made with the greatest accuracy, and have led to the above results.”—*Lon. Med. Gaz.*

II.

OPERATION OF MORPHINE.

*Experiments on the Operation of Morphine on the Human Body in a state of Health.**

It is now some twenty years since a talented physician, still practising in the modern Athens, was quizzed a little in consequence of entertaining a number of his brethren, once or twice a week,—not with tea and cards,—but with tincture of digitalis! The parties assembled and commenced the beverage, each keeping a finger on the pulse of his neighbor, in order to determine the physiological operation of foxglove. The result is well known. Digitalis was proved by *direct experiment* to be a strong stimulant; although since that period the profession has doggedly adhered to the vulgar opinion that the drug is a sedative, and employ it accordingly. A somewhat similar party was lately formed at Turin, consisting of Messrs. Beraudi, Rebrini, Crispo, and Allinio, for the purpose of taking the acetate of morphia, and thus ascertaining its effects on people in health. These four

* We alluded to these experiments in a former No. This more minute history of them is from the *Med.-Chirur. Review*.

gentlemen met on the 28th of September last, having previously dined, and commenced their experiments.—At three o'clock, M. Allinio, aged 22 years, of bilious temperament, and whose pulse was at 66, swallowed an eighth of a grain of the acetate in some distilled water. He had scarcely taken the medicine when he felt a bitter and somewhat acrid taste in the back part of the throat. In five minutes there was severe pain in the epigastrium, and propensity to sleep, with somewhat laborious breathing. At the end of twenty-five minutes the same phenomena continued. At thirty minutes there was profuse perspiration, with dilated pupils, and pulse at 94. At thirty-three minutes there was heavy drowsiness, with pain about the frontal sinuses. At fifty minutes the lips were livid, the face flushed, the conjunctivæ injected, severe pain in the frontal bone. At fifty-two minutes, pains in the bladder, physiognomy stupid, eyes sparkling, urgent thirst, sense of extreme lassitude in the inferior extremities. At a quarter past four o'clock there was pruritis of the skin, continual pains in the genito-urinary organs, and weight in the forehead. These symptoms continued till nearly seven o'clock, when severe pain in the epigastrium was followed by vomiting. No sleep took place till two o'clock the next morning, when the experimenter fell into profound repose till six, when he awoke with obtuse pain in the head, and soon afterwards had two alvine evacuations.

The other three gentlemen took the acetate, some in larger and some in smaller doses, at the same hour. Two of them were

affected in a manner not particularly different from that already described. One of them, however, experienced very little else than an acceleration of the pulse to 108 in the minute. In the course of a couple of days the experiments were repeated, but on an empty stomach. The symptoms were not precisely those which followed the medicine taken after food, but yet they were not materially different, and need not be detailed. The experiments were afterwards repeated with still larger doses of the medicine, and a corresponding degree of intensity in the symptoms.—We are not aware that much useful information is to be collected from these experiments. The Northern digitalis-sippers came to the conclusion that foxglove was a stimulant;—if we may judge by the symptoms above described, the Italian morphiom-eaters have a fair right to infer that morphine is an irritant; for certainly its effects were anything but soothing.

One thing we would hint to our juvenile experimenters, namely, that medicines, when taken *in health*, produce very different effects from those which result from the same remedies taken *in diseases*.

III.

TREATMENT OF HOOPING COUGH.

Observations on the Treatment of Hooping Cough, and on the Use of Sulphate of Quinine in that Disease.

By a SURGEON.

THERE were sixteen children on board a ship returning from India, who became affected with hoop-

ing cough. There is nothing to remark in the history of the symptoms; but the account of the treatment is not destitute of interest.

“When unequivocal symptoms of the disease appeared, doses of ipecacuanha, according to the age of the patient, were given night and morning, so as to produce full vomiting. In the intervening time, a mixture of antimonial wine, laudanum, and sulphate of quinine, made into a draught with syrup and water, was given thrice a day, at intervals of five hours. The dose for a child of two years was three drops of the antimonial wine, one of laudanum, and half a grain of quinine. When the first, or contagious stage, was over, the quantity of the two former was diminished, while the latter was increased. Burgundy pitch plasters were applied to the breast, and between the scapulæ. The bowels were kept moderately open by calomel and rhubarb; the diet was light and nutritive. This treatment was generally successful in about a month.

“There was an interesting boy of three years who suffered extremely. The convulsive paroxysms were violent, and the quantity and tenacity of the mucus such as threatened suffocation. He was reduced to such a degree, that (to use his nurse’s words) he was a ‘mere bag of bones;’ yet, by a steady perseverance in the above treatment, his recovery, though late, was yet complete. Several expedients to divert his attention, by play, toys, &c., were of use as auxiliaries. The quinine in the second stage was decidedly beneficial; and it is in this stage, where the disease is supposed to remain in the system merely from

the power of habit, that the exhibition of tonics, and above all the quinine, is indicated.

“I was induced to make trial of this medicine from the great approbation with which Dr. Cullen mentions the virtues of Peruvian bark in this disease. ‘I consider the use of this medicine,’ says he, ‘as the most certain means of curing the disease in its second stage; and, when there has been little fever present, and a sufficient quantity of the bark given, it has seldom failed of soon putting an end to the disease.’* In the cases that came under my observation, there was little or no fever; and I should think, from the small bulk and the soluble nature of the quinine, that a sufficient quantity can be given, without the inconveniences attending the exhibition of the bark.

“I have said that the quinine, in the second stage, was decidedly beneficial: it certainly appeared to me so; yet, perhaps, I ought to qualify the expression. In estimating the effect produced on diseases by remedies, it is difficult to determine with precision the exact share which these have, apart from adventitious circumstances, in bringing about a favorable termination. In the present instance, the state of the atmosphere appeared to exercise considerable influence over the disease. During moist hazy weather, the expectoration was more copious and viscid, and difficult of separation. When the air was hot and dry, it was scanty, the cough more distressing, and in one or two instances streaked with blood. Between the tropics, and

* Cullen’s Works, by Thomson, vol. ii. p. 463.

during the prevalence of the trade-winds, when the weather was fine and clear, it was particularly mild. How much we are to attribute to the state of the atmosphere, I know not: one thing, however, will, I think, be granted,—that the constant succession of climate that is experienced during an Indian voyage, will rather have a salutary than an injurious effect on the disease.

“Should the use of the quinine in hooping cough prove efficacious in the hands of other practitioners, I shall feel gratified. It deserves, at least, a fair trial; and it is exempt alike from danger and inconvenience.”—*Med. Gaz.*

IV.

DIETETIC REGIMEN IN FRANCE AND ENGLAND.

WHAT is ordinarily called the influence of climate on the human species, ought, in our opinion, to include the effects of the customary aliment which necessarily varies with the geographical situation of each country. Thus, in the north, the stomach calls for animal food and the excitation of spirituous liquors; (?) while, in southern regions, bread and fruit only are used, and irritating drinks studiously avoided. The French are more sober than the Germans, because the mild temperature of their country enables them to substitute wine for the beer or distilled liquors of their neighbors. Under the burning sun of the Spanish peninsula, oranges, citrons, and a multitude of other fruits, abounding in juice, attain a maturity unknown in France; and the refreshing and delicious drinks of Spain render the inhabitants still

more averse to the effects of spirituous stimuli, while at the same time they care less for wine.

Madame de Staël attributes the severe character of the gloomy mythology of the northern nations, to the perpetual fogs and rigorous winters of their climate, and she is perhaps right to a certain extent; but are not these distinctive traits rather the effect of that dulness of intellect so evident in those persons habitually accustomed to the use of violent excitants?

The inhabitants of the south are, on the contrary, gay, lively and witty, independent of external objects, and much more disposed than the inhabitants of the north, to seize upon the frivolous and transitory pleasures which at every moment are presented to them. The Frenchman always evinces a disposition to enter into a hundred trifling projects of pleasure, which the Englishman pretends to despise, while he secretly envies that pliancy of disposition which the climate of his own country denies him: haughty and impatient, he only loses his heaviness when *porter* has rendered him inconsiderate and querulous. The extraordinary differences which we observe in the manner of living among the modern European nations, have been principally produced by the use of tea, coffee, sugar and tobacco: their introduction into common use is one of the most singular conquests of commerce. Who would have supposed, three centuries ago, that the products of China and the West Indies would one day become the habitual aliment of the inhabitants and the servants even of the rustic population?

The following table, drawn up

from authentic documents, may explain, to a certain extent, the difference of manners observable between the two greatest nations of Europe :—

Quantity of Sugar, Tea, etc., annually consumed in Great Britain and France.

		England.	France.
Sugar	lbs.	448,000,000	128,000,000
Tea	"	22,750,000	195,000
Coffee	"	8,100,000	20,100,000
Tobacco	"	16,900,000	7,200,000
Wine	galls.	6,210,000	700,000,000
Spir. liquors	"	28,020,000	5,700,000
Beer	"	420,000,000	155,000,000

But to be able to draw conclusions, we give, as follows, the relation which the consumption bears to the population of each country.

		<i>For one million.</i>	
		English.	French.
Sugar	lbs.	22,400,000	4,270,000
Tea	"	1,137,000	6,500
Coffee	"	405,000	670,000
Tobacco	"	845,000	273,000
Wine	galls.	310,000	23,300,000
Liquors	"	21,000,000	5,170,000

We have selected and translated the preceding article from one of our French medical journals, as calculated to interest the general reader. We hope to be able, on a subsequent occasion, to present a sketch of the proportion of the above articles consumed in the United States, accompanied with such reflections as naturally pertain to the subject of regimen.

We republish the above from the Journal of Health, a new work recently got up at Philadelphia. The object of this publication is the *prevention* of disease. It is designed as a *popular* rather than strictly professional work, and the two numbers already issued give fair promise of a highly respectable accession to our periodical literature. We heartily

wish it all the support it merits, and hope it will be far more *useful* than such works generally are. People always like to read and repeat good rules for the preservation of health ; but after all their admiration, they seldom put them in practice. A celebrated English Surgeon, who is no less familiar with the moral than the physical constitution of man, was, and probably now is, in the habit of concluding his course of lectures on Hygiene with the remark, that he had not only preached up these rules in a lecture-room, but been in the habit of repeating them in his private practice for the last twenty years, and during the whole of that period he could not say that a single individual had ever been persuaded to follow them.

V.

LITHOTOMY A DEUX TEMPS.

I WAS present when Mr. Lizars, of Edinburgh, performed the operation of lithotomy in this town, during the present summer. It was speedily and simply done. One calculus, the size of a pigeon's egg, was easily removed, as soon as an opening had been made into the bladder ; when another was discovered, somewhat larger than the first, but owing to the firm contraction of the fibres of the wounded bladder, it could not be readily removed at the time, and Mr. Lizars put his patient to bed, assuring his medical friends that all further attempts to remove the calculus would only tend to bruise and irritate the bladder and adjacent parts, and render inflammation more liable to occur. He was confident, he stated, from

experience, that on the third day from the operation the calculus would be easily removed, with scarcely any pain to the patient. Accordingly, on the day appointed, those who were present at the operation were in attendance, and saw Mr. Lizars gently introduce his finger into the wound, while the patient lay in bed, and then, guiding a scoop along the finger, bring out the calculus, which was as large as a chicken's egg, with all the ease imaginable. The patient, a gentleman of sixty-four years of age, had a quick recovery.

Mr. Lizars speaks highly of leaving the calculus till the third day, when it cannot be readily extracted at the time of the operation. By that time the suppurative process has commenced, and all the parts concerned are quite relaxed. This is the method introduced by the French surgeon Franco, as the *operation a deux temps*, and which has been condemned by some of our modern writers. Mr. Samuel Cooper strongly reprobates the practice of putting a patient to bed with a stone in his bladder; and advises that, rather than do this, we should make an opening adequate to its abstraction; or if this cannot be done, he tells us to break down the calculus and remove its fragments. If the long and constant irritation of a calculus, or calculi, has the effect of thickening the coats of the bladder, and diminishing its capacity; and if the cutting into that viscus causes its fibres to contract, and firmly grasp the calculus, as the uterus does its placenta when about to throw it off,—both of which occurrences experience shows us to be almost invariable attendants

on the disease, and the operation for its removal,—then all reiterated and painful attempts to remove and break down the calculus will not only be improper, but must also tend greatly to endanger the life of the patient. The cases in which Mr. Lizars has tried this operation *a deux temps* have been attended with the greatest success, and he has removed, on the third day after the operation, very large calculi with the utmost ease. He has hitherto made one or two gentle endeavors to bring away the calculus at the time of the operation, but if he does not readily succeed, the patient is put to bed. So convinced is this expert operator of the superiority of this plan, that he declared to his medical brethren, at the operation I have just mentioned, that were it his misfortune to be obliged to submit to the operation of lithotomy, he would not suffer the forceps or scoop to be used before the third day.—*Gibson's Medical Sketch of Dumfries-shire.*

VI.

LIGATURE APPLIED TO THE AORTA.

The following case was communicated to a foreign Journal by Mr. J. H. James, a Surgeon at Exeter, England.

THE patient, a man aged 44, had an aneurism of the external iliac. The situation and size of the tumor seemed to preclude any attempt to tie it above; and I was induced to adopt the plan revived by Mr. Wardrop, of applying a ligature on the femoral below it. This was done on the 2d of June, and it was at first followed by a very sensible decrease in the tumor; but shortly the ground gain-

ed was again lost; and after considerable further enlargement, it became evident that the process of sloughing was about to take place. Under these circumstances, the patient's situation was fully and explicitly stated to him; and he, having judged that it was better to take the only chance that remained, than perish by bleeding; his nearest relations also having given their full and deliberate assent, I performed the operation alluded to on the 5th of July, nearly in the situation in which it was done by Sir Astley Cooper. Much difficulty was experienced from the great and very embarrassing protrusion of the bowels. The ligature, nevertheless, was applied, but the patient died in the evening, having suffered extreme pain in the aneurismal limb from the time the ligature was drawn.

On examining the body, it was found that the ligature had been applied to the aorta without including or injuring any other part. It was also ascertained that the probable reason of the failure of the first operation arose from a cause that could not have been foreseen; namely, that instead of the usual distribution of the arteries below, the external iliac, in this case, divided into two nearly equal trunks; and although the artery corresponding to the femoralis superficialis had been correctly tied, the channel through the other remained open. The weight of the tumor was nearly four pounds. I shall only further add, that circumstances prevented me from performing the operation from the side of the abdomen, or from tying the common iliac, which I should have preferred, if practicable.

BOSTON, TUESDAY, OCTOBER 13, 1829.

MASS. MED. COMMUNICATIONS.

WE have before us Vol. IV., Part VI., of the Medical Communications to the Massachusetts Medical Society. The numbers and titles of the papers are as follows:—

VIII. *Memoir of Edw. Aug. Holyoke, M.D., &c.*—The memoirs of Dr. Holyoke contain, as might be expected, few facts of interest, except those connected with the great age to which his life was prolonged. Indeed they present, through their whole details, scarce any occurrence sufficiently remarkable to be here designated. From the early age at which he commenced practice to the

day of his death, Dr. H. appears to have kept the even tenor of his way, in the honest and faithful discharge of his duties as a citizen and a physician. The principal means which contributed to his longevity, according to his biographer, were a good constitution and a cheerful temper. Even his temperance, in the present sense of the term, does not appear to have been unusually rigid. He indulged moderately in the pleasures of the table, took his fruit before dinner and his wine afterward, chewed his pigtail and smoked his pipe, kept away indigestion by good spirits and exercise, and removed the ill effects of occasional excess by subsequent privation. The best lesson of

Dr. Holyoke's life is taught by the place which his multiplied years and uniform excellence of character and conduct, had gained for him in the affections of his friends and townsmen; and this lesson is one by which we may all profit. "Truly the gray head is a crown of glory, if it be found in the way of righteousness."

The post-mortem appearances were not remarkable; but those connected with the anticipations he had himself expressed during life, derive considerable interest from that circumstance. For several of the last years of his life, Dr. H. was induced, by various circumstances, to suspect the existence of effusion within his cranium. His theory with regard to it was, that the size of the brain had gradually diminished, and that the space thus left had been filled by a fluid secreted between the dura and pia mater. The following extract from the minutes of the dissection will show to what extent this opinion was correct, and afford a proof of the soundness of his judgment in advanced life, on a point, perhaps, as difficult as any other for a physician to decide,—the diagnosis of his own case.

"On dividing and turning back the scalp, which was very thin and delicate, not a single drop of blood flowed. Although the utmost care was taken in sawing the cranium, as soon as the saw penetrated the inner table a transparent fluid began to flow, and on removing the calvarium, it was found that the dura mater was adherent to the bone nearly throughout its whole extent,—an alteration which did not seem to depend on disease,—the distinction between the two tables of the cranium entirely

obliterated, and the texture of the bone more dense than common. The tunica arachnoides was very firm and opaque; the veins beneath it were very small, containing but little blood. The brain was very firm and dense, and the convolutions very strongly marked; the sulci were wide and deep. The color was somewhat darker than common, and the whole feeling and appearance of the brain was as if it had been subjected to the action of alcohol. A small quantity of serous fluid was found beneath the tunica arachnoides. The cortical portion of the brain was extremely thin, being less than an eighth of an inch in thickness. In the ventricles nothing unusual was discovered. The pineal gland was extremely small, and contained no particle of gritty matter. The cerebellum was thought to be disproportionately small."

IX. *Dissertation on Intemperance, —to which was awarded the Premium offered by the Massachusetts Medical Society, —by WILLIAM SWEETSER, M.D.*—Dr. S. has considered very fully the effect of intemperance in the use of ardent spirits on the various organs and their functions. He examines the much agitated question as to the safety of omitting a stimulus of this kind after the system has been accustomed to its influence; and concludes that the cases are very rare in which any danger is to be apprehended from the change. Dr. S. reprobates the idea that intemperance arises out of physical malady, and is the means suggested by nature for its relief. No consideration of this kind should be admitted to lessen its moral tendency, or the disgrace and infamy with which we are wont to associate this degrading indulgence.

X. *Observations on Abortion.* By E. HALE, jr., M.D.—Dr. Hale remarks on the doubt which is often felt by the practitioner when called to a case of threatened abortion, to what extent treatment may be employed to prevent its occurrence, and at what stage of the process such treatment becomes useless and injurious. The practice adopted in this state of uncertainty, is of course likely to be vacillating. He quotes a remark of Denman, that in many cases where abortion has taken place, the fœtus has been found, on examination, depraved in its structure, or otherwise unfit to come to maturity ; and it may be presumed that in most cases where this process takes place spontaneously, the uterus is unfit to afford, or the fœtus to receive, the requisite support. In such cases it is obviously useless to interfere when the process has commenced. But such a state of things may be brought about by an improper mode of living, and may be kept up by habit ; and the province of judicious treatment is to prevent their recurrence by measures adopted in due season. Other causes, as various accidents, render immediate and active interference necessary. On the whole, however, the common error is to be found in pushing the preventive system too far, and continuing it longer than circumstances will justify. This observation is illustrated by a curious case, the details of which present several points of great interest.

XI. *Memoir of William S. Williams, M.D.* By STEPHEN W. WILLIAMS, M.D.—The distinguished sub-

ject of this memoir lived to the age of 66 years, and enjoyed not only a large share of professional practice in Deerfield, but the unabated respect and attachment of those with whom he was connected in the various occupations of life.

Dr. Williams was one of those physicians who studied medicine in the way most calculated to make his knowledge practically useful. After attending a number of cases in the day, he investigated, and made himself master of what others had known of such cases, in his retired hours of study. Thus did his practice and his reading come in direct aid of each other, as the diagram and the demonstration in a geometrical theorem.

His opinion on the subject of *depletion* may be gathered from the following extract :—

“In acute diseases he bled with a bold and liberal hand, though he never could agree with many of his contemporaries in abstracting blood in the advanced stages of phthisis pulmonalis, and in many chronic complaints. He believed that the modern depleting practice, in such cases, was annually destroying thousands.”

XII. *Observations on the Nature and Treatment of Cynanche Trachealis,* by CHAS. MACOMBER.—Dr. M. has found great benefit, in cases of croup, from minute doses of calomel, given very frequently in some adhesive substance, so that the throat may be almost constantly lined with it. In this way he thinks the false membrane may be prevented from forming, or if formed, may be rendered less irritating. In the author's opinion, this remedy may be safely

trusted to without aid from blisters or sanguineous depletion.

XIII. *Operation for Emphyema Encystis Steatoma*, by JOHN C. WARREN, M.D. *With a Lithographic Print.*—This tumor is said to have been situated on the right cheek, though, we know not for what reason, the engraver has thought proper to place it on the *left*. Its weight is not mentioned. It was successfully extirpated by Dr. Warren.

ACTION OF POISONS ON THE LIVING BODY.

IT is a question of some interest, in a physiological view, whether poisons introduced into the system affect the brain through the medium of the circulation, or more directly by taking the course of the nerves leading from the part to which the poisonous substance is applied. The second of these opinions derives considerable support from the researches of Messrs. Morgan and Addison, of Guy's Hospital, London, who have jointly performed several experiments with a view to determine this point.—A history of these experiments and arguments is given in the *Edinburgh Journal*; and we propose to offer the reader some account of these, with such remarks as may be suggested.

The first and most general of these arguments is derived from the fact, that external applications to the nervous extremities, incapable, from their nature, of affecting the mass of blood, produce effects strikingly similar to those of poisonous agents. Such are extensive burns of the integument, which produce a comatose state, and gun-shot and other wounds,

which are followed by tetanus. As it must be supposed that these injuries act on the sentient extremities of the nerves, and that the impression is thence conveyed to the brain, a similar process may be supposed to occur when poisonous agents have been introduced into any part of the body, where they come in contact with like nervous extremities.

Another argument in favor of this theory, is derived from the very short space of time required for the more powerful poisons to produce their effects. Strychnia, when introduced by an external wound, has been known to act in fifteen seconds, a period apparently too short for the system to be affected through the medium of the circulation. If then, in this and similar instances, the effect is admitted to be produced by the intervention of the nerves, it is most conformable to the simplicity of nature to suppose that the medium is the same in other cases, whatever the interval required for the development of the poison.

But the most conclusive arguments in favor of nervous transmission, are derived, by Messrs. M. and A., from the results of their own experiments. If a poison acts by being carried in the blood to the brain, it ought to exert its effect much sooner on the arteries than the veins, and on the arteries above the heart than those below. That this is not the fact, was shown by introducing a powerful poison successively into the jugular vein of an animal, and its carotid and femoral arteries. The time required for the substance used to produce its effects, was found, in these

successive trials, to be nearly the same. A still more conclusive experiment on this point, was made by transmitting the blood of a poisoned animal through the artery of another. A communication was established between the right carotid of one dog, and the left of another; which was effected by dividing both vessels, and inserting the lower end of each in the upper end of the opposite. Nux vomica was then introduced into a wound in the back of one only. The inoculated animal was affected with tetanus in three minutes and a half, and died in four minutes more; while the other was never affected at all. Yet the blood of the former must have flowed into the artery of the latter; and the inference seems inevitable that the poison did not enter into the circulation.

It is a singular fact, and one which shows the difficulty attending these researches, that three distinguished physiologists should have separately performed experiments with a view to the solution of this very question, and have all arrived at a conclusion precisely opposite to the one just stated. Mr. BRODIE found that when the leg of an animal was firmly bound by a ligature, the sciatic nerve only being excluded, the effects of a powerful poison applied to a wound of the foot, were not experienced until the ligature was again loosened, so as to restore the circulation of the limb. The great experiment of MAGENDIE consisted in applying poison to the amputated limb of an animal, the circulation being kept up through the separated orifices of the artery and vein connected together

by quills. The *upas* was introduced into a wound of the limb so prepared, and produced its effects in the usual time. And lastly, when Dr. BARRY applied cupping-glasses over a poisoned wound, the progress of the symptoms was arrested, although the animal was previously about expiring; a result which was naturally explained by supposing the process of absorption to have been interrupted, and the poison prevented from passing into the circulating fluid.

But Messrs. Morgan and Addison are by no means disposed to admit the conclusion, which these experiments so obviously suggest. To Mr. Brodie's experiment it is objected, first, that the want of circulation in the limb may have impaired the functions of the nerve itself; and secondly, that the nerves of sensation *may* possibly not be the same nerves which transmit the poisonous influence to the brain. The experiment of Magendie confessedly proves that poison may be conveyed in the circulating fluid; but it proves nothing more; for as soon as the blood has passed the artificial portion of the tube, the sentient extremities of the nerves, on the interior of the next portion, are ready to receive an impression, and to convey it with all despatch to the encephalon. Lastly, the effect of the cupping-glasses, which Dr. Barry supposes to have interrupted the process of absorption, *may* have been only to paralyse the sentient extremities of the nerves, and thus interfere with their function of carrying the morbid influence to the brain.

It must be confessed that these

pros and cons,—this array of conflicting facts and contradictory conclusions,—are calculated to produce in the reader no small degree of perplexity; and to propose any theory which shall reconcile all these apparent contradictions, is no very easy task. *Non nostrum tantas componere lites.* Perhaps, however, the amount of absolute demonstration, on either side, is less than it would at first appear. The strongest direct evidence which is adduced, may be found in the experiment of the amputated limb on the one side, and that of the double union of the carotids on the other. To the former of these, Messrs. M. and A. answer, that when the blood has passed through the artificial tube, the impression is received by the nerves above and conveyed to the brain. This suggestion, while it does not impair the force of Magendie's experiment, really casts a shade of doubt on their own; for if it were so, a similar effect ought to take place in the artery of the animal receiving the noxious blood from the other; and they must still account, on their own theory, for the fact of the animal in question remaining unaffected.

Waving this objection, however, and with it excluding all doubt as to the former experiment, the latter still falls short of being absolutely conclusive. It seems impossible that the blood should have passed through the mutilated extremities of the vessels on one side, with the same facility that it traversed the perfect artery on the other; nor, having done so, is it certain that being formed in the vessels of one animal, it ought to

have a like relation to the sensibility of the cerebrum in both. Admitting, however, all that the above experiment is intended to prove, namely, that the action of poison is occasionally conveyed independently of the circulation, to what other vehicle are we to refer its transmission? The means of communication pointed out by our authors are the nerves; not, however, those of sensation and motion, but another set provided particularly for this purpose, and communicating from all parts of the body directly with the brain, without the intervention of the spinal marrow. This liberal addition to the human structure, for such it seems to be, certainly detracts something from the simplicity of the theory, and is rather at variance with that singleness of contrivance in nature's works, which they are elsewhere disposed to regard as one of their chief beauties. The experiment which appears to have suggested this theory, and in which a poisonous substance acted in its usual time, notwithstanding the previous division of the spinal marrow, proves either that the effect was produced by absorption, or that the *modus operandi* is unknown to us. The supposition of a peculiar structure, by which the impression was conveyed to the brain, is just equivalent to the latter alternative.

If then poisonous substances affect the system through any medium except that of the circulation, the nerves seem to offer themselves as by far the most probable avenue; and this supposition is confirmed, as is remarked by our authors, by the effect of mechanical and chemical agents in pro-

ducing tetanus and coma. In what proportion of cases the nerves transmit the poisonous influence, and whether the two modes often exist conjointly, are points not easy to decide. Where the effect is produced with great rapidity, it seems most natural to attribute its transmission to the nerves; but it is difficult, on the one hand, to say what is the shortest period sufficient for the process of absorption to take place, or on the other, to explain why the effect, if conveyed by the sentient nerves, should not, like the sensations themselves, be absolutely instantaneous.—The subject altogether is a curious one, and we hope to be able to report to our readers more ample results from its future investigation.

EXTIRPATION OF THE UTERUS.

THIS operation has been recently performed by a French Surgeon, M. Racimer. After the entire organ had passed from the patient into the hand of the operator, the epiploon appeared at the gap; on being pushed back, however, it retained its proper place. There was little hemorrhage, and this was arrested by a few ligatures. The operation, performed with the utmost coolness, occupied but twenty minutes. A convex blunt-pointed bistoury was the cutting instrument

used by the Surgeon; and at the date of the report, three days after the operation, the patient was doing well. The pain is said not to have exceeded that of an ordinary labor.

Debility of the Rectum.—A diminution of the power in the muscles which act on the rectum in expelling the fæces, is a complaint of very common occurrence, and being attended with the symptoms of *Stricture of the Rectum*, it is frequently mistaken for it. Several cases of this kind have lately come under our notice.—*Med. Gaz.*

Prussic Acid.—This article, rectified from calcined sulphate of zinc, has been found by M. Schütz to retain its quantities $3\frac{1}{2}$ years.

Premium.—The Editor of this paper is authorized, by a friend to the young men of our country, to give notice that a Premium of Fifty Dollars will be given for the best Essay, addressed to the young men of our Colleges and professional Seminaries, dissuading them from the use of wine, spirits and tobacco; the Essays to be examined and the Premium awarded by Rev. Drs. Woods, Edwards, and Cornelius, of Andover, Dr. J. C. Warren, of Boston, and Professor Silliman, Yale College, New Haven. The Essays must be sent, free of postage, to the Editor of the Journal of Humanity, Andover, Mass., by the 1st of January, 1830; each Essay to be accompanied with the name of the author, under seal.—*Journal of Humanity.*

WEEKLY REPORT OF DEATHS IN BOSTON, ENDING OCTOBER 2.

Date.	Sex.	Age.	Disease.	Date.	Sex.	Age.	Disease.
S. 25.	M.	61 yrs	liver complaint		M.	12	dropsy in the head
	F.	34	apoplexy		F.	12	do.
26.	F.	12 mo	hooping cough		F.	16 yrs	cholera
27.	M.	12	canker in the bowels		M.	12 mo	measles
	F.	43 yrs	consumption	30.	F.	23	dysentery
28.	M.	42	typhous fever		F.	9 yrs	typhous fever
	F.	42	cancer		M.	22	dysentery
	M.	6 mo	measles	O. 1.	M.	35 yrs	unknown
	M.	24 yrs	chronic diarrhœa		F.	10 mo	marasmus
	F.	2	consumption	2.	M.	15 d	
29.	M.	20 d	unknown		F.	35	dropsy
	M.	80 yrs	old age				
	M.	14 mo	dropsy in the head				

Males, 13—females, 11. Total, 24.

ADVERTISEMENTS.

ANATOMICO-SURGICAL DRAWINGS, and Descriptions of all the Surgical Operations, according to the most approved methods. By L. J. VON BIERKOWSKY. Translated from the German. In two volumes, and 570 drawings on 58 folio plates.

EXTRACTS FROM THE PROSPECTUS.

"Encouraged by the approbation of the Medical Profession, it is proposed to publish a work under the present title."

"This work contains 570 drawings, on 58 plates folio; to which is annexed, in two volumes 8vo. a concise explanation of each surgical operation. The plates exhibit not only the parts interested in operations, in their natural position and size, but, what is much more important, represent the different acts or stages of the whole operation, while others exhibit delineations of such morbid affections as consist in the change of the natural position, structure, color, &c. In order to afford the work at a moderate price, the plates will be Lithographic; and for the purpose of securing perfect accuracy, engagements have been entered into for their preparation in Berlin, under the especial direction of two of the most distinguished Professors of the University of that city."

A specimen of the translation, and the plates, is deposited for inspection at the Bookstore of CARTER & HENDEE, who receive subscriptions for the work.

Subscribers will be furnished with the work, and the first impressions of the plates, at the price of \$30.

The subscription list will be open until the 1st of November, 1829, after which period the price of the work will be raised to \$40.

P. S. For the accommodation of subscribers the work will be issued in five Numbers, at \$6 each, payable on delivery. Sept. 29. 18202N1D.

HARVARD UNIVERSITY.

MEDICAL LECTURES.

THE MEDICAL LECTURES in Harvard University will begin in the Massachusetts Medical College, Mason-street, Boston, the third WEDNESDAY in October next, the 21st, at nine o'clock, A. M. Anatomy and Surgery, by Dr. WARREN. Chemistry, Dr. WEBSTER.

Midwifery and Medical Jurisprudence, Dr. CHANNING.

Materia Medica, Dr. BIGELOW.

Theory and Practice of Physic, Dr. JACKSON.

Students attending the Medical Lectures are admitted, *without fee*, to the Surgical Operations and Clinical Practice of the Massachusetts General Hospital, during the courses.

Aug. 4. W. CHANNING, *Dean.*
eptOct21.

CARTER & HENDEE have just published,—The Constitution of Man, considered in Relation to External Objects. By GEORGE COMBE.

From the Preface to the American edition.

"Mr. Combe's work should be placed with those, of which so many within a few years have appeared, which are devoted to the all-absorbing topic of Education. It treats of moral, intellectual, and physical education. This is not formally done under so many distinct heads. But the whole course of reasoning of the author, and the whole array of all his illustrations, have it always obviously in view to show how the highest cultivation of each of these may be most surely brought about.

"The publishers have printed this edition from a belief that there is much in the work to interest the community.

"It has a novelty to reward the general inquirer, and it presents the well known under novel aspects. There is one class amongst us who may study it with much advantage. Scholars are referred to, a class here too small to form a distinct order with habits of their own, and who insensibly fall into those which, although not mischievous, to the multitude on the score of health, too often make ill health the portion of the sedentary student, and bring upon him premature decay.—To all classes it is recommended, and the various learning and acuteness of the author well fit him to write a book which addresses its instructions to the whole community." Sept. 8.

ATREATISE on the Scrofulous Disease, by C. G. HUFELAND, Physician to the King of Prussia, &c., translated from the French of M. Bousquet, by Charles D. Meigs, M.D., is just received and for sale by CARTER & HENDEE.

Sept. 8.

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

THE BOSTON
MEDICAL AND SURGICAL JOURNAL.

VOL. II.]

TUESDAY, OCTOBER 20, 1829.

[No. 36.

I.

Account of the Treatment of Gangrenous Sore Throat, principally by Gargles of Infusion of Red Pepper. In a Letter to one of the Editors of the North American Med. and Surg. Journal.

By ALBAN G. SMITH, M.D., of Danville, Kentucky.

I RECENTLY took up your last Journal, in which I saw a paper by Dr. Beesley on what he calls gangrene of the throat, but what I call putrid sore throat; and as he, very properly, has given the result of his experience in his own cases, I have concluded that it would be wrong for me to withhold the result of my experience in some hundreds. My first case occurred in the son of a Mr. G., near this place, a boy about five years of age. His mother sent for me and told me that he complained of difficulty of deglutition, and a pain in the ear. On examining the tonsils, I found a white ulcer on each, about the size of a $12\frac{1}{2}$ cent piece. I treated the case with calomel and rhubarb as a cathartic, and finding considerable difficulty in opening the bowels, at the suggestion of the mother, I used a solution of salt of tartar, which had a very happy effect. In a day or two the ulcers turned to an ash color. I used the red pepper, salt, and vinegar, as directed in Thomas's Practice, but

used it merely as a gargle, injecting it into the fauces with a small syringe. This practice being continued a few days, the sloughs fell off, and he got well.

The next case was my own son, and about the same age. His mother observed that he had high fever at night; I told her to give him a dose of calomel, and being very busily engaged in practice, I heard nothing more of it for two or three days, when his mother told me that he had passed a very restless night, his fever being very high, and had said that his ear hurt him. On examining him, I discovered that his breath was offensive, having the mercurial smell, and I concluded that he was salivated by the dose of calomel I had given; but in the course of the day I discovered some anxiety of countenance and difficulty of breathing, and on examining the tonsils, I found large green ulcers on them. I then gave him an emetic of COXE's hive syrup. After he had vomited two or three times, I discovered a change; his countenance lost that anxious appearance, his pulse became more frequent, and a general prostration ensued; the ulcers became darker colored, and a sore that he had on his hand assumed the same color. Notwithstanding I used a great variety of tonics and gargles, the case proved fatal in few days. It was with great difficulty that I could give any remedy a fair trial,

for it was almost impossible to get him to take anything: I had to force his mouth open with a knife-handle every time I gave anything, to the serious injury of his teeth, so determined was he to take nothing.

I was in a few days called to several cases. Two were in one family. One, a white child of light complexion and very fat, died in twelve hours after the disease was first discovered. I concluded I would give the red pepper tea, salt and vinegar a fair trial: I accordingly directed it to be made very strong, and a tablespoonful given every hour, the dose to be augmented if the child did not swallow the whole of it, and, where the case was very bad, to be given every half hour. At the same time I directed a dose of calomel, and kept the bowels open afterwards with rhubarb and salt of tartar. After this I scarcely lost a case. Sometimes, where I was afraid of the purgative effects of calomel, I used a spirituous solution of corrosive sublimate, as an alterative; and although I have been frequently prevailed on to use other remedies, I have never found any that I could rely upon but the red pepper, &c., and the calomel, rhubarb and salt of tartar.

While I was attending to a case of fever, some time since, a young gentleman in the house informed me, that in the night he was taken with a fever and a kind of dryness in his throat. On examination, I found, in the upper part of the pharynx, a large black ulcer. I directed him to take a small wine-glassful of the infusion of red pepper, &c., every half hour, with a dose of salts; and in eight hours, when I returned, I examined the ulcer; it had lost its slough and

looked red, and it got well in a few days. I have seen a great many cases where, after the sloughs began to come off, they would be coughed up in bits as large as a man's thumb; and in some cases it would be six months before the child could articulate distinctly. I have been called in consultation several times, and every case that was blistered before I saw it, terminated fatally, the blister turning black with the ulcers. In many of the cases that I have seen, there has been some pustule containing matter, sometimes on the under lip or chin, sometimes on the hands; and one can tell the color of the ulcer by the color of that, as well as by examining the throat. In children that are very fat, of light or sandy complexion, the disease runs its course very rapidly, and is more apt to be fatal. I have seen many cases lost by parents and physicians supposing it to be croup, and using emetics too long. I have seen many cases where the child would run about, and not appear, to a common observer, to be ill until a few minutes before death. It generally goes through the family of children. I think that in white children it is more fatal than among black. Since my son died, which has been seven years, my children have been remarkably subject to it; my wife says we have had upwards of twenty cases, some of them very bad, in our own family.

I generally direct ten or twelve pods of red pepper to be cut and put into a pint cup, and enough hot water poured on them to fill the cup half full; let it stand a few minutes, then add a tablespoon heaped full of salt, and fill up the cup with strong vinegar. There are sometimes cases where the

throat is much swelled on the outside ; in those cases I have found it best to repeat the calomel more frequently ; and I have frequently given emetics of blue vitriol with advantage. I prefer calomel in small doses ; for every case that I have met with, where purgatives or emetics have been used extensively, has proved fatal. Since the first season that this disease prevailed in this country, it has been quite common every year, but was scarcely known before.

II.

LITHOTRITY.

The Editor of the London Medical Gazette has given his readers a circumstantial history of the Lithotritic process, which is now practised by many of the ablest Surgeons in Europe.—The following remarks are extracted from this history :—

A SHORT review of the history of this process may not be uninteresting : its origin is curious. It is not one of those valuable accessions to science and the public good, resulting, like those of Watt or Davy, from direct reasoning, or a wise adaptation of means to the end ; nor was it immediately hit upon by a lucky accident. It occupied no portion of the thoughts even of its inventor, when he began the course of experiments which eventually terminated in its contrivance. His first design was to destroy the stone by a re-agent,—a plan which had often before been attempted without success ; but in endeavoring to accomplish his purpose, two difficulties arrested him : first, the danger of injuring the bladder by the chemical solvents which he should employ ; and, second, his

ignorance of the chemical composition of the material on which he was to act. In order to overcome the former, M. Civiale thought of introducing a purse into the bladder, by means of a tube, through which, on securing the stone in the purse, he was to pour in his powerful solvents. But where was such a purse to be had ? It should be as wonderful in its properties as that of Fortunatus,—it should be fine and flexible, and delicate and capacious : and, at the same time, perfectly proof against strong chemical agents. Here was a difficulty indeed ;—no substance in the animal, vegetable or mineral kingdom, seemed adequate to the purpose, and the project was consequently abandoned. Yet the artist was not discouraged by his failure : fortunately he proceeded to combat with the second obstacle. As it was requisite to procure a specimen of the stone, it was obviously necessary to introduce some instrument that should break off a portion of it, without wounding the bladder. Having reason to think that it was not impossible to pass a *straight* sound, four lines or more in diameter, through the urethra, he made repeated trials, and ultimately convinced himself that it was perfectly practicable. On this principle his earliest instruments were constructed.

It is curious to observe that M. Civiale all this time never entertained any other object in his experiments, than simply to procure the specimen for which he was so anxious ; and that the idea of lithotritry, or grinding the stone to pieces, did not once occur to him, until he found himself obliged to give up his favorite project of the purse.

We need not enter into a detail

of the successive changes and improvements which the ingenious inventor adopted in bringing his instruments to their present state of comparative simplicity and perfection; we shall merely observe that the six elastic branches originally employed are now reduced to three, and that the *lithotriteur*, or perforator, in all ordinary cases, is armed with teeth, which are set to work on the calculus by means of a drill. In ten or fifteen minutes an expert operator demolishes a stone of the common size,—that is to say, one of about 18 or 20 lines in diameter.

One very obvious advantage of the new method we must not pass unnoticed. It is well known that persons afflicted with calculus, alarmed at the danger of being cut, procrastinate and put off the evil day, and endure, for years together, the most exquisite torture, rather than submit to the knife; while the stone, meantime, is acquiring additional bulk and complexity of character. All this, we suspect, will be materially altered when the new process comes to be better known: patients will have recourse to it in an earlier stage of the complaint, and their cure will, of course, be proportionably easy.

The objections made to this method are met by the following answers:—1. The introduction of *straight sounds* is no longer debatable: experience, both ancient and modern, has proved it practicable beyond a question; and it is demonstrable *a priori* from a knowledge of the structure and direction of the urethra.* 2. The expansive property of that

passage very soon permits the introduction of straight tubes,—three, four, or even five lines in diameter. 3. The pain is, in general, very inconsiderable; and where it proves severe, this is dependent on disease of the bladder or neighboring parts: nervous excitement there may certainly be in many cases; but if these objections have any force against *lithotritry*, they apply still more strongly to *lithotomy*. 4. The treatment is not tedious; and even if it were, perhaps many would think it preferable to be under the hands of a lithotritist for two months, than for two minutes under the knife of the most expert lithotomist. 5. On the supposition that the operator is competent (as should always be supposed in every operation), there is no *danger* in the process of *lithotritry*: an awkward operator, indeed, might do mischief through a want of address; but the same objection might be made even to *phlebotomy* itself, which in unskilful hands has been productive, as every body knows, of very grievous consequences. Nor is there better ground for other objections, such as alleged chronic inflammations of the urethra or bladder, &c., leaving behind pieces of stone, or other calculi untouched: such charges should be matter for testimony, but they have never been supported by either facts or experience.

Le Roy, Heurteloup, Amussat, and others, have, from time to time, suggested alterations and additions, by way of improvement, in the lithotritic apparatus; but the instruments employed by Civiale appear to us to be the most simple, and we are great admirers of simplicity in the construc-

* See Amussat's Memoir on the practicability of effacing the curvature of the urethra by straight sounds.

tion of surgical apparatus. The march of improvement, it may be observed, has ever been from what is more complicated to what is less so;—nature herself is the mother of simplicity.

In conclusion, we think our readers will agree with us, that the ingenious contrivance of M. Civiale is deserving of approbation. Our French friends, in the characteristic style of compliment, have pronounced it '*glorieuse pour la chirurgie Francaise, honorable pour son auteur, et consonante pour l'humanité.*' It may be equally characteristic (perhaps national) in us, not to be dazzled with the glory of the invention; but we are not, at the same time, blind to its merits. With all due respect for the Academy of Sciences, and for the names of Chaussier and Percy, we cannot elevate ourselves to raptures. We are, in plain terms, disposed to qualify our meed of praise from the consideration of one or two circumstances. It is to be observed, in the first instance, that the lithotritic process is available in none but cases in which the stone does not exceed a certain bulk; and this is allowing much, as, in fact, it is admitting it to be available in all ordinary cases. Its machinery, however, is so complicated, compared with the simple instruments commonly employed in lithotomy (now reduced almost to the *prisca simplicitas* of the *apparatus minor*), that our anticipations, we must confess, are considerably damped; and, indeed, some of the instruments which we have seen appeared not altogether free from the risk of portions of them breaking off during the process of grind-

ing the stone, and thus remaining in the bladder. The success of the operation, besides, mainly depends on the extreme familiarity of the operator with his instruments; though much of this objection will be removed, no doubt, when the process is better understood. The manipulation is so different from that required in ordinary operations, that our most experienced surgeons will feel some awkwardness when they first attempt it; and we have heard that M. Dupuytren made trial of it in the Hotel Dieu without being successful. Any decided opinion, indeed, must be given cautiously: it bears upon it the fascinating stamp of novelty; it promises a great good, but it has yet to undergo the rigid test of time. Claims it unquestionably has, and strong ones too, upon our notice; and we are happy to find that it is being tried in our hospitals, where its merits will soon be put beyond dispute.

We have spoken of M. Civiale, throughout these remarks, as the true inventor of lithotritry: such is our persuasion. He was indisputably the first who made known to the public the possibility of performing such an operation; whether he was the first who *thought* of its feasibility we will not decide: but be it remembered that it was not until he had *published* his experiments, that other competitors for the honor of the invention made their appearance. We cannot stay to moralize on the fate of most originators of useful projects; but we suspect that M. Civiale must be content to await tranquilly, though confidently, a tardy decision upon his claims.

III.

ON CARBONATE OF AMMONIA.

By DANIEL B. SMITH.

THE volatility of this salt renders it extremely difficult to preserve uninjured in vessels that are occasionally opened to the air. When in its perfect state, it is composed of one atom or twenty-two parts of carbonic acid, and one atom or seventeen parts of ammonia. There is, besides this salt, another combination of carbonic acid and ammonia, containing two atoms of acid, or forty-four parts, and one atom, or seventeen parts of alkali. This salt, which is the bicarbonate, has no smell and less taste than the carbonate. It is formed when the latter salt is exposed in powder to the air. The carbonate of ammonia of commerce is now obtained, in great part, from the tarry liquid obtained in the distillation of coal gas. It is sublimed in moderately hard semi-transparent cakes, which are brittle and white. By exposure to the air, part of the alkali soon escapes; it loses its strong smell of ammonia, and is gradually converted into the inodorous bicarbonate. So rapid is the progress of this change, that it is seldom we meet with the article in our shops which is not more or less injured by it. The first sign of the loss of alkali, is the efflorescence on the surface, which gradually extends till the whole crystalline mass is altered. It is from this cause that we have so much difficulty in pleasing those who are particular about the quality of their "smelling salts."

A preparation, called "the Preston smelling salts," has within a few years been introduced

from England, and has deservedly been much sought after. The manufacturers have wisely put it up in very wide-mouthed bottles, which enable one to inhale a much larger quantity of ammonia at once, and thus increase the apparent strength of the salt. But it has other qualities to recommend it, than the manner in which it is put up for sale. It retains its color for a longer time and wastes more slowly than the common smelling salts.

It was generally believed, when the article was first brought here, that its superiority was owing to the sublimation being made at once into the bottle, so as to avoid any loss of ammonia by unnecessary exposure to the air. An examination, however, will satisfy any one that the salt is *crystallized*, and not sublimed. The superior compactness and hardness of a crystalline over a sublimed salt, are great advantages in so volatile a substance as the carbonate of ammonia; and to this, I have no doubt, the good qualities of the Preston salts are to be attributed.

The salt may be crystallized with great facility in the winter season. The plan which I have followed is to dissolve, in a pint of pure aqua ammoniæ, a pound and a quarter of the crystalline carbonate of ammonia, with a gentle heat.

By exposing this to a freezing temperature, crystals of the carbonate of ammonia will be obtained, the size and hardness of which will depend on the length of time which they require to crystallize. I use the aqua ammoniæ as a solvent to secure the formation of salt with the minimum of acid.

I recommend to those apothecaries

caries who wish to procure an excellent carbonate of ammonia, to adopt this process, which will furnish them with a salt in all

respects equal to the Preston smelling salts, at one-eighth of the price which the latter costs us.

BOSTON, TUESDAY, OCTOBER 20, 1829.

DELIRIUM TREMENS.—MEDICAL JURISPRUDENCE.

DR. DRAKE, of the Western Journal, mentions a late trial before the Supreme Court of the State of Ohio, of an individual about fifty years of age, and the father of a large family, who, during an attack of delirium tremens, had murdered his own wife, by cutting through her neck with a narrow axe, which severed the spinal column and caused instant death.

"It appeared from the testimony," says Dr. D., "that for several years he had been subject to occasional fits of intoxication, which in the latter part of the time had been followed by *Mania a potu*, which generally lasted for several days, and went off spontaneously. In these paroxysms he had the physical and moral symptoms which usually characterize that malady. The former were, great tremors of the hands, a pale face, red eyes, and sometimes a copious perspiration, even when exposed half naked to a cold atmosphere. The moral phenomena were, disordered perceptions of sight and hearing, so that he often insisted that he saw himself surrounded by snakes and other reptiles, or by armed men who sought to kill him; or supposed he heard strange sounds of trumpets, or vocal music, or conversation of which he was the subject, and the object of which was mischief to himself. He was thus filled with apprehension for his safety, and sometimes ran about the village at night, as if attempting to escape from bad persons who were pursuing him. On a

certain night, he made so much clamor as to excite the idea of several men engaged in a riot. At another time, in his own house, he concealed himself between the feather and the straw bed, where he was almost suffocated. On another occasion, he was found, after dark, standing in the street without shoes or hat, and had described around him a circle in the dust, and declared that if any one entered it, that person would kill him. At other times he would peep from his window, and point his gun, as for defence, against imaginary persons, who were approaching to seize him. Again, he would fancy that two armies were engaged in battle, and that he must join one of them. In all his paroxysms he had so great a degree of watchfulness, as to sleep little or none for several nights in succession. But his prevailing maniacal conception was, that his wife was in a combination with three of his neighbors, one of whom was his son by a former wife, and that they had conspired against his life. Of these men, when they were not in his presence, he was afraid. In the paroxysms he was accustomed to charge his wife (unfoundedly in the opinion of witnesses) with a criminal intimacy with these persons. He even threatened to kill her if she did not desist, and had been heard to utter this threat when he was thought by one of the witnesses to be rational.

"On the Sunday before the murder he drank freely, and was intoxicated, in which condition, as usual, he was quiet, dull, and disposed to lie in bed. Monday, Tuesday and Wednesday presented nothing special. On Wednesday evening he

complained to a neighbor of feeling unwell, and asked his son's assistance in the performance of some necessary manual labor for his family. He seemed to the witness to be rational. During the night he slept none, and complained of cramp in his stomach. The next morning his family thought him crazy, but were not alarmed, as they were accustomed to such attacks. In the course of the day he took an axe on his shoulder, and walked rapidly to the house of a neighbor, whom he desired to go home with him, saying they wanted to kill him; and about the same time he told another of the supposed conspirators that he had overheard his wife and him, that morning, whispering about taking his (witness's) life.

“He spent the day at home, in the midst of his family, apparently in agitation and terror, but said he would not hurt any one, and did not wish to be hurt. In addition to the axe, which he placed under the bed, where it was often kept, he provided a scythe, which he brought into the house. He manifested jealousy of his wife, and told her to act better, for she had already caused the death of thirty thousand men. He fancied that the persons of whom he was jealous were in the loft manufacturing ropes to hang him, and going up, returned and said he had cut the ropes to pieces, and brought down the fragments with him, though he had nothing in his hands. In the course of the afternoon, he fastened both the doors of his house. At the usual time his wife went out to milk, and he barred the door after her. On her return he fastened it again. She was seated near the fire, and he was walking the room. At length he took the axe from under the bed, and suddenly gave the fatal blow, following it up with two others on the face. His oldest daughter caught the instrument, which he yielded up, and then seized the scythe, with which he attempted to strike her. She defended herself with a chair,

till the smaller children having opened the door, she made her escape. He took his youngest child in his arms, and sat down by the window. The child exclaimed, ‘mamma bleeds!’ which he said made him feel bad. When his neighbors arrived immediately afterwards, he gave himself up, acknowledged what he had done, said he knew he would be hung for it, but that he ought to have done it nine months sooner; and that if he had it to do again, he would strike two blows where he only struck one. Talked so rationally that many of the witnesses could not believe him deranged. Evinced no dread of punishment for his crime, but was still in great apprehension from the persons who, he had believed, intended to kill him. Was glad that he had defeated their calculations. On his way to the city to be committed to jail, talked rationally and composedly about his affairs, and on various subjects; but frequently asked the guard if they did not hear sweet sounds of different kinds, and on being answered in the negative, insisted that he could not be mistaken. After being committed he became regular, and expressed his regret at what he had done.”

The defence set up was insanity. He was, however, found guilty of murder, and condemned accordingly. We shall not attempt to follow Dr. Drake in his excellent remarks on this case; but present to our readers such a view of the subject as has been suggested to us by the perusal of them, and by such other inquiries as we have been enabled to make.

The law which holds the madman exempt from the punishment of crimes committed under the influence of his derangement, is obviously founded in reason and humanity. This immunity, however, does not, according to the common law, extend

to the drunken man who commits a crime while under the excitement of liquor. There are several reasons for the severity of the law on this point, some of which respect the criminality of the evil doer, and others have a principal reference to the security of the public. We will endeavor to present these to our readers in a distinct form.

1. Drunkenness is itself a crime, and he who alleges it as an excuse, attempts to take advantage of his own wrong. "The law," says Blackstone, "will not suffer any man to privilege one crime by another." The language of Lord Coke on this point is still stronger. "The drunkard," says he, "is voluntarius dæmon, and whatever ill he doth, his drunkenness shall aggravate it. Nam omne crimen ebrietas et incendit et detegit."

2. The drunkard deprives himself of reason, knowing that when so deprived, he is liable to commit violence on the persons of others. The first crime, therefore, includes the consequences which result from it. Such is the language of the Roman law:—"Culpâ non carent, quod inebriari se passi sint." And again:—"Quid quod nec dolo careant,"—they cannot even be acquitted of evil intention,—"*si non simplicitate rebrii, id est tales, qui præter consuetudinem vino capti sunt, dum suas aut vini vires ignorabant, aut inviti compellebantur cum strenuis paria bibendo facere; sed vel ebriosis, qui ignari non sunt quo ruere soleant vino victi, vel etiam insolentes, qui hanc ob causam largius bibunt, ut audentius in injuriam eant.*"—*Voet in Pandectas* XLVIII. 10. 1.

3. If the law were otherwise, drunkenness might be pretended, in order to commit crime with impunity, and a fraud of this nature could not, without great difficulty, be detected.

4. The same state might voluntarily be incurred, for the double purpose of exciting the courage to commit a crime, and of escaping its penalties; and thus the hardened villain would be furnished with direct means to elude justice. Such is the character of the wretches described by the author above quoted; "insolentes, qui hanc ob causam largius bibunt, ut audacius in injuriam eant."

Two general propositions, then, are involved in the law on this subject:—1. That in using liquor to excess, knowing its possible consequences, the drunkard makes himself answerable for these consequences. 2. That the public welfare requires that he should be held thus answerable. We have then to consider the correctness of these principles in themselves, and their application to the case of delirium tremens.

1. If it be true, then, that he who indulges in liquor makes himself responsible for all its effects, the maniac a potu can no more claim immunity, than he who acts under the immediate influence of intoxication. We cannot escape this conclusion by saying, that the delirium in question is a remote and distinct effect of the indulgence; that it occurs as the sequel of long-continued and repeated excess; or that it often, nay generally, happens in consequence of withdrawing the very stimulus to which the drunkard is accustomed. It is still among the effects of this vice; an evil which subsists in virtue of

intemperance, and which would not subsist without it. If, then, in the phrenzy of his delirium, the unfortunate subject of it commits murder, this too was among those possible consequences of his original excess, for which he made himself responsible. But is it not obvious that this mode of reasoning proves too much? Suppose the drunkard to have passed through the successive paroxysms of ebriety, and even the short-lived mania of delirium tremens, without committing any serious act of violence on the persons of his fellow-men. A darker doom now awaits him. The repeated shocks which his reason has received have finally overpowered it. He becomes permanently insane, and while in this state, commits an outrage on the person, or takes the life, of some one unhappily exposed to his fury. Would it be said that the action was not excused by his insanity, because he brought that insanity on himself? Such an argument never could be listened to with patience, either within a court of justice or without it. By the late reports of madhouses in England, it will be seen, that a very considerable proportion of their inmates have become so from this indulgence. All these, then, are moral agents, and responsible for the crimes they perpetrate. Nor is this all. The victim of gaming, of debauchery, of unnatural crime, are equally in this sense the authors of their own misfortunes; and shall we add to this the imputation of guilt, when their phrenzy has inspired them to the commission of acts, in their nature violent and unlawful? We

freely confess that such a sentiment seems to us to violate the plainest dictates of humanity, and we are not aware that it is sanctioned by the laws of any civilized nation.

2. Are the considerations of expediency, on which the drunken man is made responsible, equally applicable to the subject of mania a potu? The reasons for the law, arising out of these considerations, are, as above mentioned, the ease with which drunkenness may be simulated, and the possibility of its being actually induced for the sake of committing crime. Neither of these reasons has any application to the case of delirium tremens. With regard to the first, we venture to assert, that there is no form of mania, the counterfeiting of which is attended with more serious difficulty than the one in question. It is a disease induced by peculiar causes, and accompanied and marked by appropriate symptoms, some of which it is utterly impossible to simulate. It is a disease which comes on slowly, with gradually increasing violence, until it arrives at its acme, which often does not happen for many days. The task of one who should attempt to counterfeit its gradual progress and its eventual paroxysm, is beyond almost any effort of deception which the mind can conceive. To suppose, then, that it would be feigned by one intending to commit an outrage, as the most convenient means of doing so with impunity, is utterly extravagant. As respects the second reason, we hold it still less applicable to the case under consideration. This state could not be induced at

the will of the intentional criminal; nor if it could, and the zeal of the individual was sufficient to induce him to hazard his life in such a project, could it be subjected to his control, and made subservient to his views. The notion of *design*, therefore, in its production, is entirely too absurd for serious refutation.

But if it is said we must *prove* the maniac a potu to have been actually insane, in order to entitle him to the consideration claimed, the demand is unquestionably reasonable and just. Whether the prisoner was or was not so, in any particular case, is matter of evidence, and must be decided by proper testimony. In regard to this point, there is an important distinction, which has been often made, and which is laid down with sufficient precision by Dr. Drake. Unless it appear in evidence by the actions of the prisoner, that in regard to a particular subject or train of ideas, his reason was actually perverted, and farther, that the murder, or other outrage, was the consequence of this particular perversion,—was committed in accordance with the false premises and erroneous notions thus adopted,—unless both these points were clearly made out, he should be held guilty. On all but the particular subjects of his phrenzy, the maniac is a moral agent, and responsible to the laws; and if he perpetrates a criminal action, aware of its nature, and conscious of the outrage he commits, he makes himself a subject for the penalty of these laws.

We would add one remark, which, though not essential to the argument,

will tend to illustrate still more strongly the distinction between delirium tremens, and the paroxysm of intoxication. It has been said that drunkenness does not impair the judgment, except as it inflames the passions, and exhibits them in a true though stronger light. As, then, violent passion from moral causes furnishes no excuse for the actions committed under its influence, similar excitement from a physical cause ought to be viewed in the same light. “*Ebrietas omne crimen incendit et detegit*,” and if the drunkard is only exhibiting his true character, stripped of the disguise, which in his sober intervals he is able to throw over it, he is not the less a moral agent, and answerable for his conduct. Something like this is a strain of argument, adduced seriously, *we presume*, by the learned commentator on the Pandects before quoted. “*Etsi vero tale propositum talisque machinatio præmeditata non est in illis, qui impetu peccant, non tamen dolus in universum deest; nam et homicida impetu peccat, non modo cum justis sed et cum injusti doloris impetu, et sub iræ motu ad cædem procedit.*”—*Voet XLVIII. 10. 1.*

Whatever may be thought of the soundness of this philosophy in view of the ebrious paroxysm, it is evident that it does not at all apply to the subject of delirium tremens. *He* exhibits nothing of that exaggerated state of the passions, of that boisterous violence which marks the drunken man; he is timid, watchful and jealous; and much more disposed to apprehend injury from others, than wantonly to inflict it on them. Such

was the state of the individual in the case alluded to, and surely there is none which renders a man more truly and deservedly an object of compassion.

Judging of the case, then, on these principles, we have no hesitation in saying, that the act of the prisoner was the act of a madman. The idea which constantly presented itself to his mind, was that of a plot formed against his life, which placed him in continual and imminent danger. Under this delusion, he threatened his wife with speedy punishment, if she did not desist from her purpose. From these premises he drew the conclusion, that the destruction of his supposed enemies was an act of self-defence, and on this conclusion he acted. No case of mania could be more perfect in all its parts, or present a stronger claim to forbearance and mercy.

We conclude, then, that the law which makes the drunken man responsible for his actions is, both in its principle and its policy, wholly inapplicable to the case of the maniac a potu; and that the latter is entitled to all the privileges which madness, under any circumstances, can confer on its unhappy subject. We would add what we consider an equally important inference, that the treatment of this form of mania ought to be regulated on the same principles as that of any other. The case above cited is a melancholy proof that maniacs of this description require the constant vigilance of friends, to prevent them from doing mischief to themselves or those near them. We are satisfied that the amount of care

bestowed is in many instances wholly insufficient, and that great hazards are frequently incurred from indulging the notion that the subjects of this delirium are altogether harmless. There are two rules in regard to persons in this situation, which ought to be rigidly adhered to; one, that they be never suffered to go abroad alone—and secondly, that they should never be left in the care of female relatives. That both these precautions are often neglected with impunity, we are well aware; but this by no means disproves the existence of the danger; and the occurrence, in a single instance, of the horrible consequences above related, affords a warning which we hope will not be disregarded.

SILLIMAN'S JOURNAL.

WE acknowledge the receipt of the last No. of this important and useful work. It is truly a most splendid production. We are not in the habit of using superlatives, but without them we can give no opinion of the work before us. We rejoice to learn that the late appeal of the Editor to the public, has been the means of adding 250 names to his subscription list; and that the Journal will now be continued. A periodical which does so much honor to the country, ought not, however, to be barely supported. Two hundred subscribers more would complete the number of 1000, with which the work might go on without embarrassment, and a liberal compensation allowed for the able productions it sends forth into the world of science.

SMELLING BOTTLES.

THERE are few persons who have not noticed that within a few months smelling bottles of a new form, and containing salts of a fine flavor, have been found in the shops of our apothecaries. An account of these salts is given on our 566th page, in an article extracted from the Journal of the Philadelphia College of Pharmacy.

This new periodical appears to be conducted with great ability by Dr. Benjamin Ellis, of Philadelphia, assisted by other professional gentlemen. It contains a deal of pharmaceutical intelligence, of great value to Physicians as well as Apothecaries;—but of the latter, there ought not, we hope there will not be one in the country who does not avail himself of the information contained in this work.

ANATOMICAL DISSECTION.

THE following remarks appeared in a late No. of the BOSTON TRAVELLER. They evince a degree of light in the mind of the Editor,—like evidences of which we would gladly see in the conductors of all our newspapers. The sentiment has been often expressed in this Journal, that a better policy in the laws respecting dissection must begin with the people; and when we see Editors of newspapers and other popular publications, coming forward with wise and enlightened views on this subject, we cannot but believe that the people generally will soon be better informed, and think and feel and act as becomes those who, as *individuals*, are deeply and *personally* interested in the cul-

tivation of a correct knowledge of human anatomy;—a knowledge, without which there can be no such thing as medical or surgical skill,—without which disease must get the better of our remedies, and the lives of our patients must be sacrificed to common accidents, and comparatively trivial disorders.

“So much excitement and strong prejudice has been created in various places by the disinterment of bodies recently deceased for anatomical purposes, that all friends of good order and reasonable law will willingly aid in preventing among us the growth of a body of individuals, whose chief business shall be to violate the sepulchres of the dead. In Europe, as recent shocking narratives have proved, owing to a want of some legal mode of providing sufficient supplies, or to some other cause, a band of resurrectionists has grown up, composed of the most reckless and hardened wretches, who have not hesitated to commit murder to prosecute their unhallowed purpose.

“That the slightest encouragement may not be extended to body stealers,—that the sepulchres of the dead may be preserved inviolate, and the feelings of the living be spared a pang, the State Medical Society have earnestly applied themselves “to consider if any change can be effected in the laws of the Commonwealth, in relation to human dissection.” A vigilant committee has been appointed, and a circular on the subject has been printed and sent to physicians generally, throughout the State. It is expected the subject will in some way come before the legislature, at its next session, and a petition be presented for a change of its existing statutes.

“Some of the representatives have imbibed the popular prejudice, and would view with something like horror any legal provision for favoring

the dissections of the schools. But we are convinced there is no alternative, in order to obviate the difficulties and dangers which now oppose the practical study of Anatomy, and to preserve the peace of individuals and of society; and therefore hope the gentlemen of the Legislature, before their next session, will give the subject due attention, and if possible divest themselves of that feeling which has blinded the community to the importance of the desired knowledge, and retarded the progress of medical science in this country."

Phlegmasia Dolens.—Dr. Lee, of Argyll Street, a sound and experienced pathologist, and one of the most rising accoucheurs in the metropolis, has published a paper in the last volume of the Medico-chirurgical Transactions, which at length completely proves this formidable disease to depend on an inflammation in the large veins of the groin. But we understand that this excellent physician has gone considerably further, and that he is in possession of the history of a fatal case, with the preparation, which demonstrates beyond doubt that the inflammation originates in the veins of the uterus, and from them spreads to those of the groin.

This important discovery very satisfactorily accounts for the violent fever and other symptoms which attend the disease.—*Gaz. of Health.*

Partial Palsy cured by Strychnia locally applied.—The subject of this case was an habitual drunkard, aged 36 years. He had lost the power of the left forearm and hand ten days previously. The sensation of the parts was perfect, but the mobility much impaired. There was no headach. Over a vesicated surface on the back of the forearm, one-eighth of a grain of strychnia was sprinkled. The dose of the medicine was increased by doubling the

quantity every day, until it amounted to one grain, after which a fourth of a grain was to be added. The improvement was manifest from the second week, and the patient, without having experienced any uneasy symptom, was dismissed cured at the end of five weeks from the commencement of the treatment.

In another patient, affected with paralysis of the flexor muscles, and diminished sensation of the right leg, a cure was effected in the course of six weeks.—*N. A. Med. & Surg. J.*

Pregnancy after Amputation of the Cervix Uteri.—M. Lisfranc announced to the Academy of Medicine that two other females (Vide N. A. Med. and Surg. Journal, Vol. II. p. 14 and 420) who were pregnant after amputation of the neck of the uterus, have been happily delivered at the full period of uterogestation. One who, anteriorly to the operation, had very rapid labors, was in labor forty-eight hours: in the other, who was in labor for the first time, two hours of pain were sufficient for the expulsion of the fœtus. No bad consequences resulted, and the health of each female was excellent.—*Journ. Generale.*

Adhesion of the Placenta to the Head of the Fœtus.—From the *Nouv. Bibliotheq.* for May, we learn that M. Lauray has transmitted to the Royal Academy of Medicine the details of the following case:—A labor being fortunately terminated by turning the fœtus, which had presented an arm, the placenta was found adherent to the hairy scalp of the child. The head was flattened at its anterior and superior part, where the os frontis was wanting. A projection of the brain, covered by the integuments, was noticed in the situation of the right eye, which last was wanting. There was a hare lip, &c. &c. The infant lived thirty-two hours. No attempt was made to separate the placenta from the head, to

which it adhered to some extent, to the fore part, to the left and to the centre (top) of the hairy scalp. No explanation was offered either as to the cause or manner of the adhesion. The liquor amnii had flowed in abundance a short time before the accouchement, and gestation was not attended by any remarkable circumstance.—*N. A. Med. & Surg. Jour.*

Punctured Wounds.—Dr. James Fountain, of Westchester, New York, believing that a state of irritation always precedes the state of inflammation in punctured wounds, maintains that the treatment, immediately after the accident, should be predicated on this principle, which he says experience confirms. Hence he advises local and general stimuli: of the former, he prefers heat with moisture. A tobacco poultice is particularly recommended.—*N. Y. Med. and Phys. Journal.*

Wound of the Brachial Artery.—Mr. Smith, Surgeon to the Bristol Hospital, details two cases, and alludes to two others, in which, under well regulated pressure, a wound, by a lancet, of the brachial artery healed, no aneurism being formed. In these cases the vein was not punctured.—*Medico-Chirur. Rev.*

Mortality among Leeches during Storms.—That atmospheric changes have a remarkable influence on

leeches, is a well established fact. In 1825, M. Derheims, of St. Omer, ascribes the almost sudden death of them, at the approach of or during storms, to the coagulation of the blood of these creatures, caused by the impression of the atmospheric elasticity. This opinion, which at that time was the result of theory, he confirmed in the month of March last, by direct experiment.—*Ann. des Sciences d'Observation.*

Crystallization of Iodine.—During the course of his researches on the combinations of Iodine and Arsenic, M. A. Plisson has ascertained that Iodine crystallizes in acute octahedrons and in rhomboids, and that it may be obtained under those two forms, by exposing ioduretted hydriodic acid. He also remarked that iodine assumes rhomboidal forms in the upper part of a flask, in which ioduret of arsenic has been kept.—*Ann. de Chim.*

The Color of the Sea—is ascribed by Sir Humphry Davy, in part at least, to the presence of iodine and bromine, which its waters certainly contain, and which result perhaps from the decomposition of marine vegetables. These two substances, dissolved in a small quantity of water, give a yellow tint, and this tint, mingled with the blue tint of pure water, may produce the sea green.—*Salmonia.*

WEEKLY REPORT OF DEATHS IN BOSTON, ENDING OCTOBER 9.

Date.	Sex	Age.	Disease.	Date.	Sex	Age.	Disease.
Oct. 1.	M.	18 mo	measles		F.	12 mo	measles
	M.	14	lung fever		M.	5 yrs	do.
2.	F.	24 d	infantile	6.	F.	53	consumption
	F.	8 mo	dropsy in the head		F.	3	measles
3.	F.	2 yrs	convulsions	F.	5 mo	convulsions	
4.	M.	65	dropsy	F.	7	lung fever	
	M.	2 1-2	unknown	7.	M.	5 yrs	measles
M.	45	do.	F.		12 mo	do.	
	F.	96	old age	M.	19	do.	
	M.	15 mo	infantile	F.	62 yrs	unknown	
	F.	40 yrs	consumption	M.	32	scarlet fever	
	M.	2 d	unknown	8.	M.	24	unknown
	M.	26 yrs	typhous fever		F.		consumption
5.	F.	2 1-4	complaint in the throat	9.	F.	22 mo	inflammation in the bowels
	F.	77	old age				
	M.	6 w	unknown				

Males, 14—Females, 16. Total, 30.

ADVERTISEMENTS.

CONSOLIDATED COPAIVA.

"COPAIVA may be given in this form without the least inconvenience. Neither communicating taste, nor imparting odor to the breath, it is also retained without the least disquietude or uneasiness to the stomach; and I am informed by Dr. Rosseau, that in large doses it does not purge."—*Phil. Journal of Med. Sciences.*

See an article in this Journal, Aug. 18th.

OIL OF BLACK PEPPER.

This is a much more active preparation of Piperine. One drop is fully equal to six grains of the latter. It is a valuable adjunct to Quinine. One or two drops, added to six grains, will greatly increase the efficacy of that medicine.

For sale by NATHAN JARVIS, 183 Washington Street, where Physicians will find medicines at as reasonable terms as at any place in Boston.

Aug. 25.

eopft.

LEECHES, CHIRAYITA HERB,
&c.

E BENEZER WIGHT, 46 Milk Street, has made such arrangements as will enable him to be constantly supplied with the genuine *Medicinal Leech*. He has now on hand some of very large size, and in prime order.

Just received, by late arrivals, a few pounds of *Chirayita Herb*,—Concentrated Compound *Decoction of Sarsaparilla*,—Laurel Water,—Silver Wire Tooth Brushes, from the manufactory of James Prout, of London.

Also, from the manufactory of Shepherd, of London, the following variety of *Medicated Lozenges*, viz.:—Coltsfoot—Rhubarb—Soda—Tolu—Heartburn—Paregoric—Magnesia—Steel—Camomile—Nitre—Cayenne—Opium—Fruit—Ginger—Anniseed—Ipecacuanha—Lemon—Rose—Peppermint and Sulphur.

** Strict personal attention paid to Physicians' prescriptions, and family medicines. Oct. 6. eop.

MORBID ANATOMY.

CARTER & HENDEE have just received,—The *Morbid Anatomy of the Stomach, Bowels and Liver*; illustrated by a Series of Plates from Drawings

after Nature, with explanatory letter press, and a Summary of the Symptoms of the Acute and Chronic Affections of the above-named Organs. By JOHN ARMSTRONG, M.D.

The above work will be completed in six numbers, at \$6,00 each. Three numbers are already published. Subscriptions received by C. & H.

Oct. 6.

2am3m

A TREATISE on the Scrofulous Disease, by C.G. HUFELAND, Physician to the King of Prussia, &c., translated from the French of M. Bousquet, by Charles D. Meigs, M.D., is just received and for sale by CARTER & HENDEE.

Sept. 8.

CARTER & HENDEE have just published,—The *Constitution of Man, considered in Relation to External Objects*. By GEORGE COMBE.

From the Preface to the American edition.

"Mr. Combe's work should be placed with those, of which so many within a few years have appeared, which are devoted to the all-absorbing topic of Education. It treats of moral, intellectual, and physical education. This is not formally done under so many distinct heads. But the whole course of reasoning of the author, and the whole array of all his illustrations, have it always obviously in view to show how the highest cultivation of each of these may be most surely brought about.

"The publishers have printed this edition from a belief that there is much in the work to interest the community.

"It has a novelty to reward the general inquirer, and it presents the well known under novel aspects. There is one class amongst us who may study it with much advantage. Scholars are referred to, a class here too small to form a distinct order with habits of their own, and who insensibly fall into those which, although not mischievous, to the multitude on the score of health, too often make ill health the portion of the sedentary student, and bring upon him premature decay.—To all classes it is recommended, and the various learning and acuteness of the author well fit him to write a book which addresses its instructions to the whole community." Sept. 8.

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

I.

HISTORY OF PANACEAS AND NOSTRUMS.

A NOSTRUM is commonly a specific for one disease or a panacea for all, and its virtues are always attested by the most solemn facts. It promises to preserve health without breach, or to extend life without limit. The chief exception to these merits is, that disease and death are still brought into the world, and that nostrum-takers have hitherto forborne to attain to the longevity of Methusalem. These magnificent pretensions have been assigned to agents of every quality in nature, from the insipidity of cold water to the hot pungent intensity of mustard seed.

In the reign of Charles the First, the *universal* virtues of the *magnetical caps* were set forth in a "Compendious Declaration," by John Evans, Rector of Lyttleton-upon-Severn, who made them himself of antimony, and sold them in Martin's-lane. Like the Rev. Caleb Carrington, present vicar of Berkeley, and inventor of the "Life Pills," he combined the vender of a nostrum for the preservation of the body, with the holy offices of the priest for the salvation of the soul. The preamble to a quack advertisement, of the same century, prefers this curious compliment to the English:—"Whereas the people of England, through the

moistness and mutability of their air, *foulness of diet, and disposition to excessive drinking*, are subject to rheumatisms, &c." Guester's "Practical Piety" might have been expected in an age when Praise God Barebones and the saints of 1641,—like the spiritual Quixote of the Select Cushion, and the Evangelicals of our own times,—deafened the air with clamors for Hudibrastic devotion.

The *warming stones* of the same epoch, more modest in their pretensions, claimed the curing of all agues, colds, deafness and tooth-ach.

The reign of Charles the Second abounded with quackery. The witty libertine, Rochester, who had studied physic in his youth, spoke a very humorous address to the mob in the character of a stage quack, which is still preserved in his works.—In 1734, *Ward's pills* acquired great repute. The able exposures of Dr. Turner exhibited, by facts and reasonings, "the murderous effects of violent vomiting and purging, in all cases and constitutions," of which they were productive. The basis was tartar emetic; a remedy of the highest value when given with discrimination. This nostrum was a revival of the pills of a Dr. Russell, of Holborn, who first sold them at one shilling a piece, a much greater price than is given now for any patent medicine, when

the value of money is less. Ward maintained the reputation of his nostrums by the common practice of all curemongers and quacks,—puffing the one case in which they *had done good*, out of the ten in which they had caused *the most serious mischief*. His brother first tried them on dogs in the Fleet, and of several dog-patients, one only recovered. Ward contended for the undeniable proof of twelve years success with them, *professed experience being always the pretext with this class of persons*, and ascribed the decrease in the bills of mortality to the amount of 3171 persons, after the great mortality of 1734, to his pills and drops. But the Grub-street Journal, a weekly paper, habituated to the exposure of the quackery, promulgated his failures, and declared that Ward's "sugar plums" had "worked so furiously," that they had "destroyed many infant children,"—a common effect of emetic tartar on infant constitutions,—and done execution in every part of the great city of London, and made great havoc among adults, *until they were analysed*.

The efficacy of nostrums generally ceases with the exposure of their composition. The country is much indebted to PARIS, for having, in his Pharmacologia, published analyses of the nostrums of the present day.—A young woman, who had taken Ward's pills for three days, "fell to screaming, and crying out of intolerable pain in her stomach and intestines, declaring the pills had killed her, and died the day following." Swift, then in the vale of years, but in full repute, as "the wittiest man in Europe," threw his triumphant ridicule into the contest, in a parody of Ward's advertisement of his

worm pas'e, in which, of course, Ward had endeavored to prove worms to be an universal disease. But another maintained that "the abilities of the great quack were too well known to be blasted by a slanderous pen; that his killing with *one drop* proved him to be a greater artist; and that quacks, in populous states, if *great ones*, should always be chartered." Ward excited, indeed, much humor and squibbling, often of a political mixture, masked under his name, and Pope did not disdain to exert his powers against this popular fraud and imposture.

The Abbé Bayeux, about 1730, gave celebrity to *hot water* in all diseases, and cured "dropsies, asthmas, colics, and other bad complaints," after "all the physicians had condemned them," according to the report of an *Englishman*, who, after "spending an income upon bark and advice, recovered after going to France to have his throat tickled with a feather, and drink hot water." Of course, he imputed nothing to travel, change of air and scene, and the encouragement of hope, which dispose the constitution to recovery; and, in fact, constitute almost the sole efficacy of watering places.

Previously, in 1723, John Smith, C. M., and Ralph Thoresby, F.R. S., and John Hancock, Rector of St. Margaret's Lothbury, London, Prebendary of Canterbury, and Chaplain to his Grace the Duke of Bedford, had published two essays on "The Curiosities of Common-water," and "Common-water the best Cure for Fevers." These tracts, and several others on the subject, ran through four and even six editions. Smith declared that "forty-four years' experience,"—for *facts and experience* are never

wanting in these concerns,—“had confirmed the *stupendous* effects thereof;” and that it might truly be styled “an *universal* remedy, since the diseases it either prevents or cures may have this remedy applied to all persons, and in all places where men do inhabit.” But Hancock, the other doctor divine, candidly confessed “that it was a little out of his way to write on physic, but that he was not the first man who had *writ* a book of a subject he knew little of (p. 100).” In consequence of these clerical essays on physic, “the whole nation run a madding after cold water in every temper,” till at last, up starts a merry fellow, by the name of Gabriel John, who exposed the water-doctors in such a ludicrous but witty manner, that from that time the custom dwindled and grew out of use.

Quicksilver, which had been prescribed by Sir John Nicholas Butler, a very eminent physician in James the Second’s reign, and had cured “a lunatic and a swallower of worsted and other trash,” next came into general favor about 1730: but the history of this quackery must be reserved for another number.

II.

PHENOMENA CONNECTED WITH RESPIRATION.

THE force of a healthy chest’s action in blowing is equal to about *one pound* on the inch of its surface; that is to say, the chest can condense its contained air with that force, and can therefore blow through a tube the mouth of which is two feet under the surface of the water. In sucking or drawing in air, the power is nearly the

same.—In both these actions, it is possible to use the cavity of the mouth separately from that of the chest; and the mouth being smaller, with stronger muscles about it in proportion to its size, it can act more strongly. Some men can suck with the mouth so as to make nearly a perfect vacuum, or to lift water nearly thirty feet. In using the blow-pipe, an expert operator can keep up an uninterrupted blast by shutting the mouth behind while he inhales, and replenishing it as is required in the intervals.

In *coughing*, the *glottis*, or top of the windpipe, by a curious sympathy of parts, is first closed for an instant, during which the chest is compressing and condensing its contained air, and on being then opened, a slight explosion, as it were, of the compressed air takes place, and blows out any irritating matter that may be in the air-passages; just as the burst from the chamber of an air-gun discharges its bullet.—This shutting of the glottis to allow the compression of the air, and its subsequent opening to allow the discharge, may occur at very minute intervals, and many times for one fill of the chest, as is instanced in hooping cough.—The action of cough is often produced by irritation from a cause which cannot be removed by cough, as inflammation of the chest or tubercles; or even by irritation in a distant part, as when children are teething, or when the stomach is overloaded.

Sneezing is a phenomenon resembling cough, only the chest empties itself with great violence at one throe, and chiefly through the nose, instead of through the mouth, as in coughing. The irri-

tation that produces sneezing is generally in the nose ; but as in the case of cough, sneezing may occur from distant sympathies ;— witness that from worms in the bowels.

Laughing consists of quickly repeated expulsions of air from the chest, the voice being heard with them ; but there is never complete closure of the entrance to the windpipe, as in coughing.

Crying differs from laughing almost only in the circumstance of the intervals between the gusts of air being longer. Children laugh and cry in the same breath, and it is often difficult to mark the moment of change.

Hiccough is the sudden stopping of a strong inspiration at its commencement.

In *straining* to lift weights, or to make any powerful effort, the air is shut up in the lungs, that there may be steadiness and firmness of the person. At such a time, by the compression and condensation of air around the heart and large bloodvessels, the blood is determined violently outwards from the chest, and often rises to the head, with force that produces giddiness, or even apoplexy ;—the eye will become suddenly bloodshot, from a small vessel giving way during straining ; and leech-bites will break out afresh.—The force of this pressure outwards is measured, as already stated, by a column of about two feet of blood ; and this is therefore the measure of the additional arterial and venous tension in the body generally.

Suffocation is the name given to what happens when the supply of air to the lungs is in any way prevented. The blood, not then refreshed by the approach of the

air, rises to the brain unfit for its purpose, and confusion of thought is immediately produced, soon followed by convulsion and death.

When that happens from mechanical obstruction at the narrow entrance of the windpipe, as in croup, by the tenacious films thrown off from the inflamed lining of the air-passages, life may be saved by making a new entrance for air through the windpipe lower down in the neck, and keeping it free by a little tube inserted, until the obstruction above be removed.—Where children die with croup, it is frequently not from the violence of the constitutional disease, but from detached films thus accidentally sticking in the narrow entrance of the air-passage.

In the cases of strangling and hanging, the tight binding of the rope or ligature crushes inwards the cartilaginous rings of the windpipe, and shuts the air-passage. It may also cause apoplexy, by arresting the passage of blood to and from the head ; and there may be dislocation of the cervical vertebræ of the spine.

In *drowning*, communication with the atmosphere is cut off altogether by the supernatant water, and if the chest then expands, it can receive water only, instead of air. The nerves and muscles, however, at the entrance of the windpipe, being exceedingly irritable, are excited by the contact of any unusual matter, and for a considerable time shut the passage against the intruding liquid. It is partly on this account that, after immersion in water and apparent death, when the body is recovered within a moderate time, the life is often preserved.

III.

HISTORY OF A CASE OF VERMINOUS
DISEASE.

By BENJAMIN S. BROWN, M.D., of Logan
County, Ohio.

ON Sunday evening, the 29th of March, 1829, I was called to see the infant son of Mr. I. C., aged about four years. I was informed by the parents, that it had been suddenly attacked, a day or two previous, with severe griping pains of the bowels, resembling spasmodic colic; that its agony was very soon so great, that they apprehended it would go into fits; that they gave it a teaspoonful of spirit of turpentine, which afforded almost instantaneous relief; that after a short time they administered a dose of castor oil, which produced a few motions from its bowels, and brought away a few worms (*lumbricoides*.) On examination, I found the abdomen much tumefied and very tender on pressure: several hard lumps or knots could be distinctly felt in many parts, particularly along the course of the arch of the colon, and near the umbilicus; which regions especially were sore and painful on pressure. The pulse was about 60 in a minute, quick, somewhat depressed, but regular. The tongue had rather a white, smooth, slimy appearance; breath of a peculiar, disagreeable odor; the breathing was nearly natural; had no appetite since taking the oil, though I was told it had been very voracious for some months before, causing it to eat as much as was usual for two or three children of its age. The complexion was pale and sallow, with an anxious unmeaning expression of countenance: the lips appear-

ed to be swelled, particularly the upper one.

It being late in the evening, I gave a portion of calomel, about eight grains, combined with a carminative. On the morning of the 30th, no operation of the calomel having taken place, I made a decoction of spigelia and senna, and directed them to give it at short intervals, so that he should take it all by the middle of the day, at which time, if it should not have operated *freely*, to give another portion of calomel, combined with jalap, and afterwards to give a small dose of castor oil, every two hours, till it *did operate*.

On Tuesday, 31st, again visited my patient. Had taken all the medicine, without its producing any operation. Found him very restless and uneasy: the tumefaction of the abdomen was greater than before; complained of much griping pain; started and moaned in his sleep; in short, all the symptoms were rather aggravated. I made use of a strong solution of sulphate of soda, in a decoction of senna, as an enema, throwing up between half a pint and a pint at a time; this was discharged in about half an hour after each administration, without producing any other evacuation than a few worms, with what was thrown up. I directed a small portion of calomel, scammony and jalap to be given three or four times in the day, combined with a carminative, to prevent the griping, as well as its rejection by vomiting: the enemata were to be continued at intervals of three or four hours, and warm emollient fomentations applied to the abdomen.

Wednesday, April 1st.—No evacuation, and what was thrown

in by injection remained much longer than heretofore. The patient was evidently worse; was much debilitated, with great anxiety of countenance. The breathing was hurried and laborious; pulse frequent, small and feeble; tongue white, dry and sticky; breath extremely foetid; and the tumefaction and soreness of the abdomen much increased. I directed the enemata to be continued, with an addition of ten or twelve grains of tartarized antimony, to each portion thrown up; a powder composed of four grains of calomel, four of scammony, and five of jalap, to be given every two hours until eight were taken; then to give a small portion of castor oil at the same intervals, and, besides, to drink of a decoction of spigelia and senna, through the day. A large blister was laid over the front part of the abdomen, in order to allay, as much as possible, the irritation within, and to prevent the inflammation which, from the extreme soreness, I feared might take place.

Thursday, April 2d.—Not much alteration since yesterday. The blister had drawn well, and he had been more composed, had slept quietly for several hours, as soon as the blister had drawn. The enemata had no better effect than before. I directed the same course to be continued, the same number of the cathartic powders to be given, as yesterday, and the castor oil afterwards. Increased the quantity of tartarized antimony in each injection to fifteen or eighteen grains, and the patient to be put in the warm bath two or three times in the course of the day.

Friday, 3d.—No alteration ex-

cept for the worse. The injections, notwithstanding the increased quantity of tartarized antimony, had remained much longer than heretofore; they would occasionally bring away a worm or two, without producing any other cathartic effect. The little patient appeared to be fast sinking into the arms of death: a very feeble and frequent pulse; listlessness and insensibility; great debility; tongue moist, white and slimy; considerably comatose; distension of the abdomen about the same, but the soreness was less than before the blister was applied. I directed a pretty free use of brandy or wine, mixed with water. Made a trial of the tobacco injection; it was discharged immediately, without bringing away anything more than was thrown up. I began to despair of effecting anything by the use of injections, or indeed of strong cathartic medicines, as there had already been so much taken without producing any evacuation. I however directed the warm bath, and in consequence of his debility, I had it applied by means of a blanket wrung out of hot water; the patient being stripped and wrapped in it, as warm as he could conveniently bear it. I also advised a pretty free use of wine and water, and a small dose of castor oil, to be taken every two, three or four hours.

Saturday, 4th.—I was much gratified, on visiting my patient, to find that the medicine had begun to operate. The first motion from its bowels brought away a convoluted knot or roll of worms, which consisted of seventy in number, mixed with a large quantity of dark-colored, slimy, feculent matter, of a very disagreeable,

fœtid odor. The medicine continued to operate throughout the day, and indeed for several days. The stools were pretty much of the same nature, and mixed with the same kind of worms, viz., *lumbricoides*, from four to eight or nine inches in length. They were nearly or quite all dead, and many of them pretty far advanced towards a state of putrefaction, indicating that they had been dead for several days. The number discharged was so great, as to induce the parents to count them. In the three first days, the number discharged was about four hundred, and during the week, five hundred and fifty-two, all of the above size.

Almost as soon as the medicine operated, the child had a good appetite, which it was found necessary rather to restrain than encourage. It advanced rapidly in strength, and was in a short time restored to its former health and spirits.

On reflection upon the case, I am led to the conclusion, that a principal reason of the obstinate constipation, was merely a mechanical obstruction of the intestines by the knots or rolls of worms which they contained; for as soon as the first large roll was discharged (which was of itself quite sufficient completely to obstruct any part of the alimentary canal), the cathartic effect of the medicine appeared to go on very naturally. The indurations, which could be felt in the abdomen along the course of the colon, I have no doubt were of this nature, from the circumstance of their frequently changing their positions, and entirely disappearing immediately on the operation of the cathartic medicine.

The whole amount of medicine which the patient took during the week, before it operated, was about 100 grains of calomel, 75 of scammony, 75 of jalap, and 2 pints of decoction of spigelia and senna, besides a large quantity of oil and epsom salts, given by the mouth, and an incredible quantity of senna, salts, and tartarized antimony.—*Western Journal*.

IV.

HEMIPLEGIA.

Employment of Strychnia.

JAMES JEVONS, æt. 10, came into the Worcester Infirmary May 30th. Has partial paralysis of the right side; occasional headach; the pupil of the left eye contracts very irregularly; pain and tenderness in the hypogastrium; intellect much impaired; memory very bad; looks idiotic; tongue, when projected from the mouth, is directed towards the paralytic side; bowels costive; tongue clean; pulse 84, weak. About Christmas last had a fall from a cart, and received a severe wound over the left orbit, from which time he has complained of occasional headach. Has had symptoms of hemiplegia for five weeks: has been under surgical care, but obtained only temporary relief.

Applic. hirud. xii. lateri capitis sinist.
Sumt. Haust. Cathart. ʒi. statim.
et repet. post horas tres, si opus fuerit.

June 2d.—Is much relieved by the application of the leeches. Head more free from pain; can raise his arm with more ease; walks better; pupil of the left eye contracts more regularly;

tongue projected from the mouth in a straighter line ; can move it to the left side with ease, which he could not do before ; answers questions more regularly.

3d.—Rept. Hirud. Cras ; persistet in usu haustus cath. omni mane.

5th.—Is much better since the application of the leeches.

7th.—Applic. Emp. Lyttæ lateri capitis sinist. postea. Ung. Antim. Tart. ibidem.

9th.—Can use his extremities with much more facility ; pupil of the left eye contracts more naturally.

14th.—Sumt. Mistur. Cathart. p. r. n.

16th.—Opens the hand much easier ; the extremities much less paralytic.

19th.—Sumt. Strychniæ, gr. 1-6 ter in dies.

24th.—Continues to improve.

Rept. Emp. Lyttæ Capiti.

July 7th.—Has continued to improve under the use of the strychnine.

Augeatur Dosis Strychniæ ad gr. 1-3 ter die.—*Midland Reporter*.

SKETCHES OF PERIODICAL LITERATURE.

EPIDEMIC IN OHIO.

IN the July No. of the *Western Journal* is contained an account of a bilious remittent fever, which prevailed in and near Circleville, Ohio, from the middle of August, 1828, to the middle of October. The principal remote cause appeared to be the excavations made for the Ohio and Erie canal, near that town ; and the laborers engaged on that work were the principal sufferers. The disease was not inclined to assume the intermittent type ; the remissions themselves were mostly of short duration. The treatment appears to have been sufficiently active. The patient, if seen within the first few days, was bled from one to three pints. After this the use of calomel was commenced, in doses of forty grains every eight hours, and continued two or three days, until the bowels were freely evacuated. Two grain doses were then given every two hours, until salivation took place.

This mode of treatment is described as uniformly successful. Death never occurred after ptyalism was established. When this effect had resulted from the use of the calomel, epispastics were applied to the forehead and extremities. If applied earlier, they retarded or prevented the ptyalism ; but employed after the latter was established, they were found very useful in moderating its violence. The latter observation is confirmed in a note by the editor of the *Journal*. Blisters applied to the nape of the neck, were found by him very efficacious in arresting the inflammation of the mouth and throat, caused by the use of calomel. This would seem to be a fact of considerable interest.

MESMERISM.

SOME new cases of the employment of this agent are related by Mr. Chevenix, in the August No. of the *Med. and Phys. Journal*. The per-

sons subjected to its influence were seven in number, all patients in a hospital. On the first, no visible effect was produced. The second, after being *mesmerized* a few minutes, fell into a sleep, from which he was waked with some difficulty. The third experienced some anomalous sensations of heat and cold from the application of a pencil case to his hand, and of weight and stiffness from a piece of paper placed on his sleeve; these sensations corresponding to the will of the mesmerizer, who had previously informed the attendants that he anticipated this correspondence. The fourth patient was put asleep in ten minutes. The fifth, a nervous woman, slept at the end of twenty minutes. The sixth required but three minutes to have this effect produced, and then remained motionless for half an hour. The seventh did not sleep, but closed his eyes, and found some difficulty in opening them.—These patients had various diseases, but no benefit is stated to have been derived from the treatment.

We confess ourselves to have been unable to obtain, from the details of the above experiments, any very decisive notions with regard to the efficacy of this new remedy. Setting aside the idea of collusion, to which the nature of the results seems particularly to expose them, there are various circumstances which are calculated to diminish their apparent importance. That sleep should have occurred within two or three minutes from the commencement of the experiment, is not very easily explained; but its occurrence at the expira-

tion of twenty minutes is far from surprising. In fact, one of the patients, when asked the reason of his sleeping, attributed it to the quietness of the room, and the motion of the hands passing before his eyes. It is also remarked, that one of the number who made an effort to keep awake, succeeded without any difficulty. It is not easy to set limits to the operation of sympathy. We doubt whether any one can read Mr. C.'s experiments, amusing as they certainly are, without an irresistible inclination to yawn; we certainly experienced this ourselves; nor did we feel obliged to have recourse to mesmerism for an explanation of the phenomenon.

The singular sensations produced in some of the patients by the mere volition of the mesmerist, though curious, are still not inexplicable. It does not appear, nor do we see how it could have been the case, that Mr. C. privately communicated to those present each particular volition, before he produced the corresponding sensation. The degree of conformity between the two could be known only to himself, and with the best intention he might be deceived on this point, so that whatever was the sensation expressed, it might appear to him, whether truly or not, to be the very one he had desired. How these varying sensations were produced by the same article repeatedly applied, we cannot say; but a touch of a substance which neither felt hot nor cold in reality, might, unless this were honestly acknowledged, as it appears to have been in some instances, naturally produce

somewhat vacillating opinions in regard to its temperature. A similar effort to feel something, where nothing was to be felt, might have produced the heavy sensation of the arm on which the paper was placed, and the difficulty of rising from the seat which had been occupied but three minutes. That this was the true explanation we will not assert; but the experiments have too much the air of juggling, not to inspire a suspicion that the operator wished to deceive others, or grossly imposed on himself.

In the London Med. and Phys. Journal for September, a 4th article on the phenomena of this new agent is published by Dr Chevenix. His success, on the whole, does not appear to have increased. Two female patients were mesmerized at St. George's Hospital, London, but without any perceptible effect. The next subjects were two girls, aged nineteen and sixteen, who had both been epileptic from childhood. One of them was repeatedly operated on at Dr. C.'s house, and always with the effect of inducing sleep in from three to five minutes. To show that the sleep was not feigned, Dr. C. separated the eyelids, and displayed to the bystanders the appearances of the pupils, which corresponded to those usually observed in natural slumber. An epileptic boy was mesmerized, and an effect approaching to sleep produced in seven minutes. Some other experiments were performed at Bartholomew's Hospital, in presence of Mr. Earle. One was on an epileptic young man, whose fits were severe and frequent.

No effect was produced. A woman affected with vesical disease was submitted to its influence. She felt, at the end of five minutes, a *fluttering in her inside*, which feeling was first removed, and then renewed at the will of the operator. The next patient was a woman afflicted with iritis, for which she had been bled largely, and had undergone a mercurial course. At the end of three minutes she had an attack resembling hysteria, from which she was recovered by the regular process of demesmerizing. The operation on this patient was repeated the following day, with more violent effects.

The remaining case related by our author, and which we have reserved to the last as being the most remarkable, was that of a patient at the Dublin Hospital of Incurables. Six patients had been tried at this establishment without any effect, when a woman presented herself who for two years had not been able to walk without the aid of a crutch. After being mesmerized for thirty minutes, she expressed her belief that she could walk, and actually did so, to the no small astonishment of the bystanders. The cause of her previous inability is not precisely stated.

An apparent omission, both in the present article, and in those which Mr. Chevenix has before presented to the public, is, that they contain no precise information as to the external movements practised by the mesmerist, or what may be called the *tactics* of the science. So far as can be ascertained, however, these are very simple, and consist in little

more than the slow motion of the operator's hands before the patient. It is not in this, however, that the virtue of mesmerism is supposed to consist. The effects produced are considered as resulting from an actual correspondence between the mental processes of the mesmerist, and the physical changes produced in the patient; in other words, an effect is produced on the disease by the volition of the operator. Extravagant as this idea appears, it is expressed in terms in some of the above cases, and strongly intimated in others; and this mode of explaining the phenomena is certainly more creditable to the science, than to attribute them to the ridiculous nummery with which its votaries, like the conjurors of times past, condescend to attract the admiration of the vulgar.

As we have given our opinion of mesmerism in a former paper, it is not necessary to repeat it here at length. In reviewing these new cases, it appears that in a very small proportion only was any effect pretended to be produced. In these, with two exceptions, one consequence invariably followed,—namely, sleep, after a greater or less length of time. The probable explanation of this, supposing it to have been real, we have suggested in our former remarks; but it appears that in one case, at least, the spectators expressed a belief that the sleep was a feigned one. The occurrence of hysteria in a nervous female, who probably supposed herself to be acted on by some mysterious and powerful agent, is not much to be wondered at; indeed it is more surprising that it did

not oftener happen. In France, we are told convulsions were among the most frequent phenomena; and it argues somewhat for the *sang-froid* of the English patients, that their imaginations were so little wrought upon by the solemnity of the scene. There are probably none, however, more likely to go through an experiment on their own persons with tranquillity, than the denizens of the *incurable* ward of a hospital. To obtain such a certificate of exemption, it is generally necessary to have seen some service. With regard to the lady who so suddenly regained the use of her nether extremities, the account would be more satisfactory if the precise nature of her case was related. We are told that it was a case of vomiting caused by an injury, and that she could, with her crutch, just walk from her bed to the fireside in her own ward. Whether the lameness proceeded from the paralysis, contraction, or loss of the limb, does not appear; but if a cure was actually effected, it must have been in consequence of her unusual faith in the remedy, and must be classed with the wonders of acupuncture, and of other mysteries which have preceded this in its march to oblivion. Should we hear from Mr. Chevenix again, we shall keep our readers informed of his progress.

TETANUS CURED BY CALOMEL.

WE notice, in the London Med. and Phys. Journal, a case of traumatic tetanus treated successfully with Subm. Hyd. The amount given is not mentioned, but it was continued at intervals for four days, when the

mouth became sore; and from this time the case did well. The medicine given was combined with Opium and Ant. Tart., but the quantity of these was inconsiderable. Cold affusion was tried on the third day, but without benefit.

NEW OPERATION FOR ANEURISM.

IT appears by accounts published in the journals, that six cases of aneurism have been treated on the principle recommended by Mr. Wardrop, of making the ligature beyond the seat of the disease. In two of these, Mr. W. himself tied the carotid beyond an aneurism; in a third, Mr. Lambert; and in a fourth, Dr. Bush, of New York, performed the same operation. Mr. Wardrop also tied the subclavian for aneurism of the innominate; and a Mr. Evans, of Derbyshire, treated a disease of the same vessel by ligature of the carotid. Mr. Wardrop's second patient, and the subject of Mr. Lambert's operation, both died; the other four are stated to have recovered. The rationale of the operation is sufficiently simple. Its object, in common with that of the usual practice, is to arrest the circulation in the artery, and to render impervious that portion of the vessel comprehended between the ligature and the nearest branch sent off between it and the heart. Of course, the new operation is only applicable to those cases in which the ligature can be made beyond the tumor, so as to have no branches given off from the intercepted portion. If any branch exist in this situation, the circulation will still flow into it through the tumor, and the end of the operation be de-

feated. According to this view, there are but few arteries which are favorable to the operation,—those, e. g., which, like the carotid, are for a great extent free from branches. Indeed, its advocates seem to concede that this mode of operating is not to be preferred to the other, but only to be resorted to in cases when that is rendered impracticable by the situation of the tumor.

HUMAN COMBUSTION.

IN a Memoir presented to the Academy of Sciences at Paris, M. Julia de Fontanelle has furnished an account of fifteen cases of spontaneous human combustion, the occurrence of which seems to be supported by respectable testimony. He considers this combustion to depend on a very advanced and putrid degeneration of the system, which suddenly produces very combustible substances, at the expense of the muscular fibre, &c. This degeneration is considered as presenting a perfect analogy with vegetable putrid fermentation and putrefaction. The putrefaction of vegetables is known to occasion the development of so much heat as sometimes to cause their inflammation.

That human combustion does not depend on the combination with atmospheric oxygen, appears probable for three reasons:—1. There is not sufficient heat evolved. 2. There is not the production of a charcoal requiring a high heat for its incineration. 3. There are no ammoniacal products. The effects, therefore, appear to depend on a new arrangement of the elements existing in the body itself.

BOSTON, TUESDAY, OCTOBER 27, 1829.

PANACEAS.

IN our first pages will be found some account of the earlier nostrums by which the credulity of the vulgar has been imposed on. A series of numbers on the history of Panaceas and Nostrums is publishing in an English periodical, and as we have availed ourselves of extracts from the first paper, so we propose to offer our readers such parts of the succeeding ones as are deemed interesting to the profession. Perhaps no country on the face of the globe so abounds with impositions of this description, as our own. But take up any newspaper which may chance to be before you, reader, and count the different nostrums there advertised, and you may form some idea of the amount offered for sale in the whole country. A history of those *American* Panaceas and Nostrums which have, since the existence of the republic, risen into notice and been discarded, would be a subject, if not too copious, on which the pen of some member of the profession might be well employed.

The great number of such medicines, which have had their day in this country, is in one view creditable to the people. If they have been at all times quick to embrace any new remedy for a disease which it pretends, by specious certificates, to have invariably cured, it must be attributed to a weakness more or less common to all men of whatever age or nation. But the most intelligent will soonest find out the impo-

sition, and thus will the succession be most rapid where there is least ignorance, and most discrimination and judgment.

The great evils, however, immediately induced by quack medicines, have fallen with a proportional weight on the people of these States. These evils are, an unnecessary and wasteful expenditure of money, and of health, and, we may also add, of life. The *physical suffering* produced by this class of medicines is well known to most practitioners, for few, if any, have not been often called to repair the ravages they have produced on the human constitution.--The amount of *money* thus foolishly lavished is immense. In this Commonwealth alone, the sums paid for quack medicines, in a single year, form a total of astonishing magnitude.

We can adduce but few *facts* on *this* topic, to be sure, for they are, in their nature, difficult to get at. We can say, however, that a *Stationer*, of whom we are in the habit of purchasing our paper, pays his rent, of about 700 dollars per annum, by the net profits he gets on the sale of a single nostrum, and that an article of comparatively little note, and sold in small ounce phials. What then is the amount which must be paid for this nostrum, in order to afford such net profits to a single agent! What is the probable amount paid for this same medicine, to *regular Apothecaries* and professed dealers in such articles over the whole city, and throughout the Commonwealth!

If this little phial of drops draws forth from the purses of the people such enormous sums, what must be the amount paid for other, larger, and more noted nostrums; and what the sum total annually expended for all the numerous articles of this description, with the advertisements of which our newspapers are crowded!

CHIRAYITA HERB.

Letter to the Editors of the Gazette of Health on the Virtues of this Medicine.

GENTLEMEN,—It has long been a matter of surprise to me that the herb *Chirayita*, which has been held, from time immemorial, in great estimation by the natives of Bengal and the European residents, especially the medical officers, as a powerful deobstruent and stomachic medicine, should not have been introduced into the practice of this country, especially as the variety of indigestion for which it is considered a specific (accompanied with, and probably dependent on, indolent or overloaded state of the liver) is as prevalent in this country as in the East Indies. It is said the effects of the *chirayita* are not, like stomachics in general use, confined to the stomach, but extended to the abdominal viscera, particularly the liver, which it deterges, or, as Dr. Currie observes, “emulges the hepatic ducts;” and this I believe to be a fact, for I have uniformly observed the *fæces*, during its use, to be well charged with bile, and the complexion to become clear. Although not aperient, it evidently prevents an accumulation of *fæces* in the lower portion of the intestinal canal, which Dr. Reece, in his late “Treatise on the Management of Disorders of the Stomach and Bowels by Medicine and Diet,” justly observes, is a common cause of various affections of

the lungs, head and stomach, and at the same time promotes digestion. The medicinal virtues of this herb are imparted to boiling water, and the infusion is a very grateful bitter; but the natives prefer the decoction, made by gently boiling half an ounce of the cut dried herb in a pint of water for about fifteen or twenty minutes. Of this decoction they take a small wineglassful two or three times a day. The extract, which also contains the virtue of the herb in great perfection, is taken in form of pills. It is likewise administered by the Indian practitioners in cases of pulmonary consumption and scrofula. Of its efficacy in the former malady, I cannot speak from experience; but on the latter malady, I have frequently witnessed its salutary effects. The experienced and scientific physician, Dr. Fleming, late of Bengal, speaks highly of the *chirayita* as a tonic medicine. Dr. James Johnson, in his work on tropical diseases, also gives it a high character; and Mr. Addison, the author of a Treatise on the Malvern Water, says, that from the very beneficial effects it had on himself, it is a valuable addition to the class of stomachic medicines.

I am, Sirs, your very obedient
servant,
THOS. BAKER.

Laurel Water in Epilepsy, by Dr. MULLER.—A young girl, twenty-two years of age, had been epileptic for six years. The attacks frequently returned twice in one day; they were of short duration, and in the intervals the patient had spasms in her arms, and moved her fingers in a convulsive manner. She had been for eighteen months bedridden, unconscious of her state and actions, eating and drinking anything offered, but asking for nothing, and passing her stools involuntarily. A variety of means were tried without effect, and all of them, but particularly large bleedings, appeared to be hurtful. M. Muller was called, and found the

patient in this state. She had always been regular in menstruating, and had never had any but the ordinary diseases of infancy, and never any chronic eruptions of the skin, nor worms. The tongue was soft and moist, belly pliant, respiration natural. Not being able to find any cause for this disease, M. M. thought of employing laurel water, from which he had often derived great advantages in nervous affections similar to this. He prescribed it in the dose of twenty drops daily. After the consumption of an ounce, the convulsive movements of the limbs had completely ceased; and after the administration of three ounces more (augmenting each dose to two drops, till the dose was eighty drops), the attacks of epilepsy never returned. The patient having recovered her sensibility, left her bed, and executed spontaneously every function. The treatment was concluded by an infusion of Valerian, with the addition of Træ. Canellæ and Liquor Ammoniæ; and, after using for some time some preparations of iron, she quite recovered her health.—*Rev. Med.*

Vegetable Rouge and Pink Sauces.—These articles are prepared from the florets of the *Carthamus tinctorius*, which in the dried state are kept by druggists under the name of safflower, in the following manner:—Wash safflower till no stain is given to the water, and then dry it. Of this take half an ounce; infuse it a short time in a pint of water, in which a drachm of the subcarbonate of soda has been previously dissolv-

ed; strain off the liquid, to which add an ounce of finely levigated French chalk. The alkali will hold the coloring matter of the safflower in solution, and the chalk will remain colorless; but by adding a little tartaric or citric acid, the alkali will be neutralized, and the red coloring matter, which is not soluble in simple water, being set at liberty, will fall to the bottom, combined with the chalk. Thus a beautiful pigment is produced, which may be dried and further levigated for spreading on saucers; or, ground with a drop or two of olive oil, will form the Spanish or vegetable rouge. Liquid pink dye is a similar preparation, with a portion of spirit of wine.

Black Writing Ink.—Most of the directions for making ink which we have seen, direct that vinegar should enter into its composition. It is well known, however, that any preparation of sulphate of iron and galls, when mixed with an acid, must, in process of time, become more or less of a pale red.—The following recipe, which we had personally from a celebrated chemist, is not subject to this objection, and from long experience of its excellence, we recommend it with confidence to our readers:—

R. Aq. Dist. bull. lbj. adde grad.
Acaciæ Gum. pulv. ʒ iss.
Hæmatox. rasæ,
Gallæ pulv.
Sulph. Ferri. āā ʒi. M.

This compound should be left exposed to the air, and frequently stirred, about three days, when it will be fit for use.

WEEKLY REPORT OF DEATHS IN BOSTON, ENDING OCTOBER 16.

Date.	Sex.	Age.	Disease.	Date.	Sex.	Age.	Disease.
O. 9.	M.	48 yrs	drowned		M.	21 mo	dropsy on the brain
10.	F.	36	unknown	12.	F.	19 yrs	measles
	F.	35	colic		F.	16	typhous fever
	M.	13 mo	lung fever	13.	F.	2 1-2	lung fever
11.	M.	12	teething	14.	M.	2	measles
	M.	51 yrs	intemperance		F.	18 mo	inflammation on the brain
	F.	27	unknown		M.	35 yrs	typhous fever
	M.	8	abscess on the brain	15.	M.	24	do.
	M.	45	apoplexy		M.	2 1-2	do.
	M.	37	liver complaint	16.	F.	20	consumption
	F.	58	dropsy		F.	40	dropsy

Males, 12—females, 10. Total, 22.

ADVERTISEMENTS.

ANATOMICO-SURGICAL DRAWINGS, and Descriptions of all the Surgical Operations, according to the most approved methods. By L. J. VON BIERKOWSKY. Translated from the German. In two volumes, and 570 drawings on 58 folio plates.

EXTRACTS FROM THE PROSPECTUS.

"Encouraged by the approbation of the Medical Profession, it is proposed to publish a work under the present title."

"This work contains 570 drawings, on 58 plates folio; to which is annexed, in two volumes 8vo. a concise explanation of each surgical operation. The plates exhibit not only the parts interested in operations, in their natural position and size, but, what is much more important, represent the different acts or stages of the whole operation, while others exhibit delineations of such morbid affections as consist in the change of the natural position, structure, color, &c. In order to afford the work at a moderate price, the plates will be Lithographic; and for the purpose of securing perfect accuracy, engagements have been entered into for their preparation in Berlin, under the especial direction of two of the most distinguished Professors of the University of that city."

A specimen of the translation, and the plates, is deposited for inspection at the Bookstore of CARTER & HENDEE, who receive subscriptions for the work.

Subscribers will be furnished with the work, and the first impressions of the plates, at the price of \$30.

The subscription list will be open until the 1st of November, 1829, after which period the price of the work will be raised to \$40.

P. S. For the accommodation of subscribers the work will be issued in five Numbers, at \$6 each, payable on delivery. Sept. 29. 18202N1D.

LEECHES, CHIRAYITA HERB, &c.

EBENEZER WIGHT, 46 Milk Street, has made such arrangements as will enable him to be constantly supplied with the genuine *Medicinal Leech*. He has now on hand some of very large size, and in prime order.

Just received, by late arrivals, a few pounds of *Chirayita Herb*,—Concentrated Compound, *Decoction of Sarsaparilla*,—

Laurel Water,—Silver Wire Tooth Brushes, from the manufactory of James Prout, of London.

Also, from the manufactory of Shepherd, of London, the following variety of *Medicated Lozenges*, viz.:—Coltsfoot—Rhubarb—Soda—Tolu—Heartburn—Paregoric—Magnesia—Steel—Camomile—Nitric—Cayenne—Opium—Fruit—Ginger—Anniseed—Ipecacuanha—Lemon—Rose—Peppermint and Sulphur.

** Strict personal attention paid to Physicians' prescriptions, and family medicines. Oct. 6. eop.

CARTER & HENDEE have just published,—The Constitution of Man, considered in Relation to External Objects. By GEORGE COMBE.

From the Preface to the American edition.

"Mr. Combe's work should be placed with those, of which so many within a few years have appeared, which are devoted to the all-absorbing topic of Education. It treats of moral, intellectual, and physical education. This is not formally done under so many distinct heads. But the whole course of reasoning of the author, and the whole array of all his illustrations, have it always obviously in view to show how the highest cultivation of each of these may be most surely brought about.

"The publishers have printed this edition from a belief that there is much in the work to interest the community.

"It has a novelty to reward the general inquirer, and it presents the well known under novel aspects. There is one class amongst us who may study it with much advantage. Scholars are referred to, a class here too small to form a distinct order with habits of their own, and who insensibly fall into those which, although not mischievous, to the multitude on the score of health, too often make ill health the portion of the sedentary student, and bring upon him premature decay.—To all classes it is recommended, and the various learning and acuteness of the author well fit him to write a book which addresses its instructions to the whole community." Sept. 8.

MEMOIR OF DR. HOLYOKE.

JUST published, and for sale by CARTER & HENDEE,—A Memoir of EDWARD A. HOLYOKE, M.D. LL.D., prepared in compliance with a vote of the Essex South District Medical Society.

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

I.

HISTORY OF PANACEAS AND NOS-
TRUMS.

(Continued from page 577.)

Quicksilver and Tar-water.

THE use of crude quicksilver was revived about the year 1730. "Some," says a writer of that day, "got marvellous benefit, others wondrous mischief, and to many that left off in time, it did neither good nor harm." Dr. Turner declared, that "the deglutition of a ponderous metal was a great folly," and exhibited the "sundry tragedies which it had produced." Booth, the celebrated tragedian, performed one of these tragedies in real earnest; for having taken it, "he had his bowels mortify from one end to the other." Dr. Dover gave it great fame in his "Legacy." Dover was an A.B., and a pupil of Sydenham, but became by natural disposition a sheer curemonger, and, like all his fraternity, an unexceeded story-teller. He regarded diseases neither anatomically nor physiologically, and was, therefore, a mere conjecturist. In his practice, he asserts positively that he had *cured consumption* by using fifty bleedings, and diabetes by giving alum posset; and he speaks of administering *opium* in *forty-and-seven grain doses!* What he calls "solid experience" is nothing else but a tissue of those falsehoods and im-

possibilities with which such men deceive themselves and the world, helped along by a few shrewd catches upon popular notions, which give this sort of orthodox quacks an air of sagacity, but without one sound or valuable observation tending to improved views of any subject. If what he says of his practice be true, for one cure mentioned in his book he must have killed in a hundred cases, which he took care to leave out. He was just the man to get a Bath and Cheltenham reputation, among the rich, as a noted performer of cures, and was accordingly much esteemed by the nobility, and was even sent for to the Methuens, Tracys, and other distinguished families. Mere people of fashion are precisely the materials to be imposed upon.

In his reply to Turner and Brindley, in "The Legacy," he makes the "Hydrargyrus" to say for itself, that "it could not fill an empty cavity in the head with brains; but that, if it could not make a lodgment in so solitary and unfurnished an apartment, the owner need not be under any apprehensions, for fools were never known to go mad. Free from all agitating thoughts and doubts, they enjoy a profound tranquillity of mind, and are happy in an undisturbed conceit of being extremely wise." He apparently alludes to those antagonists who had raked him most

unmercifully, under the epithets of "Barber-Surgeons," "Timid Physicians." He applauded "this glorious remedy," the quicksilver being as "asses' milk" in asthma, consumption, gout, hysteria and stone. The notion of the efficacy of quicksilver had been obtained from Sweden and Hungary, where the miners had been in the habit of swallowing the metal in the morning to purloin it at night, and purchase "a choppin of drink" with it after it came away. To get over the consequences of detection, they gave out that certain effects were produced by it in diseases. Dover said that it was unnecessary to go farther than ONE POUND AND A HALF FOR A DOSE, in obstruction of the bowels, though "larger doses shot through the body better than small." A wit, who advocated every one's having the liberty of dying his own way, advised its being called for at coffee-houses, and taken in all beverages, by the "don't-know-how-ish" people. It was brought into general disrepute by a ludicrous incident which happened to a quicksilver lady in a ball-room, and which, in the female world more especially, created an universal horror of quicksilver. Many philosophers, however, had speculated upon the production of vivacious barometers, and the convenience of being able to predict the weather "by the fall of the fluid metal in their intestines," for the "better ordering of morning calls, and cockney jaunts to country houses." Such was the coarse but racy humor of the English of a century since.

About three years ago, at Cheltenham (the great *otium cum dignitate* of the race of "deluded individuals" in pursuit of quacks and

quackery, both in physic and religion), we met with a retired Londoner, who, possessed by an extraordinary mania for nostrums, took all that came up. The result of his experience was, that he had been obliged to quit a business of 4000*l.* per annum, from an irritable and debilitated state of constitution, brought on by his own folly. A Cheltenham man, with the peculiar wisdom of that enlightened town, lent this nostrum-hunter a quicksilver treatise, and recommended him to try the remedy. It produced no effect, except a great weight in the stomach, as white mustard seed had previously excited heat and eruptions.

It is singular that the irregular votaries of Hygeia have frequently derived their origin from the mother church; but it was reserved for Bishop Berkeley to unite the most subtle scepticism in metaphysics, with the most extraordinary credulity in the virtues of tar-water. The worthy bishop dosed himself with two quarts daily. "It strengthened," he asserted, "the bodies of soldiers and sailors, and would be extremely useful in a siege, persons having lived several days without any other subsistence." He recommended it also "for the relief of the poor, and sedentary persons and cattle." Mr. Prior, a toad-eater, or tuft-hunter to the bishop, probably on the look out for glebe and tythes, in his narrative of four hundred and sixty-one tar-water cures, included many cases of barrenness, gout, loss and want of complexion, lowness of spirits, spitting, sleepiness, stupidity, vapors, stones,—in fact, of all the diseases to which men, kine, and horses are subject, curable and incurable. Extraordinary cures of incurable diseases are ne-

II.

DR. EPPS ON PRUSSIC ACID.

Extract of a Lecture on the Use of Prussic or Hydrocyanic Acid, by Dr. Epps, Lecturer on Materia Medica at the Royal Westminster Hospital.

ver indeed wanting to confirm the efficacy of a panacea or a quack. The Bath ladies, among whom at this period, according to Pompey the Little, it had been the fashion to use artificial means to subdue the permanent flush produced by drinking nantz in the morning, and dissipation in the evening, rejoiced to discover a new and simple method of raising the simple lily on their visages; whilst those who had both starved the roses and pinched the lilies on their cheeks, sought in tar-water the double virtue of producing a quite opposite effect. A few years ago, the publication of the posthumous correspondence of Berkeley, in the old "Monthly Magazine," revived numerous facts in recommendation of tar-water; and modern ladies have been known to try, but in vain, its efficacy in the restoration of faded charms. Bishop Berkeley's treatise has been lauded as remarkable for excellence of style. Mr. Reeve, in his "Cure for the Epidemical Madness of drinking Tar-water," says to the bishop,— "In your younger days, my lord, you made the surprising discovery of the unreality of matter, and now, in your riper age, you have undertaken to prove the reality of a universal remedy; an attempt to talk men out of their reason, did of right belong to that author who had first tried to persuade them out of their senses." Stephen Hales, the great experimentalist, also wrote on tar-water.

THE profession is much indebted to Dr. Elliotson for the facts which he has made known regarding the use of this acid in *affections of the stomach*. In forty-six of the cases related by him, *pain* existed at the *pit of the stomach*, and in seven of these the pain was increased *after eating*; and in one more the pain was *dreadfully violent* after eating. In four cases the pain at the pit of the stomach was *constant*: in four cases the *præcordiæ* were tender on pressure: in six cases there was *lightness*, increased in some after eating: *weight*, in three or four cases, was felt after eating: in three cases the pain was of a *gnawing* kind: in some cases the pain came on *periodically*: in fourteen individuals, *flatulency* was a prominent symptom: in nine, *tremblings* occurred: in four cases, *nausea* existed: in fifteen individuals, *vomiting* sometimes of the food, sometimes of bile, and occurring, in one, every morning: seven had a discharge of *fluid into the mouth*: *pain of the head*, in some examples alternating with the pain in the stomach, was a symptom. *Nervousness, debility, and lowness* of spirits were conspicuous in some of those relieved. Some cases of pains of the *heart* and of the *left side* are enumerated where the acid is beneficially given; indeed, this is a most powerful remedy, and one which will hold a very high place in the

[Errata. In the first part of this article, in the last number of the Journal: for "Guester's Practical Piety," read greater practical piety; and, four lines lower, for "select," read velvet.]

practice of every intelligent practitioner.

You will thus see that pain at the pit of the stomach is one of the most striking symptoms relieved by the use of this medical agent; that accompanying this pain, vomiting, discharge of fluid into the mouth, nausea, flatulency and tremors were frequent. This combination of symptoms indicates considerable *irritability* of stomach, and it is in cases of irritability that this medicine is peculiarly useful. When *inflammation* of the mucous membrane exists, the remedy is not so useful; leeches and blisters are the most beneficial; and if any irritability should remain, then the acid confers all its advantages. When after its use, moreover, nausea, vomiting, pain and tightness of the præcordia, are either produced or increased, the remedy should be intermitted. You will remember, gentlemen, that it is when pain is at the *pit of the stomach* that this remedy is beneficial; when the pain affects other parts of the abdomen it is not so useful; and you must bear in mind that a sensation of weight, and that increased after a meal, occurs very frequently when *inflammation* of the lining membrane of the bowels exists; that *tightness* also in such a state of parts is frequent; further you have generally *febrile* symptoms in addition; and these will be your guide. In inflammation of the stomach *pain* exists, but then it is a *burning* pain; and you have *heat* over the epigastric region, while the extremities are cold.

There is, moreover, another circumstance to which you must have respect. It is this: that you use *prussic acid*. You are

not to use what may sometimes be sent for prussic acid; for this is often only playing with disease, since the article sent is little better than water. See that your prussic acid is good;—obtain it from good practical chemists, who have their character to support, and then you may be certain of gaining all the effects you wish. I have frequently been very much disappointed when I have found, on calling on my patients, to whom prussic acid has been prescribed, that no mitigation of the disease has taken place; I have examined the medicine, and found it to be totally inert. I have directed them to get their medicine made up at some respectable house, and, to my great pleasure and their satisfaction, the same prescription has been the means of effecting a speedy cure. Medicine is such only when it is good.

I shall conclude this lecture with the case of an out-patient at this hospital.

Elizabeth Tett, married, forty-eight years of age, being ill two months. Tightness at the pit of the stomach; pain on drawing the breath; constant weight; flatulence, not relieved by eructation; water rising into the mouth.

Take of Prussic Acid, ʒi.

Aromatic Confection, gr. v.

Pure Water, ʒij.

Ammoniated Tincture of Valerian, ʒiij.—Mix.

A teaspoonful to be taken three times a day.

July 18th.—Tightness, pain and weight diminished; palpitation just as bad; flatulence not so much; no water in the mouth. Continue the use of the mixture.

July 21st.—Tightness, pain and weight still less; flatulence less; water in the mouth quite

gone ; palpitation as before. Continue the use of the mixture, taking two spoonful.

July 25th.—Palpitation better; all the other symptoms relieved.

August 1st.—Great deal better. Continue the use of the mixture, and add twenty drops of the aromatic spirit of ammonia.

August 6th.—Cured.

III.

On the Difference between Minims, Drops and Grains of various Liquids, and on the Propriety of using exclusively the Minim Measure in prescribing active Fluid Medicines.

By ELIAS DURAND.

THE difference between the bulk of drops of various liquids was long since observed, without, however, any immediate attempt being made to discover the cause of this discrepancy ; which was merely attributed to the variable density of the fluids. Dr. Shuttleworth, of Liverpool, appears to have been the first who ascertained, by careful experiments on the weights of drops of different liquids, the inaccuracy and danger of exhibiting active fluid substances in this form. The results of his experiments were justly appreciated, and an important change was soon afterwards introduced by the College of Physicians of London. Their object being to ensure accuracy in the measurement of fluids below one drachm, they subdivided the wine pint down to the sixtieth part of a fluid drachm, and called each of the ultimate divisions a *minim*.

Induced by particular motives to ascertain the exact difference between the minim and the drop of several liquids, I undertook a

series of experiments, which were extended to the grain weight.

The results surprised me so much, that they appeared worthy of careful repetition, with a view to publication, believing they might prove useful to the physician as well as the pharmacist.

The following table, based on accurate experiments frequently repeated, will show at once, by careful inspection, how much this subject is deserving the particular attention of professional men ; and how great a desideratum is the early and general adoption of an accurate measure, instead of the uncertain and variable mode of dropping active fluid medicines. The bulk of drops depends not only on the density of the liquid which furnishes them, and the cohesion of the constituent particles of that liquid, but also on the shape of the mouth of the vessel from which they are poured. An open vessel with a beak, such as the common graduated measure, affords a larger drop than a bottle with the stopper half drawn out,—a mode commonly practised. That furnished by the dropping tube is still smaller, and is even liable to vary with the greater or lesser diameter of its extremity. Besides, in every instance, the first drops poured from any vase are always smaller than those subsequently obtained.

It is evident, from the above considerations, that the practice of prescribing fluid medicines by drops is altogether objectionable; and especially at the present time, when so many proximate principles of very energetic vegetable substances are daily introduced into practice, which may be indifferently administered in aqueous, acetous, vinous, or alcoholic measures.

The table below satisfactorily proves to what serious consequences an ignorance of these facts may lead the physician and the pharmacist. For instance, hydriodate of potassa is soluble in alcohol as well as water, and these solutions may be indifferently employed as remedies in the same cases. Yet twenty drops of the alcoholic solution are equivalent to M. x. and to gr. ix. ; whilst the same number of drops of the aqueous solution are equal to M. xxij. and to gr. xx., although they scarcely differ in specific gravity, and contain the same proportions of hydriodate of potassa in solution. It is obvious, then, that though the effects of these solutions be the same, they cannot safely be prescribed in doses containing the same number of drops, since the latter would be more than twice as strong as the former.

Colchicum yields its remedial principles to vinegar, wine and alcohol. Fifty drops of the acetous or vinous solutions, are equal in bulk to eighty drops of the alcoholic tincture ; a circumstance which has not before been pointed out, and is probably the reason why the two former preparations have been considered so much more active than the latter ; although were they administered in minims, they would in all probability prove equally beneficial in the same doses. These remarks apply to many other substances which yield their active principles to alcohol, wine, water, &c.

As the slight difference between the minims of various liquids depends entirely on the slight variation in their specific gravities, the minim measure is not liable to the irregularity and uncertainty of drops, and is of course the best fractional mode of prescribing

energetic liquids ; inasmuch as the solvent is almost invariably directed by the pharmacopœia in fluid measure.

The experiments which form the subject of this paper, were performed with accurate instruments on the liquid preparations of the United States Pharmacopœia, and on a few others peculiar to foreign pharmacopœias. The minim measure was made with particular care by my ingenious friend Mr. Daniel B. Smith ; the drops were all obtained from the same drop glass with a tube of medium calibre ; the scales and weights were very accurate, and every means used to prevent the escape of volatile fluids.

With respect to the size and weight of the drops of the various liquids, we may establish as general rules from the following table :

1. That the liquids which contain a *small proportion* of water afford a *small drop* ; while, on the contrary, the liquids containing a *large quantity* of water furnish a *large drop*. For instance, *concentrated acids, ethers, rectified alcohol, fixed and essential oils, &c.*, which contain but a very small proportion of water, yield a *smaller drop* than diluted acids, weak alcohol, *wine, vinegar, &c.*

2. That amongst the liquids containing a *large proportion* of water, those which are not charged with remedial substances give a larger and heavier drop, than these same liquids containing extraneous bodies in solution. As for example, *weak alcohol, wine, vinegar and water*, furnish a *larger and heavier drop* than the tinctures prepared from them.

It is difficult to account for these peculiarities ; but I am inclined to think that in the first instance, the molecules of water

have a stronger cohesion or affinity for each other than those of the other liquids, and require consequently a greater accumulation of particles before the drop can be forced by its own gravity to separate from the aqueous mass. In the second, the cohesion is probably impaired by the interposition of the bodies in solution.

In adopting the minim measure, the editors of our national Pharmacopœia have not given their

reasons for the change, and have left us in the dark respecting the difference between the two modes of administering small quantities of active liquids. It is owing to this neglect, in part, that so little attention has been paid to the subject in this country, and that so many professional men continue to consider the subject as a mere alteration of words.

The following table will illustrate my remarks :—

<i>Table showing the Differences between Minims, Drops and Grains, of various Medicinal Liquid Preparations of the Pharmacopœia of the United States, &c.</i>				
	No. of drops in 20 minims.	No. of min. in 20 drops.	No. of drops in 20 grains.	No. of grains in 20 drops.
Sulphuric acid - - - -	30	13.3	25	16
Sulphuric ether - - - -	50	8	60	6
Rectified alcohol - - - -	46	8.6	57	7.1
Nitric acid - - - -	28	14.2	22.2	18
Acetic acid (crystallizable) - - - -	40	10	40	10
Muriatic acid - - - -	18	22.2	18.1	22
Oil of wormseed (chenopod. anthelminticum)	40	10	50	8
of peppermint, aniseed, sweet almond,				
olive, palma christi - - - -	40	10	43.5	9
of cloves - - - -	40	10	36	11
of cinnamon - - - -	40	10	32	12.5
Copaiba - - - -	40	10	40	10
Diluted alcohol - - - -	40	10	42	9.5
Tincture of hydriodate of potassa, cantharides, kino, digitalis, assafœtida, sulph. acid, colchicum, opium, valerian, guaiacum - - - -	40	10	43	9.3
of valerian, guaiacum (volatile) - - - -	40	10	50	8
of muriate of iron - - - -	44	9.1	50	8
Wine, Teneriffe - - - -	26	15.3	25	16
antimonial - - - -	24	16.6	26	15.3
of opium (Sydenham's laudanum) - - - -	26	15.3	29	13.7
of colchicum root and seeds - - - -	25	16	29	13.7
Vinegar, distilled - - - -	19	21	20	20
of opium (black drop) } - - - -	26	15.3	25	16
of colchicum				
of squill				
Water, distilled - - - -	15	26.6	17.5	24.5
solution of hydrocyanic acid - - - -	15	26.6	17.5	24.5
sulphuric acid (1 to 7) - - - -	17	23.5	17	23.5
nitric acid do. - - - -	17	23.5	17	23.5
ammonia, strong - - - -	18	22.2	18.5	22
do. weak - - - -	15	26.6	20	20
hydriodate of potassa - - - -	18	22.2	20	20
arsenite of potassa - - - -	19	21	20	20

Prepared according to the process of the London Apothecary Hall.

IV.

The following letters to the Editor of the London Medical Gazette, and published in a late No. of that Journal, afford authentic accounts,—one of a Stillborn Child that had been retained in the Uterus thirteen calendar Months,—and the other of an Obstinate Hemorrhage caused by drawing a Tooth.

LETTER I.

SIR,—The subject of this extraordinary case is a small active woman, aged 38, in good health, and the mother of seven children exclusive of this. About the beginning of July, 1828, she missed the catamenia, which should have appeared at that time, and soon after found herself pregnant. In October following she quickened, and felt the motions of the child till January, when they ceased, and never returned. She had continued to increase in size till that time, but afterwards decreased, and felt only a sensation of a lump in the lower part of the belly, towards the left side, which sensation continued till her delivery. Her health was good, and she continued as active as ever. At this time (January) she consulted me, when I gave it as my opinion that her child was dead, and that she would be delivered of it on or before the completion of the nine months. She engaged me to attend her.

I heard nothing more of her till the 19th Aug., 1829, when, passing by her house, I was called in, and found her in great pain, like labor. An examination discovered it to be so; and, about half an hour afterwards, she was delivered of a male stillborn child, fol-

lowed soon after by the placenta. The child seemed to have died about the fifth or sixth month, which corresponds with her account. It measured in length between nine and ten inches; weighed six ounces; was much reduced, shrivelled and emaciated; of the color of tanned leather, without fetor or any disagreeable smell. I have it by me now, immersed in spirits. She is at this time, the 28th of August, doing well.

There is no reason to doubt the accuracy of this woman's statement, she being of good character, and all the circumstances of her condition well known to her neighbors. She fancied, after the month of January, that her pregnancy had gone off, and that all the symptoms which she had had were such as are customary to women at what they term the turn of life, or final cessation of the menses, of which she had seen none since her conception in July, 1828; and was therefore rather surprised when I told her she was in labor. But her age being only 38, and the circumstances above detailed, preclude the idea of the "turn of life" with her.

I have submitted these facts without note or comment, as they occurred, but will be very glad to read your observations or those of your correspondents upon them. In the course of a long practice, I have neither seen nor heard of any such occurrence, nor do I remember reading it. It is a singular phenomenon, and very curious both in a physiological and pathological point of view.

I am, Sir,

Your obedient servant,

PETER CULLEN, Surgeon.

LETTER II.

Sir,—Having lately seen in the *Edinburgh Medical and Surgical Journal*, (vol. xii. p. 500, and vol. xiv. p. 379,) two cases of hemorrhage after the extraction of teeth, which proved fatal in spite of all the means devised by the ablest surgeons, I am tempted to communicate to you the result of my own practice in a similar case, which fortunately saved the life of my patient.

In the year 1801, I extracted a molar tooth from the upper jaw of a man about 30 years of age, and of sanguine temperament. Obstinate hemorrhage followed the operation, and continued so profuse for three days, notwithstanding all the means that I had applied to check it, that the man fainted several times, and was evidently sinking fast.

Under these alarming circum-

stances, it occurred to me that pressure, accurately applied, afforded the best-grounded hope of stopping the flow of blood. I accordingly modelled a tooth in wax, exactly to the shape and size of that which I had extracted, introduced it into the socket which the natural one had occupied, and retained it there by firm pressure. The bleeding was immediately arrested, and the patient rapidly recovered.

I have since, on two or three occasions, adopted this simple but effectual method of arresting hemorrhage caused by the drawing of a tooth, when ordinary remedies seemed likely to fail in producing the desired effect.

Should the above appear worthy a place in your journal, it is at your disposal; whilst I remain,

Your very obedient servant,

J. CORTEZ, Surgeon.

SKETCHES OF PERIODICAL LITERATURE.

PULSATION OF THE UMBILICAL CORD.
INFANTILE ASPHYXIA.

SOME cases, reported in the *Glasgow Journal* for August last, go to show the propriety of continuing, for a considerable time, the efforts to reanimate children apparently stillborn. In the first of these cases an interval of an hour, and in the second of an hour and a half, elapsed between birth and the first symptoms of life. In a third case, in which the length of the interval was half an hour, it was remarked that the second inspiration was accompanied by a return of the pulsation in the cord, which had ceased at the moment of birth. While this continued, however, no

progress was made in breathing. It continued vigorous for fifteen minutes, when it entirely ceased. Artificial inflation, which had been suspended during the pulsation, was then recommenced, and the respiration gradually improved. The circumstance here mentioned is an argument for allowing the connection between mother and child to remain in such cases, until it is proved beyond doubt to be no longer necessary.

ERYSIPELAS.

IN those cases of this disease which appear in connection with wounds and other local injuries, and which threaten serious consequences, Dr.

Young, of Glasgow, advises the early employment of extensive scarification. A very severe case is mentioned, occurring in an individual about fifty years of age, in consequence of a bruised cut received on the inside of the tibia. On the second or third day, an erysipelatous redness showed itself round the part, accompanied by fever, and followed by the formation of matter above and below the fascia of the leg. Inflammation, with pain and redness, now began to appear on the outside of the thigh. To prevent, if possible, this part from taking on an action similar to the leg, an incision was made through the fascia on the outside of the man's leg, about ten inches in length. This was followed by a considerable discharge of fluid blood. The next day, the patient was found free from pain, and full of gratitude for the relief he had experienced. The thigh was free from redness, and could bear pressure in every part. The appearance of the leg had also very much improved. The case went on well, the sores became clean, and the gash in the thigh healed in a surprisingly short space of time.

Dr. Y. remarks on the prejudice existing among a majority of the profession against this mode of practice, and acknowledges that it is countenanced by high authority. He also adverts to the difficulty of putting it in execution in private practice, where the aversion of patients would create an almost insurmountable obstacle to its use. In moderate cases, therefore, it may be held optional to resort to it or not, but in

those of a severe character, he advises that it be most strongly insisted on, as the best and only security against a tedious and protracted course, and perhaps fatal termination.

VACCINIA.

Transmission of the Vaccine Disease from the Mother to the Fœtus in Utero.

A FACT of some importance is related in a Swedish Journal, and since the authority appears to be good, we should be inclined to place some reliance on its correctness.

A young woman, pregnant with her first child, was vaccinated. When the vesicles were full, on the ninth day, she was delivered of a female child, on whose arm regular vaccine vesicles made their appearance, in the same number and corresponding precisely in position with those on the arm of the mother. These vesicles pursued an uninterrupted course, and left perfect and genuine cicatrices. The child, although healthy at birth, died after six weeks, of some incidental affection of the stomach.

The pastor of the village where this event occurred, gives this account, after an investigation made by him at the request of the Academy of Sciences of Stockholm.

LUMBAR ABSCESS.

AN unusual termination of this disease has been noticed by M. Cœnlegril, and related in the *Bibliothèque Médicale*. The abscess was situated in the left lumbar region, and was attended with pain over the left side

of the chest, and some impediment in respiration. Shortly before the period set aside for opening the abscess, it broke, in a fit of coughing, into the bronchia, and its contents were discharged by the mouth. The site of the disease presented a considerable depression, occasioned by the loss of purulent matter; and a tremulous sensation was communicated to the hand placed over it,—probably by the air which had been admitted through the bronchia.

This is the only case of the kind we recollect to have seen noticed by any writer. M. Gerardin, who reported the case to the Royal Academy of Medicine, believes it to be the only one on record.

TREATMENT OF FISTULÆ.

A FORTUNATE accident happened to M. Lisfranc, which may lead to some results of practical value. A patient presented himself with fistula near the sternum, of three years standing. Of late, several new openings had appeared. The discharge was very great, and the general health much injured. M. Lisfranc thought it would be necessary to remove part of the sternum, but by way of preparing for the operation, applied leeches round the part and fomentations, and other appropriate remedies. These having been continued some time, the fistulæ were found to close, and their cure was considered radical.

BOSTON, TUESDAY, NOVEMBER 3, 1829.

CHLORIDES OF LIME AND SODA.

AN interesting pamphlet, translated from the French of M. LABARRAQUE, of Paris, by JACOB PORTER, and published at New Haven, has been perused by us with great satisfaction. It is entitled "Instructions and Observations concerning the Use of the Chlorides of Soda and Lime," and contains much information on a subject of growing importance in the medical world. It has been ascertained by numerous experiments, instituted both abroad and in this country, that these substances are among the most powerful and useful antiseptics we possess. Externally applied, in a state of greater or less dilution, they have been found to destroy the odor arising from putrid animal matter, to purify vaults, to

disinfect the atmosphere contaminated by the presence of disease, and to improve the surface of ill-conditioned or gangrenous ulcers. Internally taken, they have also proved useful in various disorders. The following are some of the most interesting facts adduced in proof of the efficacy of these agents.

A corpse, which had been interred about a month, was taken up by order of the King's Attorney at Paris, with a view to judicial examination. The odor exhaled by it, however, was so offensive, that it was impossible for the attendants to support it. The subject was therefore sprinkled with the chloride of lime dissolved in water. After a few aspersions the odor was entirely destroyed, and it became practicable to commence the operation.

Eight halls at the Bicêtre, which were very much infected, were purified by a bottle of the concentrated chloride of soda, diluted with thirty parts of water.

In a case of severe and extensive ulceration of the abdominal surface following bubo, which for a whole year had resisted every mode of treatment that could be devised, the same article was applied with success. The chloride, when first used in this case, was diluted with double its weight of water, but its strength was gradually increased until it was applied in a pure state. At the end of eighteen days there remained but a few ulcerated spots, and the patient was rapidly recovering his health and strength.—Diluted in ten parts of water, the chloride was employed in two cases of malignant sore throat, and with decided benefit.

Great benefit was also derived from the internal exhibition of this article, in the dose of twenty-five drops in a cup of water, in the case of an individual who had been poisoned by the hydrosulphuret of potass, which he rejected by vomiting. The preparation thus given, prevented the disengagement of hydrosulphur. gas, which had proved very troublesome.

In a case of asphyxia caused by the exhalations of substances taken from the vault of a privy, and attended with severe symptoms of locked jaw, the patient was cured by inhaling the Chlorine.

It is mentioned as a reason for preferring the Chloride of Soda in certain cases, that it does not absorb the moisture of the atmosphere when

brought into the state of a hydrochlorate, but forms a very dry salt, which acts as a preservative by coagulating the principle that begins the putrefaction. This compound, therefore, is proper when it is desirable to disinfect a body and prevent the infection from being reproduced; it is also most proper as an application to ill-conditioned sores, on account of the property it possesses of detaching the mortified from the healthy substance; while the Chloride of Lime serves only for a simple disinfection, that is to say, for the purification of a body which is immediately examined.

The mode of preparing the Chlorides is not mentioned, but we see that the articles are advertised at Philadelphia, and we believe they are also prepared by Mr. Lauriat, an excellent practical chemist at Roxbury, and kept for sale by the druggists in this city.

MEMORIA MEDICA.

THE amount of practical knowledge which dies with a wise and experienced physician, is altogether incalculable. The amount which dies in the memory of the living is scarcely less. Diseases are assuming forms of uncommon character,—remedies are exerting great and unexpected power over diseases, in every city and every village where a doctor and a patient are to be found. In the future practice of the Physician to whom such event may occur, it is perhaps improved for his own reputation and the good of the families he attends; or more probably, if the

case do not recur to his observation soon, it is forgotten, and the world is no better for what ought to have done it an essential service.

In a liberal profession it is a duty not only to acquire useful knowledge, but to put it in such form as to preserve and diffuse it; and when we are told that the events of practical value occurring in the private practice of the most obscure physicians,—nay more, that the knowledge amassed by the judicious and experienced practitioner of three score years, and even his own reflections, may be easily saved from dying with him, may be easily imparted to those who come after,—a degree of curiosity is felt to know how this may be effected,—a desire will be felt, by every good man in the profession, to be active in thus advancing the cause of medical science and general benevolence.

The means of doing this are now offered the profession, in the form of a "*Medical Common-place Book*," recently published by Carter & Hendee. It is arranged by a member of the Massachusetts Medical Society, and published in a form well adapted for the purposes it is designed to accomplish. We give below the *Preface* to this work, in order to explain more fully its plan and object.

"Medical knowledge is of all kinds the most fugacious and difficult to be fixed. The immense multiplicity of facts which crowd the memory of the experienced practitioner, defies the most retentive powers. It has been correctly observed, that a Physician never makes use of more than ten years' experience, and beyond that, *forgets* as much as he *learns*. A common-place book supplies, in a

considerable degree, this defect so universally felt and complained of. Every medical man, whether pupil or practitioner, is constantly meeting with some fact or observation which it would be of use to him hereafter to recur to, and yet it would be in vain to trust the recollection of it to his memory alone. This is peculiarly true of successful extemporaneous prescriptions, and of curious cases and unexpected recoveries, and facts disclosed by the examination of morbid parts after death.

"The following work is intended to furnish a convenient depository of this fleeting and ephemeral knowledge; and it is hoped that it will be made useful, not only to practitioners themselves, but likewise to the public, by enabling any one to communicate the results of his experience with comparatively little trouble. A large list of the most important terms occurring in general practice, is alphabetically arranged, and a convenient space is left for the addition of new terms. In order not to swell this list, the terms used in Chemistry have been left out, as their number would require a common-place book by itself.

"The mode of using a common-place book upon this plan is commonly known. Suppose a case of cutaneous disease, which has long baffled the attempts to cure it, suddenly yields to a new and fortunate prescription. These facts are recorded, and the number of the page in which the record is placed, is put against the words 'cutaneous diseases.' The same number may likewise, without the least confusion, be placed against several other words, as 'skin,' 'prescription,' 'cure.' In this way, everything which is recorded may be found without trouble."

Students attending Medical Lectures will find the above-mentioned work a very convenient depository for such facts and observations as

they may wish to preserve for future use.

—————
 MEDICINE NO MYSTERY.

A POPULAR work on medicine, bearing this title, has just been published in Dublin by John Morrison, M.D. If there is any fact perfectly undeniable, we believe it to be, that works of this description do more harm than good to the people, and more good than harm to the faculty. Dr. Morrison has, on the whole, treated the subject in as interesting a manner as could be expected, although he evinces more policy than philosophy;—his views are calculated to take with the general reader, though, in the main, erroneous and superficial. His remarks on *venereal diseases* are very correct.

“These are the diseases,” says he, “that have afforded such an ample field to the swindling empiric and unprincipled charlatan, in conjunction with the maladies more peculiarly called venereal ones, in his designs on the purses of his victims. The credulity of mankind,—the pride of our nature, which teaches us to brave death itself rather than risk the scorn of mankind,—and, above all, the ignorance of the principles of life, and of the science of medicine, which I have dwelt upon in the introduction to this treatise,—have all aided those adventurers in their projects, and have enabled them to possess palaces, bought and constructed with the treasures and blood of their victims. Witness the enormous fortunes of the S——s, the L——s, &c., of to-day, and of all the secret doctors of days gone by, by whose means the blood of so many families has been tainted in its source. Look at G—— House, that structure raised from the balsam so appropriately called *golden!*”

MODE OF ARRESTING HEMORRHAGE
 BY TWISTING THE BLEEDING VESSEL.

M. AMUSSAT lately communicated to the Royal Academy of Medicine in Paris, an account of experiments made by him to prevent and arrest hemorrhage without the means usually employed. Observing that lacerated wounds are not accompanied by loss of blood, which may be attributed to the mode in which the arteries are torn, M. Amussat endeavored to ascertain whether he could prevent hemorrhage by treating the arteries in a similar manner. His attempts, however, were not successful till he thought of *twisting* the bleeding vessels. The first trial having been successful, he made many others on different animals, as dogs, rabbits, horses, &c., and with the same results. His method is as follows:—An artery being cut, its extremity is seized with a pincers, the branches of which are kept closed by means of a spring; a sufficient force is used to draw out the vessel five or six lines; it is separated from the surrounding parts; then laying hold of it with the thumb and forefinger of the left hand, the pincers is turned five or six times on its axis. The twisting ought to be continued until the portion of the vessel held in the gripe of the instrument is torn. From this portion there results a *cul de sac*, which prevents the flow of blood. If the operation be performed without first fixing the artery with the fingers applied beyond the point of the instrument, the vessel is twisted up as high as the next collateral branch.

M. Amussat has practised this method in amputation of the thigh and in extirpation of the testicle, with success. The advantages which he attributes to it are, producing more speedy union, and being able to arrest bleeding without depending upon assistants, which in the army especially would render it of great importance.

In a case of extirpation of the

mamma, M. Roux, who performed the operation (August 11th), tried the plan of twisting the arteries to stop the bleeding. With two or three vessels it answered, but in as many others it failed, perhaps owing to their being deep-seated. Ligatures were then applied in the usual way.

In a case at the Hôpital Beaujon, when M. Blandin amputated the female breast for scirrhus (July 28th), after the removal of the diseased part, blood flowed very freely from an artery at the upper angle of the wound: the vessel was seized with a pincers, and twisted upon itself *four times*: the bleeding stopped, so that the wound admitted of being immediately united in the most perfect manner by adhesive straps. The artery was about the size of a crow-quill, and the pincers with which it was seized was one of those employed by watchmakers, the bits of which are square-pointed, and correspond to each other for a considerable extent by a plane surface, marked with transverse striæ, which renders them more tenacious.—*Journ. Hebdom.*

Iodine at the Hospital of St. Louis.—Dr. Lugol, Physician to the Hospital of St. Louis, in Paris, the only establishment in which patients declared scrofulous are admitted, has adopted iodine in the cure of scrofula with great success. His mode of administering it is two-fold:

—internally, as a solution of iodine, from half a grain to a grain, in a pint or half a pint of distilled water, in which he also dissolved a certain quantity of common salt. In external applications, he used salves composed of the usual sorts of grease with certain proportions of iodine and iodate of potassium, or the simple prot-iodate of mercury. In the space of seventeen months, M. Lugol had the opportunity of treating with this remedy 109 scrofulous patients. Of these, thirty-nine remained in the hospital at the end of the year: thirty had quitted the establishment much benefited: thirty-six had left it perfectly cured; and there had been four on whom the treatment had proved inefficacious. M. Lugol communicated the details of his remedy, and the cures he had performed, in a memoir to the Royal Academy; and the committee to whom it was referred to inquire into the subject, reported that all the assertions of the Doctor had proved exact; that the evident effect of the remedy had been established, and that M. Lugol deserved the encouragement of the Academy.—*London Athenæum.*

Massachusetts General Hospital.—The Managers of this Hospital, having found it expedient to increase the number of medical officers, have appointed JOHN WARE, M.D., an Assistant Physician to the Institution.

WEEKLY REPORT OF DEATHS IN BOSTON, ENDING OCTOBER 24.

Date.	Sex.	Age.	Disease.	Date.	Sex.	Age.	Disease.
Oct. 16.	M.	21 mo	infantile		F.	36 yrs	mortification
17.	F.	6	unknown		F.	71	lung fever
	F.	4 1-3 y	lung fever	21.	M.	3	croup
18.	F.	23	unknown		F.	19	intemperance
	F.	49	consumption	22.	M.	21	brain fever
	F.	31	do.	23.	F.	2 1-3	lung fever
	F.	10 w	lung fever		F.	22 mo	measles
19.	M.	4 yrs	croup		F.	24 yrs	convulsions
	M.	3 mo	quinsy		M.	14 mo	measles
20.	F.	41 yrs	childbed	24.	F.	19 yrs	unknown

Males, 6—Females, 14. Total, 20.

ADVERTISEMENTS.

ANATOMICO-SURGICAL DRAWINGS, and Descriptions of all the Surgical Operations, according to the most approved methods. By L. J. VON BIERKOWSKY. Translated from the German. In two volumes, and 570 drawings on 58 folio plates.

EXTRACTS FROM THE PROSPECTUS.

"Encouraged by the approbation of the Medical Profession, it is proposed to publish a work under the present title."

"This work contains 570 drawings, on 58 plates folio; to which is annexed, in two volumes 8vo. a concise explanation of each surgical operation. The plates exhibit not only the parts interested in operations, in their natural position and size, but, what is much more important, represent the different acts or stages of the whole operation, while others exhibit delineations of such morbid affections as consist in the change of the natural position, structure, color, &c. In order to afford the work at a moderate price, the plates will be Lithographic; and for the purpose of securing perfect accuracy, engagements have been entered into for their preparation in Berlin, under the especial direction of two of the most distinguished Professors of the University of that city."

A specimen of the translation, and the plates, is deposited for inspection at the Bookstore of CARTER & HENDEE, who receive subscriptions for the work.

Subscribers will be furnished with the work, and the first impressions of the plates, at the price of \$30.

The subscription list will be open until the 1st of November, 1829, after which period the price of the work will be raised to \$40.

P. S. For the accommodation of subscribers the work will be issued in five Numbers, at \$6 each, payable on delivery. Sept. 29. 18202N1D.

CONSOLIDATED COPAIVA.

"COPAIVA may be given in this form without the least inconvenience. Neither communicating taste, nor imparting odor to the breath, it is also retained without the least disquietude or uneasiness to the stomach; and I am informed by Dr. Rosseau, that in large doses it does not purge."—*Phil. Journal of Med. Sciences.*

See an article in this Journal, Aug. 18th.

EUROPEAN LEECHES.

An excellent lot of European Leeches, which will be sold at a reasonable price, or applied, in any part of Boston or in the vicinity.

For sale by NATHAN JARVIS, 188 Washington Street, where Physicians will find medicines at as reasonable terms as at any place in Boston.

Aug. 25.

eoptf.

CARTER & HENDEE have just published,—The Constitution of Man, considered in Relation to External Objects. By GEORGE COMBE.

From the Preface to the American edition.

"Mr. Combe's work should be placed with those, of which so many within a few years have appeared, which are devoted to the all-absorbing topic of Education. It treats of moral, intellectual, and physical education. This is not formally done under so many distinct heads. But the whole course of reasoning of the author, and the whole array of all his illustrations, have it always obviously in view to show how the highest cultivation of each of these may be most surely brought about.

"The publishers have printed this edition from a belief that there is much in the work to interest the community.

"It has a novelty to reward the general inquirer, and it presents the well known under novel aspects. There is one class amongst us who may study it with much advantage. Scholars are referred to, a class here too small to form a distinct order with habits of their own, and who insensibly fall into those which, although not mischievous, to the multitude on the score of health, too often make ill health the portion of the sedentary student, and bring upon him premature decay.—To all classes it is recommended, and the various learning and acuteness of the author well fit him to write a book which addresses his instructions to the whole community." Sept. 8.

ATREATISE on the Scrofulous Disease, by C.G. HUFELAND, Physician to the King of Prussia, &c., translated from the French of M. Bousquet, by Charles D. Meigs, M.D., is just received and for sale by CARTER & HENDEE.

Sept. 8.

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

I.

OBSERVATIONS ON OBLITERATION OF
THE VAGINA.

By CÆSAR HAWKINS, Esq., Surgeon to
St. George's Hospital.

CATHARINE H., æt. 27, admitted for amenorrhœa, with the following history:—In November last she was delivered of her first child, which was stillborn, by means of instruments. She suffered much during her confinement, and was very ill for some time afterwards, but recovered her health during the month. About a month after her confinement, she had the usual precursory symptoms of menstruation, but no discharge of the secretion took place; and each month since that time (the last being the sixth period since her confinement) the symptoms have returned with increased severity at each successive period. She has much pain in the hips and loins, pain and bearing down in the vagina, sickness, slight febrile symptoms, with general disturbance of health. The abdomen swells, and is tender and painful, and she suffers much from flatulence, and experiences considerable difficulty in emptying the bladder or rectum, though there has been more or less difficulty in passing either evacuation, even during the intervals between the periods of menstruation. These symptoms continue for nine or ten days, and then subside, leaving her

comparatively well. The abdomen, however, has not lately recovered its proper size upon the subsidence of the other symptoms, but remains considerably swollen, though less than during the menstrual periods. She did not suffer much after her confinement from the lacteal secretion, but has been constantly obliged to use liniments to the breasts, as, at each menstrual period, the breasts enlarge and become painful, and milk is secreted in such quantity as to escape from the nipples even without pressure.

At the request of Dr. Seymour, under whose care she was admitted, I examined her, and found the vagina totally obstructed by a very firm membrane, drawn in and puckered towards the centre, and feeling like cartilage. On passing a catheter into the bladder, the urethra was perceived to be pushed up behind the pubes as if by pressure, so as to require the point of the instrument to be turned nearly perpendicularly, instead of in the usual oblique direction. When the water was drawn off, a firm tumor could be distinguished by pressure on the abdomen, and a considerable prominence could also be felt by the finger introduced into the rectum beyond the point of obstruction, though no distinct sensation of fluctuation could be felt either at the obstructed point or on the abdomen, nor in the rectum.

It seemed evident, however, from this examination, that the uterus and upper part of the vagina were distended with thick substance, so as to obstruct the passage through the rectum and urethra, and it was probable, at the same time, that the obliteration of the vagina did not extend very far.

May 27th.—The patient being placed on a table, nearly in the position for the operation of lithotomy, I made a transverse incision, about half an inch in length, in the centre of the hardened cicatrix, and after dividing it cautiously, about three quarters of an inch upwards, I reached the distended portion of the vagina, through which a thick, red, semifluid substance, without smell, flowed to the amount of about twelve ounces before she was placed in bed, after which about a pint more came away slowly, during the next thirty-six hours, without pain or inconvenience.

29th.—This morning the discharge became completely purulent, all the brown matter appearing to have come away; and about the same time that the nurse observed this change, the patient was seized with rigors, pain in the abdomen, and frequent vomiting. She has now an anxious countenance: bowels not open since yesterday; pulse 120, weak and small. She has twice taken some infusion of roses, and Epsom salts, without effect.—As both Dr. Seymour and myself believed the symptoms to be those of irritation without inflammatory action, I injected some warm water into the vagina, to wash away the purulent secretion; an enema of castor oil was administered, and the following pills exhibited, which were re-

peated twice in the course of the day:—

R. Pil. Sapon. c. Opio, gr. v.

Galb. Comp. gr. v. M. ft. Pil. ij.

In the evening, the bowels having been twice opened, she became easier, with less frequent vomiting, and the pulse was less frequent and more full.

30th.—The discharge continues purulent, but in smaller quantity. The sickness is gone; the bowels have been again opened twice this morning; the pulse 110; countenance less anxious: there is still, however, a good deal of pain on the slightest motion, and pain is produced by pressure in the situation of the uterus, though not elsewhere.

Rep. Pil. Vespere.

31st.—There is now no pain or tenderness of the abdomen, and no pain on turning in bed. Tongue covered with a thick white crust; pulse 116. She has eaten nothing these two days, but is not now sick. Ordered a small quantity of wine. She is menstruating, the proper period having arrived, and, in fact, she has not suffered so much the last two days as she generally has done before the late abortive attempts to get rid of the secretion; so that the symptoms during the last two days may have been as much owing to the state of the uterus from the performance of this function, as to the irritation excited by the operation.

June 4th.—The tongue is clean, and she has gone on well till to-day, when a good deal of pain and tenderness returned on the right side of the abdomen, where a tumor is perceived, apparently in the situation of the ovarium, and there is also a good deal of nausea and sickness.

Hirud. vj. parti dolenti.

R. Mist. Camph. ʒx. Træ Castorei, ʒss.

Træ Opii, Mv. M. 6tis horis.

These symptoms subsided, and the next day no tumor was perceptible, the pain and tenderness gradually ceased, and on the 9th there was no longer any local or general irritation. Weiss's dilator was now employed for some hours, which produced considerable pain by the distension, with a little bleeding from the cut surface; the pain went off, however, and the instrument was employed every day for some time; after which bougies were used, which caused less irritation than the dilator, and appeared equally efficacious. Under this treatment, which was attended with copious purulent discharge, the strictured part was gradually dilated, so that, instead of a hard circular band, more than half an inch broad, and feeling like cartilage, the surface became equally smooth and nearly as pliable as the rest of the surface of the vagina, though the canal still remained smaller than it should be. She was impatient, however, to return to her home, and promised to come again to the hospital if she experienced any inconvenience.

There is a great variety in the congenital deformities, or accidental adhesions, or new growths, which are found in the generative organs of females, producing some impediment in their different functions; some of which are of little consequence and easily remedied, others are of more importance, and require the most delicate and skilful surgical operations for their cure.

Nothing is more common in young infants, than for some adhesion to take place between the sides

of the labia, uncleanness or some other cause producing inflammation of the mucous membrane; the adhesion being such as occasionally to leave only a small opening near the urethra, and to draw attention by the pain or inconvenience experienced in micturition. The remedy for this adhesion is very simple; the forcible separation of the labia by the thumbs or a probe, or a slight incision with a knife, being sufficient to lacerate the adhesion, and a little piece of lint, dipped in oil, preventing their subsequent cohesion.

Sometimes, again, there is such a prolongation of the hymen over the orifice of the urethra, as to produce much difficulty in making water. A case of this kind is related by Warner, in his cases in surgery, in which the symptoms resembled those of stone; and after existing several years, were cured by an incision. The most remarkable instance of this sort, however, is one related by Cabrolus (*Obs. Anat.*), in which the hymen was imperforate, and the urethra completely obstructed, so that no urine could be discharged by the natural passage; but it was evacuated from a tumor, projecting about four inches from the navel, and formed probably by the urachus. Cabrolus made an incision into the urethra, and tied the tube projecting from the abdomen; the patient, who was nearly twenty, being cured. In the *Phil. Trans.* there is an account of a case where the urethra was similarly obstructed by caruncles growing from the orifice after delivery.

Besides these malformations, which obstruct the flow of urine, and may therefore be discovered and remedied in children, there are other natural and accidental impe-

diments to the sexual functions, the existence of which is not usually ascertained till the time of puberty or marriage. The obstruction may be either partial or complete; and it may be situated at the orifice of the vagina, or higher within this passage, or in the mouth of the uterus itself.

The hymen is often so firm in texture, that although an opening in the centre allows the menstrual secretion to be discharged, yet an incision is necessary for the consummation of marriage; or,—if conception has taken place in spite of this obstacle,—to facilitate parturition; such an incision being easily effected, as a director can be passed through the opening, and thus all risk is obviated. Ruysch (*Obs. Chirurg.*) met with an instance in which a second membrane was found higher than the hymen, and requiring a second incision during parturition. A similar partial obstruction to the function of generation, is formed by contraction of the vagina, from the use of strong astringents (*Saviard, Obs. Chir.*); from smallpox (*Beckerus de Paidioctoniâ inculpatâ*); from lues venerea (*Benivenius de Abdit. Morbor. Causs.*); and still more frequently from accidental lacerations and cicatrices, in consequence of violence during parturition; of which numerous instances are met with in several authors, which have been cured by tents, by several small incisions round the obstructed part, by dilatation on a director, &c.; great care being necessary to keep up the dilatation for a considerable time, to prevent subsequent inflammation. The most remarkable instance of this obliteration, while the menstruation continued, is in *Beckerus* (*op. citato*), as the secretion was discharged by the

rectum, and pregnancy took place pseudothyro intromissis voluptatibus; the laceration, and subsequent cicatrization, having been so extensive as to obliterate the whole of the vagina intermediate between the urethra and rectum.

In these cases of partial obstruction, where pregnancy has taken place, it is probably advisable to operate as early as possible, so that dilatation may be effected, and the parts properly cicatrized before delivery; there must otherwise be considerable danger of more extensive laceration taking place during the expulsion of the child. The operation is one which necessarily requires great caution; but as an opening exists, through which conception has occurred, there is at least a certain guide to the operator, who is in much less danger of injuring the bladder or rectum than in cases of complete obliteration, though the difficulties have appeared so great that *Smellie* even advises the performance of the Cæsarian section where there are large cicatrices and adhesions in the vagina and os uteri. *Callisen* also gives direction for the vaginal Cæsarian section, where the os uteri has been closed by inflammation.

The malformation becomes still more serious when no orifice is left by which the menstrual secretion may be evacuated; this fluid being thus retained in the uterus and vagina, producing great disturbance of the health, and even becoming fatal if not discovered in time for the performance of a proper operation for its cure. The symptoms arising from retention of the menses from such a cause, are accurately described by *Sabatier* (*De la Médecine Opératoire*), copied into *S. Coop-*

er's Surgical Dictionary, (Art. *Vagina imperforate*.) One circumstance, however, scarcely adverted to by Sabatier, is the sympathy of the mamma with the uterus, exemplified in the case I have narrated, and which sometimes proceeds so far as even to establish a vicarious secretion from this gland; the same thing having also been observed, "per vias aeriferas, urinarias, alvum, digitos, cicatrices, oculos, nasum, aliasve partes."—(Callisen.)—Of course, however, some exaggeration or misconception has arisen in many of these cases, so that I would not be considered as a believer in many of the cases referred to in the quotation.

The similarity, in the symptoms of such cases, to those arising from pregnancy, and the injurious suspicions often excited, have been frequently pointed out; the resemblance they bear to cases of amenorrhœa, and the necessity of manual examinations, are also evident from the instance just related. The operation for imperforate hymen is generally a very simple one, as the fluid retained in the vagina and uterus distends the membrane, so as to point out exactly where the incision is to be made. It must not be forgotten, however, that the operation, however skilfully performed, is not wholly unattended with danger. In the last instance in which I witnessed the operation, the patient died in consequence of inflammation of the peritoneum. The fluid which is retained, is in general perfectly free from putrefaction, however long the disease may have lasted (see *Mem. de l'Acad. de Chir.*), though the rule is not without exception.—(Sabatier, *op. cit.*)—Where putre-

faction takes place, death may often result from the irritation produced by this cause on the constitution; and even where it does not occur, yet suppuration ensues, after the retained fluid has been evacuated, and the employment of opiates and soothing injections becomes necessary, to obviate the irritation which is excited. But some danger arises from the mere quantity of the retained fluid, which may be so great as to produce rupture of the fallopian tubes into the cavity of the peritoneum.—(De Haen, *Ratio Medendi.*)—Smellie mentions a case where three pints and a half were discharged by operation; and half a pint more came away subsequently, of the consistence of butter-milk; a quantity sufficient to distend the uterus, as in a case of pregnancy; and in the absence of the natural contraction of this organ, very likely to be followed by severe irritation, or fatal inflammation. In the case I have narrated, I carefully abstained from pressure, but allowed the fluid to be expelled by the contraction of the uterus, and the pressure of the abdominal muscles; the discharge in this manner taking place very slowly, in consequence of the consistence of the fluid, which is usually like treacle. Attention to this rule I believe to be the principal means of avoiding dangerous results.

Where the malformation is situated not at the orifice, but within the vagina, an operation becomes much more difficult and dangerous. Sir Astley Cooper mentioned to me a case in which he had made incisions to form a passage to the uterus, and had cut through not less than two

inches of membrane, without perfectly exposing the cervix uteri, though the result was successful, as it was followed by pregnancy. A lady, after eight years suffering, was operated on, and the surgeon passed his finger into a large cavity, from which a good deal of blood escaped, and which was believed to be the vagina; the patient died, however, in three days, and it was discovered that the cavity was that of the bladder, the death having been the consequence of the escape of the menstrual secretion into the abdomen, from a rupture of one of the fallopian tubes.—(Sabatier, op. cit.)

The difficulty of the operation is necessarily still greater when the obliteration is situated in the orifice of the uterus itself,—not the os uteri in the sense in which the term is employed by many authors, who allude to the subject of this paper, by which they mean the vagina,—unless the cervix is distended and elongated by the fluid, so as to communicate a sense of fluctuation to the finger. Several directions for opening the uterus when thus enlarged, and containing menstrual fluid, or when the cervix is obliterated subsequent to impregnation, will be found in Callisen, Syst. Chir. vol. 2, cccclviii.

Callisen (op. cit.) remarks, “*Accidentalis vel symptomatica vaginæ concretio totalis vix unquam occurrit.*” Such cases are, no doubt, more rare than the instances in which some small passage remains open for menstruation, and have been seldom recorded by modern surgeons, while much attention has been bestowed on the less important cases of imperforate hymen; a neglect which has induced me to throw

together these remarks: but several cases are described by older authors, and I refer particularly to Beckerus, “*De Paidioctoniâ inculpatâ,*” and Roonhuysen, “*Med. Chir. Obs. Englished out of Dutch by a careful hand.*” The latter author, for instance, relates a similar case to that which I have detailed, where a woman had her vagina so completely obliterated by gangrene after delivery, “that she never had her menses any more.” Having dilated the vagina with a speculum, the closed part was opened from above downwards, by a lancet tied to the end of the finger. A pessary was afterwards employed, but neglected by the patient, and in a subsequent confinement a further operation became necessary; but the patient was allowed to be so long in labor before it was performed, that she died in three days.

These cases of obliteration of the vagina after delivery, are much more difficult to relieve by operation, than most of those in which there is a congenital deficiency. It is probable that they scarcely ever occur without considerable loss of substance by sloughing, the consequence of which is the approximation, in a greater or less degree, of the rectum and bladder and urethra to each other, and their junction by a hard semicartilaginous cicatrix, unyielding, and difficult to divide. The intricacy and difficulty of the case are necessarily dependent on the extent to which the obliteration has taken place; whether the sides are only brought together, or two or three inches of the vagina are firmly united, as in the latter case, there will not be the distension of the vagina

above the obliteration, separating the bladder and rectum from each other, and defending them where they are most loose, and where there is consequently greater risk of injuring these viscera. The operation becomes still more delicate when the sides of the uterus are also united together, which appeared to be the case in a patient of my friend Mr. Mayo, on whom he twice performed an operation (at the last of which I assisted), and succeeded in restoring part of the canal, though not in reaching the cavity of the uterus. There was in this case, however, no accumulation of menstrual secretion, and the health of the patient was restored; so that in all probability great part of the cavity of the uterus was obliterated, and the function of menstruation gradually ceased.

The operation is generally directed to be performed by making a perpendicular incision, but it appears to me to be much better, in most cases, to cut through the cicatrix transversely, i. e., with one flat side of the scalpel towards the rectum, and the other towards the bladder; in which direction, I imagine, with attention to the anatomy of the parts, there must be much less risk of wounding either of these viscera, than when the edge of the knife is held upwards or downwards, and there can scarcely be any risk of injuring the peritoneum, as the vagina is so little connected with it, that the puckering of the cicatrix is not likely to implicate this membrane. I need only repeat the necessity of attending to the after treatment, in the same manner as after the operation for imperforate hymen, and to the emptying both the bladder and rectum

in all these cases previous to the operation.—*Lond. Med. Gaz.*

II.

A CASE OF PERFORATION OF THE STOMACH AND ŒSOPHAGUS, WITH BRIEF REMARKS.

By MARSHALL HALL, M.D. F.R.S.E., &c.

THE little girl, whose case I am about to describe, had been subject, from a very early period after her birth, to attacks of bronchitis.

Early in April she became affected with pertussis. The symptoms of bronchial and pulmonary inflammation called for the abstraction of blood; and three, and then two leeches, were applied to the chest on two successive days, with other remedies usual in such cases. This was followed by exhaustion with reaction, the countenance varying, being sometimes pallid and cold, and sometimes flushed; and the pulse frequent and jerking. Soon after the second application of leeches, there were also frequent fits of convulsion, for which a cold lotion was applied to the head; and the warm bath was used frequently. The Hydrargyrum cum Creta was administered, with a mild nutritious diet. There was no sickness nor diarrhœa.

After a variable state of things, this little patient sank and expired, having lingered eight days.

Permission could not be obtained to inspect the body until the fifth day after death. The morbid appearances were then carefully noticed by Mr. R. WELBANK and myself.

The general surface was extremely pallid, but there was little or no emaciation.

The bronchiæ were clogged with mucus, and the lowest lobe of each lung was hepaticized.

On looking into the right cavity of the thorax, a small portion of venous blood was observed. The source of this was carefully traced. A small part of the pleura immediately adjacent and above this spot, extending upwards over the convex surface of the vertebræ, was found perfectly removed by erosion; the subjacent veins had been opened by the same process, and their blood had escaped; the nerves were left entire, as it were, beautifully dissected. Proceeding with the examination, there was found, at a part which corresponded with these appearances, an opening that penetrated into the œsophagus; and through this opening a portion of the contents of the stomach flowed, on raising this organ. At the same moment, the rest of the contents of the stomach escaped into the abdomen, through a large orifice at its most dependent part.

On further examination of the state of the œsophagus and stomach, the mucous membrane was found uniformly reduced to a gelatinous mass; the textures constituting the former were pierced by an irregular opening, of a size less than that of a pea; the peritoneum covering the latter was destroyed to a considerable extent. But there were no appearances of disease about the edges of either orifice.

The head was not examined. The other viscera presented no unnatural appearances.

The case thus briefly detailed, leads to some remarks of great interest:—

1. It cannot be doubted, that in this case the perforations of the œsophagus and of the stomach resulted from the action of the gastric juices after death. This appears to be proved by the eroded state of the adjacent parts. This fact may therefore be regarded as established by the present and similar cases.

2. It is equally certain, that there is one special disease or disorder of infants which leads to similar results, as stated in the interesting and valuable paper of Dr. JOHN GAIRDNER, in the Transactions of the Edinburgh Medico-Chirurgical Society, vol. i. p. 311.

3. It is a point of the utmost importance to state, in the account of post-mortem appearances, at what precise period after death the examination was made; and it might be useful sometimes to make the examination at two distinct periods, taking care not to disturb the parts at the first. It is quite plain that, had the parents of the little girl whose case has been given, earlier consented to an examination, some of the appearances which have been described would not have been observed.

4. It would be interesting to make a series of observations on rabbits and other animals, with a view of determining the circumstances which favor or oppose the erosion of the stomach by the gastric juice. The observations made by Dr. W. PHILIP, in the third edition of his singularly admirable work on the Vital Functions, pp. 131-2, appear to be too general on this point.

5. We might possibly employ the gastric juice in the minute dissection of the nerves, since

this texture appears to resist the action of this agent, whilst that of the other parts is destroyed by it. The fact itself is mentioned

by M. CRUVEILHIER, in his *Médecine Pratique*, Cahier i. p. 143. — *Edinburgh Med. and Surg. Journ.*

SKETCHES OF PERIODICAL LITERATURE.

PULMONARY CONSUMPTION.

DR. PARISH, of Philadelphia, in a paper published in the *N. A. Journal*, gives it as the result of his experience, that the best remedies for this disease are air and exercise. The treatment so often adopted in these cases, of confining the patient to an apartment of uniform temperature, employing depletion and low diet, has, according to him, the uniform effect of aggravating the disease, and has often been the means of inducing, or at least accelerating, a fatal termination. The ground on which this mode of treatment is founded is, that the disease is inflammatory, and must be met by antiphlogistics; but tuberculous phthisis is not an inflammatory disease, in any proper sense of the term; and those measures which prove remedial in disease of that class, are calculated only to increase it. The pulse of phthisical patients, which is so often supposed to indicate depletion, is a pulse of irritation; and this irritation is frequently the effect of that unnatural state of the system, which is kept up in the patient by the use of diet and medicine. A healthy man, confined in a close apartment, and bled, purged and starved for a few weeks, would at the end of that time present the same symptoms, which in the eyes of many practitioners are indica-

tions for this mode of treatment. Free exposure to the atmosphere, and vigorous exercise to the utmost of the strength, are the only remedies worthy of confidence in this form of phthisis; and in those cases where they cannot produce a cure, will certainly protract the fatal termination. Catarrh or pneumonia may indeed supervene on the complaint, and require depletion; but this is even then to be very sparingly used, and under all other circumstances to be wholly avoided.

There is certainly much good sense in the views taken of this subject by Dr. P., and when the age and extensive experience of their author are taken into view, they seem entitled to very respectful attention. They are however expressed in terms somewhat too bold and unqualified, and their application to practice would require some discretion. We can see no reason, moreover, why the remarks should have been limited to tubercular phthisis, since, so far as they are just, they surely apply, with equal force, to that form of phthisis which is the sequel of pneumonia. We apprehend that the true hereditary scrofulous consumption is not often susceptible of a cure, either medical or spontaneous; nor do we perceive that the majority of the cases related by Dr. Parish, were in fact of this description. On the oth-

er hand, we believe that chronic pneumonia is too often induced by the injudicious use of certain remedial agents in the acute stage; and as often kept up by the continuance of depletion, when the system demands a renovation of its powers, and a return to its natural functions. In this state, however, we do not think it generally happens that the mere omission of medicine, and driving the patient abroad, will afford the degree and kind of stimulus required. Matters must be managed with rather more delicacy. Patients under these circumstances, if belonging to the country, are greatly benefited by a return to the place of their nativity, and to their friends. Those who do not, still derive equal advantage from *travelling*. In both these cases, there are many causes put in operation calculated to produce a favorable change; but there is no doubt that pure air and bodily exercise do their share of good. The substitute, however, of labor and unlimited exposure in one class of persons, or of the toil of medical country practice in another, is not likely, we apprehend, to be beneficial in all cases, notwithstanding that, in some of those related by Dr. Parish, it appears to have been successful.

Among the instances which Dr. P. adduces of the happy influence of his two favorite agents on pulmonary disease, is the case of Dr. T. M. Harris, of this State; who, in the year 1804, while apparently in the last stage of consumption, performed a journey to Marietta, in Ohio, and returned home with his health restored. We are not informed what

were the particular circumstances of Dr. Harris's case, and are therefore unable to judge whether it was tuberculous or otherwise. We are however ourselves acquainted with the fact, that this gentleman has had no recurrence of his former symptoms; and are by no means disposed to find fault with a mode of treatment, which has been instrumental in preserving to the clerical profession one of its most accomplished and most valuable members.—To this case we might add another,—that of a respected relative, now Surgeon General of the United States, which is no less illustrative of the views of Dr. Parish. The details of this case we hope to offer our readers at some future period. We recommend to their careful perusal, the paper of Dr. Parish, which, as well as the other articles in the present number of the Journal, will be found highly interesting and instructive.

MEASLES.

WE notice in the periodicals of the day, that a German physician has been treating this disease with cold affusion, with remarkable success. Of 121 patients who had the disease, 52 were treated in this manner, of whom one died; while among the 68 in whom a different practice was resorted to, the number of deaths was eleven. The application employed was a mixture of vinegar and water, with which the whole surface of the body was freely sponged. The temperature of the fluid was in inverse proportion to that of the skin at the time of its employment, and

varied from 90 deg. Fahr. to 33, at which temperature it was used when the heat of the body was 108 deg. The only precaution adopted, was that of omitting the ablution when the patient was in a tranquil state, or perspiring. Both the severity and duration of the disease seemed to be diminished by the remedy. In three patients, it was remarked that the eruption came out immediately after the ablution, though before there had been no sign of its appearance.

We consider these facts to be valuable, not so much by suggesting a new mode of practice in measles,—which in the majority of cases, occurring under favorable circumstances, scarcely requires treatment,—as by furnishing new arguments against the prejudice which is so general among the uninformed, and even extends in some instances to physicians, in favor of maintaining this eruption by the internal and external application of heat. The danger of the eruption being repelled from the surface, which is the bugbear of the nurse, is not always viewed without apprehension by the medical attendant, who, though he derides the notion, finds it exerting some little influence on his management of the case. While the practitioner timidly prohibits the admission of cold air and the use of cold water, advantage is readily taken of these concessions to load the patient with clothing, and to aid their effect by administering stimulating infusions. If these views be erroneous, and the practice founded on them useless or dangerous, they certainly

cannot too soon be exploded and abandoned.

ANEURISM.

DR. COATES, of Philadelphia, suggests the idea, that the morbid appearances usually found connected with aneurismal tumors,—such as the thickening and hardness of the neighboring arterial texture, the purulent effusion and the tubercular deposits,—are the result of an inflammatory process; and that arteritis, to a greater or less extent, is a far more frequent disease than is generally imagined. Dr. C. is disposed to refer the unusual redness sometimes found in the internal coats of these vessels, to this cause, rather than to any change occurring after death. The possible connection of inflammatory fever with this state of the arteries, is a point well worth considering. Dr. Coates's paper, to which it is impossible for us to do justice in an analysis, may be found in the last No. of the N. A. Journal.

COLICA PICTONUM.

DR. COXE, of Philadelphia, relates a case of this disease which terminated fatally on the third day. On examination, the mucous coat of the stomach was found much softened, so as to be removed with the slightest force, and forming after its removal a pulpy mass. The principal morbid appearances existed in the colon, the internal surface of which was in a state of high irritation, resembling that of incipient dysentery. It was studded with small tumors of a deep purple color, apparently from venous

blood contained in the substance of considerable accumulation of feces the mucous coat. There was no in any part of the intestinal canal.

BOSTON, TUESDAY, NOVEMBER 10, 1829.

THE FAMILY PHYSICIAN OF GENERAL
WOLFE.

IN some of the pictures, familiar to most of us, of the death of General Wolfe, his Physician, Dr. Hinde, is represented as feeling the fast ebbing pulse of the wounded hero. This Dr. Hinde has recently died at Newport, Ky., at the advanced age of 92 years. A sketch of his life and character is given in that excellent periodical, the *Western Journal of the Medical and Physical Sciences*, from which biography we derive the facts connected with his history.

Like most of those of our time who took part in the early wars of the country, Dr. H. was accustomed, in his extreme old age, to describe scenes and relate incidents touching those wars and the patriotic men who were distinguished in them, with the spirit and almost the vivacity of youth. Gen. Wolfe was the object of his liveliest recollections, and to his latest days he was accustomed to describe him as "a tall and robust person, with fair complexion and sandy hair, possessing a countenance calm, resolute, confident, and beaming with intelligence."

Dr. Hinde, it appears, was a native of England, and pursued his professional studies under the direction of Dr. Thomas Brooke, one of the Physicians of St. Thomas' Hospital. After retiring from the service, he settled in the state of Virginia, in the

immediate vicinity of two men who soon converted his royalty into republicanism, and, notwithstanding his former zeal in the cause of his native country, opened his eyes to the intolerable burdeus heaped upon that of his adoption. These influential neighbors were PATRICK HENRY, and the Rev. SAMUEL DAVIS, afterwards President of Princeton College. To the former he became family physician, and in 1775 was his chief surgeon, when he marched against Lord Dunmore, in the gunpowder expedition. Lord D., then Governor of Virginia, was not only the countryman, but had been the personal friend of Dr. Hinde; yet the Doctor, forgetting alike his personal friendship, his king, and his country, was bold in his pursuit of what he knew to be justice;—he became, in fact, a genuine disciple of the fervent patriot whom he followed.

Dr. Hinde was an enthusiast. The current of his feelings, whatever course it took, rolled on with great impetuosity. This is farther illustrated in his religious history, as will appear by the following anecdote related by his biographer.

"Dr. Hinde had been educated in the principles and practice of the Episcopal Church; but he now became a Deist, and took pride and pleasure in ridiculing Christianity. His views and feelings, however, at length underwent a radical change; the immediate cause of which was so

uncommon, and, at the same time, so professional, that we shall not hesitate to relate it. His wife and daughter had been converted to Christianity, and attached themselves to the Methodist Episcopal Church. For this act, his daughter was banished from his house, and his wife placed under medical treatment, for what he considered, or affected to consider, insanity. His remedy was a blistering plaster to the whole length of the spine, which he left on for several days. By this measure of violence, he hoped to deter her from further attendance on places of public worship. But, as he used to say, God turned the 'huge blister' upon his own heart. The Christian fortitude and meekness, with which his wife bore the protracted anguish which his cruelty inflicted on her, excited his sympathy and filled his soul with remorse. A feeling of respect was awakened towards that religion, whose votaries could endure such pain and persecution, without a murmur; and he was led forthwith to investigate its origin and principles. The inquiry resulted in a perfect conviction of its divinity; and he attached himself to the same church, from which he had sought by violence to estrange his wife and daughter, and for nearly half a century continued one of its most devout and exemplary members. Such was his temperament, indeed, that he may fairly be said to have passed into the opposite extreme. Down to his dying day, religion was his darling theme. No waking hour ever passed, whoever might be present, in which he did not utter some expression of admiration for the Christian faith, and thank heaven that he felt its influence. Throughout the whole of this long period, he never attended to the call of a patient, without first retiring to pray in secret, for the success of what he might prescribe; and when he reached the house, whether of rich or poor, Christian or infidel, his inva-

riable practice was, to assemble such members of the family as could be conveniently brought together, and re-engage with them in prayer for the recovery of the sick, before he would exhibit a single remedy. In the efficacy of prayer the Doctor was a firm believer, and not a few of his patients cherished the same faith. To all such, his religious efforts were auxiliary to his professional; as they contributed to tranquillize the feelings, inspire the hopes, or confirm the resignation of the sick."

The following relation appears also to show that his zeal was not altogether extinguished in his old age.

"His taste and judgment kept him in communion with the respectable sect of Christians to which he at first attached himself; but he cherished the kindest feelings towards all others, of which he gave many practical evidences. The zeal which he felt when united with his brethren in devotional exercises, was, in the language of chemistry, highly *effervescent*; and frequently manifested itself in *ebullitions* of feeling the most artless and unaffected. Instances of this kind have been mentioned to us; one of which, as illustrating this feature of his character, we shall present to our readers. The Doctor was in the habit of indulging himself in the extempore responses, which are practised by the devouter members of the Methodist church while the clergyman is preaching. In his old age, he frequently indulged himself in these pious exclamations, in the argumentative periods of the discourse, when others were not so strongly excited, and wished to attend, without interruption, to the reasonings of the preacher. Some of his friends admonished him on this subject, and he promised in future to restrain himself. But, as might have been foreseen, he became impatient under this rash acquiescence; and not long afterwards, in the midst of a sermon, becoming

warmed in advance of the congregation, but still recollecting his promise, with a *naïveté* which might challenge comparison, he exclaimed, — ‘*Amen, at a venture!*’”

Our deceased brother was a professed disciple of Lavater; and he placed great reliance on the expression of the countenance in judging of the nature, or probable issue of disease. In this instance, most experienced physicians are doubtless physiognomists. There is something in the first look of a patient which cannot be described, but which really gives us an insight into his case, which subsequent inquiry generally confirms. Even at the commencement of a tedious illness there is often an expression of the countenance which forebodes a favorable or a fatal termination, and which rarely deceives us.

As a Surgeon and Physician, Dr. Hinde was extensively engaged in practice, both in Virginia, and subsequently in the interior of Kentucky; and we regret that on this, the most interesting part of our subject, we have so little to offer. Our apology may be found in the following paragraph from his biography— a paragraph which might close the history of too many of our most skilful and experienced physicians.

“In concluding our sketch, we may be allowed to express a regret, that one endowed with so much sound understanding, quick perception, and active benevolence; favored with such diversified opportunities, and permitted to live so long, should have left behind him none of the fruits of his ample experience. When such a man bequeathes to posterity nothing but his good name, he

can scarcely be said to have fulfilled his destiny.”

Combination of Lactuca Sylvestris and Digitalis in the Treatment of Hydrothorax.—We are indebted to Dr. Teel, of Aurich, for this mode of practice. M. Brosius has applied it in twelve “inveterate” cases of hydrothorax, and has much confidence in its efficacy. Although but two of these cases were radically cured, the symptoms of eight others were very materially relieved. In two patients only, the remedy appeared to exert no beneficial influence; and in these instances the fact was corroborated, that, if the proposed remedy does not relieve during the first days of the disease, no advantage is to be expected from its continuance.

One of the complete cures surpassed every previous hope. The patient was a woman seventy-four years of age. She took four grains of the Extr. Lactuc., with one grain of the powder of Digitalis in a dose, every two hours. After the fourth dose, the symptoms were much relieved; after the sixth, they had disappeared; and at the end of three days, during which time the patient had taken in all eighteen doses, a strong infusion of digitalis was prescribed. The cure was completed by light bitters.

In one case in which this combination acted as a palliative, the patient was relieved in five attacks, in each of which the face, hands and feet were œdematous. The sixth attack proved fatal.—*Journ. der. Prak. Heilkunde.*

Acetate of Morphia successfully applied to a Blistered Surface in Tetanus.—A woman, 29 years of age, having general good health, received a slight wound on the brow, which she washed with cold water, and dressed with emollient poultices. Two days after, incipient trismus became manifest, accompanied by

contraction of the muscles of the neck and abdomen. Tetanus soon became general, and the spasms were very severe. She was then,—viz., from the 22d of October to the 27th,—treated five days by means of bleeding; warm baths, continued for an hour and a half or two hours; sedative plasters on the neck and temple; and, finally, she had a third of a grain of acetate of morphia every two hours. On the 1st of November, the disease still continuing, a quarter of a grain of the acetate of morphia was sprinkled over the skin, a blister having been previously applied, so as to produce a raw surface. The dose was repeated in a few hours. The effect was very remarkable; in a few hours the contractions became less violent, and the trismus abated. All other treatment was now abandoned, and the third of a grain of acetate of morphia applied twice a day. The patient rapidly recovered.—*Ann. Univ. di Med.*

The patient was now bled, a large dose of castor oil administered, and cold applied to the tumor. These means being unavailing, a bougie was introduced into the urethra, smeared with extract of opium: two evacuations from the bowels took place, the patient fell asleep, and the hernia was easily reduced.—*Jour. de Med. de Bourdeaux.*

Artificial Eyes.—It is said that Mr. Scudder, a celebrated artist, has succeeded in making artificial eyes, the pupils of which contract and dilate, like those of the natural organ. We should be required to see this close imitation of nature, before giving implicit credit to the truth of the report.

Baker's Bread.—The following formula is said to be that by which the London bakers make their bread:

Take of Wheat Flour 375 pounds;
Potatoes 15 pounds;
Salt 4 pounds;
Alum 1 pound. Mix with water.

All this is very well, with the exception of the latter article; and in fact this is the true recipe, we shall cease to wonder that that metropolis should be the emporium of dyspepsia and constipation.

Mode of applying Opium in Strangulated Hernia.—A man, 50 years of age, had labored for five days under the effects of a very large inguinal hernia, which was strangulated. Vain attempts had been made to reduce it, when Dr. Brulattour, of Bourdeaux, was called in.

WEEKLY REPORT OF DEATHS IN BOSTON, ENDING OCTOBER 30.

Date.	Sex.	Age.	Disease.	Date.	Sex.	Age.	Disease.
Oct. 23.	F.	74 yrs	inflammatory fever	27.	F.	19 mo	measles
	F.	2 1-3	lung fever		F.	10 d	unknown
	F.	22 mo	measles	28.	F.	6 w	do.
	F.	19 yrs	consumption		M.	87 yrs	old age
24.	F.	5 mo	dysentery		F.	15 mo	lung fever
	M.	26 yrs	typhous fever		F.	27 yrs	consumption
	M.	39	consumption		F.	3	croup
	M.	2 1-2	croup		M.	5 d	unknown
	F.	26	consumption		F.	5	do.
	M.	11 mo	croup		M.	5	convulsions
	F.	19 yrs	liver complaint		M.	39 yrs	intemperance
25.	F.	56	delirium tremens	29.	M.	15 mo	unknown
	M.	12 mo	lung fever		F.	2 yrs	lung fever
26.	F.	15	unknown		M.	5	do.
	M.	61 yrs	gravel	30.	M.	3	dropsy in the head
	F.	3	lung fever		F.	82	old age

Males, 13—Females, 19. Total, 32.

ADVERTISEMENTS.

A NATOMICO - SURGICAL DRAWINGS, and Descriptions of all the Surgical Operations, according to the most approved methods. By L. J. VON BIERKOWSKY. Translated from the German. In two volumes, and 570 drawings on 58 folio plates.

EXTRACTS FROM THE PROSPECTUS.

"Encouraged by the approbation of the Medical Profession, it is proposed to publish a work under the present title."

"This work contains 570 drawings, on 58 plates folio; to which is annexed, in two volumes 8vo. a concise explanation of each surgical operation. The plates exhibit not only the parts interested in operations, in their natural position and size, but, what is much more important, represent the different acts or stages of the whole operation, while others exhibit delineations of such morbid affections as consist in the change of the natural position, structure, color, &c. In order to afford the work at a moderate price, the plates will be Lithographic; and for the purpose of securing perfect accuracy, engagements have been entered into for their preparation in Berlin, under the especial direction of two of the most distinguished Professors of the University of that city."

A specimen of the translation, and the plates, is deposited for inspection at the Bookstore of CARTER & HENDEE, who receive subscriptions for the work.

Subscribers will be furnished with the work, and the first impressions of the plates, at the price of \$30.

The subscription list will be open until the 1st of November, 1829, after which period the price of the work will be raised to \$40.

P. S. For the accommodation of subscribers the work will be issued in five Numbers, at \$6 each, payable on delivery. Sept. 29. 1S202N1D.

LEECHES, CHIRAYITA HERB,
&c.

EBENEZER WIGHT, 46 Milk Street, has made such arrangements as will enable him to be constantly supplied with the genuine *Medicinal Leech*. He has now on hand some of very large size, and in prime order.

Just received, by late arrivals, a few pounds of *Chirayita Herb*,—Concentrated Compound *Decoction of Sarsaparilla*,—

Laurel Water,—Silver Wire Tooth Brushes, from the manufactory of James Prout, of London.

Also, from the manufactory of Shepherd, of London, the following variety of *Medicated Lozenges*, viz.:—Coltsfoot—Rhubarb—Soda—Tolu—Heartburn—Paregoric—Magnesia—Steel—Camomile—Nitric—Cayenne—Opium—Fruit—Ginger—Aniseed—Ipecacuanha—Lemon—Rose—Peppermint and Sulphur.

** Strict personal attention paid to Physicians' prescriptions, and family medicines. Oct. 6. eop.

CARTER & HENDEE have just published,—The Constitution of Man, considered in Relation to External Objects. By GEORGE COMBE.

From the Preface to the American edition.

"Mr. Combe's work should be placed with those, of which so many within a few years have appeared, which are devoted to the all-absorbing topic of Education. It treats of moral, intellectual, and physical education. This is not formally done under so many distinct heads. But the whole course of reasoning of the author, and the whole array of all his illustrations, have it always obviously in view to show how the highest cultivation of each of these may be most surely brought about.

"The publishers have printed this edition from a belief that there is much in the work to interest the community.

"It has a novelty to reward the general inquirer, and it presents the well known under novel aspects. There is one class amongst us who may study it with much advantage. Scholars are referred to, a class here too small to form a distinct order with habits of their own, and who insensibly fall into those which, although not mischievous, to the multitude on the score of health, too often make ill health the portion of the sedentary student, and bring upon him premature decay.—To all classes it is recommended, and the various learning and acuteness of the author well fit him to write a book which addresses its instructions to the whole community." Sept. 8.

A TREATISE on the Scrofulous Disease, by C. G. HUFELAND, Physician to the King of Prussia, &c., translated from the French of M. Bousquet, by Charles D. Meigs, M.D., is just received and for sale by CARTER & HENDEE.

Sept. 8.

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

I.

SOME ACCOUNT OF THE FIRE KING
AND HIS CHALLENGER.

Under the head of RESISTANCE TO POISON, our readers have already been apprised of the exploits of M. Chabert. They are of such character as to require very strong evidence that there is no deception used by their performer, before gaining our full credit. But the fact once established, that any person is in possession of a perfect antidote to so virulent a poison as Phosphorus, these feats assume an importance in a scientific point of view, and should awaken a spirit of investigation as to its true nature. The following account, published in Bell's Weekly Messenger, affords the best evidence yet exhibited of the existence of such an antidote. We contemplated an abstract of this paper, but found it impossible to give such details as the nature of evidence requires, without reprinting the whole history. It will at least be found interesting,—we confess it is in a measure convincing.

AN advertisement appeared a few days ago, in which a Mr. J. Smith, after insinuating that M. Chabert, the fire king, practised some juggle when he appeared to enter into an oven heated 500 degrees, and to swallow 20 grains of phosphorus, challenged him for any sum which

he might please to mention, to perform the exploits which he professed to be performing daily. To this challenge was added an explicit "pledge," given "upon the honor" of Mr. Smith, that if M. Chabert "fairly accomplished such an undertaking, he would likewise do the same." The Fire King, in consequence, publicly accepted Mr. J. Smith's challenge for £50, requesting him to provide the poisons himself, and offering, with true chivalric courtesy, to allow him the same conveniences which he used himself whilst he remained in the oven. Mr. J. Smith, in his rejoinder to M. Chabert, informed him that he would meet him in the Argyll Rooms, at his ordinary hour of performance, and would then "enter the oven with him, and perform his other feats." Wednesday was mutually fixed upon as the day on which the two contracting parties to this extraordinary challenge, were to try their merits by the ordeal of fire, and on which they were to submit their powers of resisting poison to the test of experiment. Accordingly, at two o'clock, the hour appointed for the combat, a number of gentlemen were attracted to the arena in which it was to take place; and as they entered, care was taken to inform them that the money had been regularly posted, and that Mr. Smith was ready to "come to the scratch." At a little be-

fore three o'clock, the Fire King made his appearance near his oven, and as some impatience had been exhibited owing to the non-arrival of Mr. J. Smith, he offered to amuse the company with a few trifling experiments, which he said any of them might perform with the greatest ease.—He then made a shovel red hot, and rubbed it over his tongue,—a trick for which no credit, he said, was due, as the moisture of the tongue was sufficient to prevent any injury arising from it. He next rubbed it over his hair and face, declaring that any body might perform the same feat by washing themselves in a mixture of spirits of sulphur and of alum, which, by cauterizing the epidermis, hardened the skin to resist the fire. He then put his hands into some melted lead, took a small portion of it out, placed it in his mouth, and then gave it in a solid state to some of the company. This performance, according to his account, was also very easy; for he seized only a very small particle, which, by a tight compression between the finger and thumb, became cool before it reached the mouth. By the time that these "little tricks," as he called them, were performed, another call was made for Mr. Smith's appearance. The Fire King looked around the room, and seeing the bashful countenance of his challenger in one corner of it, called him from his retirement, and pointed him out to the notice of the audience. The challenger being on the ground, the time for trifling was now over, and M. Chabert forthwith prepared himself for mightier undertakings.—A cruise of oil was brought forward and poured into a saucepan, which was previously turned upside down, to

show that there was no water in it. The alleged reason for this step was, that vulgar conjurors, who profess to drink boiling oil, place the oil in water, and drink it when the water boils, at which time the oil is not warmer than an ordinary cup of tea. He intended to drink the oil when any person might see it bubbling in the saucepan, and when the thermometer would prove that it was heated to 360 degrees. The saucepan was accordingly placed upon the fire, and as it was acquiring the requisite heat, the Fire King challenged any man living to drink a spoonful of the oil at the same temperature as that at which he was going to drink it. In a few minutes afterwards, he sipped off a spoonful with the greatest apparent ease, although the spoon, from contact with the boiling fluid, had become too hot for ordinary fingers to handle. "And now, Monsieur Smith," said the Fire King, "now for your challenge. Have you prepared yourself with phosphorus, or will you take some of mine, which is laid on that table?"

Mr. Smith, who is a thick-set man, of middle size, walked up to the table, and pulling a phial out of his pocket, offered it to the poison-swallower.

The Fire King.—I ask you, on your honor as a gentleman, is this genuine unmixed poison?

Mr. Smith.—It is, upon my honor.

A person in the room requested that Dr. Gordon Smith, one of the Medical Professors in the London University, would examine the phial, and decide whether it contained genuine phosphorus. The learned Professor went to the table,—on which a formidable collection of poisons, such as red and

white arsenic, hydrocyanic acid, morphine, and phosphorus, were placed,—and examining the phial, exclaimed that, to the best of his judgment, it was genuine phosphorus. This did not content several gentlemen in the room: they desired to see whether it would ignite by friction. The experiment was made, and a small piece soon set the paper in which it was wrapped into a flame. The same experiment had been tried on the Fire King's own phosphorus; and if they may judge from the volume of flame which it sent forth, his phosphorus was stronger than that provided by Mr. Smith. The reality of the poison being thus ascertained, M. Chabert asked Mr. Smith, with great politeness, how many grains he wished to commence his first with.

Mr. Smith.—Twenty grains will do as a commencement.

M. Chabert.—Ah, my good Sir, it is a very small dose; I shall not object to take a pound or two,—will you weigh the quantity yourself?

Mr. Smith declined.

A medical gentleman then came forward, and cut off two parcels of phosphorus, containing twenty grains each. He was placing them in the water, when the Fire King requested that his phosphorus might be cut into small pieces, as he did not wish the pieces to stop on their road to the stomach.

The poisons were now prepared. A wineglass contained the portion set aside for the Fire King,—a tumbler the portion reserved for Mr. Smith. It would be difficult to say whether the challenger or the challenged at this moment showed the greatest composure. This may be safely said,—they were at this moment the two least agitated persons in the room.

The Fire King.—I suppose,

gentlemen, I must begin. Well, then, to convince you that I do not juggle, I will first of all take off my coat, and then, as another precaution, I will trouble you, Doctor (speaking to Dr. Gordon Smith), to tie my hands together behind me.

After he had been bandaged in this manner, he planted himself on one knee in the centre of the room, and requested some gentleman to place the phosphorus on his tongue, and pour the water down his throat. This was accordingly done, and the water and the phosphorus were swallowed together. He then opened his mouth, and requested the company to look whether any portion of the phosphorus remained in his mouth. Several gentlemen examined his mouth, and declared that there was no phosphorus perceptible, either upon or under his tongue. He was then, by his own desire, unbandaged. The Fire King then turned to Mr. Smith, and offered him the other glass of phosphorus, with a ceremonious politeness which was highly entertaining. “And now, my good Sir, I shall have great pleasure in seeing you take off your glass too.”

Mr. Smith started back in infinite alarm;—“Not for worlds, Sir, not for worlds; I beg to decline it.”

The Fire King.—Eh! mon Dieu! you decline it! Oh! dear Sir; no, no; you drink von little glass to oblige the company.

Mr. Smith.—The company must excuse me. I don't often drink in a morning, and least of all such ardent spirit as phosphorus.

The Fire King.—Then why did you send me a challenge? You have pledged your honor to drink it if I did. I have done it; and if you are a gentleman, you must drink it too.

Mr. Smith.—No, no; I must

be excused: I am quite satisfied without it.

Here several voices exclaimed that the bet was lost. Some said that there must be a confederacy between the challenger and the challenged, and others asked whether any money had been deposited.

The Fire King called a Mr. White forward, who deposed that he held the stakes, which had been regularly placed in his hands by both parties, before twelve o'clock that morning.

The Fire King here asked Mr. Smith if he intended to go into the oven with him?

Mr. Smith replied that he could answer that question better after he saw the Fire King come out.

The Fire King.—But my good Sir, that makes no matter, for you have lost your bet already, if you do not swallow the phosphorus. Are you satisfied on that head?

Mr. Smith admitted that he was.

The Fire King here turned round with great exultation to the company, and pulling a bottle out of his pocket, exclaimed with great good feeling, "I did never see the gentleman before this morning, and I did not know but that he might be bold enough to venture to take this quantity of poison. I was determined not to let him lose his life by his foolish wager, and therefore I did bring an antidote in my pocket, which would have prevented him from suffering any harm. *Le voila!* Ah, ah, my good Sir, you pay your £50 to see me take the phosphorus. Now you shall take three or four grains yourself. I will give you von little wineglass out of this bottle, and you shall be as well in a few minutes as you are now. Do, Sir, oblige me by taking a few grains."

Mr. Smith begged to be excused.

His object was answered in seeing 20 grains of genuine phosphorus actually swallowed. He had conceived it impossible, as three grains were quite sufficient to destroy life.

The Fire King then addressed the gentleman who had meted out the phosphorus. "Perhaps you, Sir, will have the goodness to swallow a little bit to amuse me. I pledge you £1000,—I pledge you my life, that if you take a little of this bottle, it will not do you any harm.

The gentleman turned pale with affright. "I must beg to decline your polite invitation," he stammered out at last, "for in case of accident, I am afraid the pledge of your life would not keep my wife and family."

The Fire King.—Now, gentlemen, I will prove to you by another little experiment, that I have no phosphorus in my mouth. *Attendez un peu.* Put me a small piece of phosphorus on a knife point, and bring me a candle.

A candle was brought him, and he lighted it with the phosphorus. Part of the phosphorus fell on the ground, and was extinguished after some trouble.

The Fire King.—Ah, Mr. Smith, you are very good to me. You bring me the very good phosphorus; I am much obliged to you, Sir. Now give me a torch and a fork.

They were given to him accordingly. He took a small piece of the burning torch on his fork, put it into his mouth and swallowed it. "And now, gentlemen, I have done with the poison for to-day." Having said this, he withdrew into another room, for the professed purpose of putting on his usual dress for entering the oven, but in all probability for the real purpose of

getting the phosphorus, by some antidote, from his stomach. Zinc is the usual antidote for phosphorus; but he says that it is not the antidote which he uses, and declines to mention what is. We were informed that some eminent physicians asked him, a few days ago, if he would have any objection to have the poison taken off his stomach by the stomach pump; and that he replied that he should have no objection, provided that, in analyzing the contents of his stomach, they would be satisfied with ascertaining the existence of the poison, and would not seek to ascertain the nature of his antidote, which was so simple in its nature, that when it was once known, every apothecary's boy could provide it. He has repeatedly taken all the different poisons which were placed upon his teeth. On one occasion, when he was exhibiting before the Duke of Norfolk, he took a teaspoonful of prussic acid; but that experiment he says he never will repeat again; for it is a poison which not only requires the antidote to be taken first, but it is also so rapid in its operation, that it may destroy life before the antidote can produce its effect. He said that he should never forget the feelings which came over him as soon as he had swallowed it;—every vein in his head appeared to swell, and "each particular hair," he said, "stood erect, like quills upon the porcupine."

Immediately after Mr. Smith had declined to take the phosphorus, several gentlemen surrounded him, desiring to know why he had inserted such advertisements as he had done in the public papers, if he had no intention to perform the feats to which he had

dared the Fire King. To this he replied, that his object had been to ascertain beyond all doubt, whether it was possible for any person to take such a mass of poison, and live,—that he should not have risked such a sum of money of his own, on such a challenge as that which he had given; but that he was acting as the representative of a number of scientific gentlemen, who had subscribed such a sum as would enable him, if his challenge were accepted, to insist upon furnishing the poison himself, and upon seeing every step taken by the Fire King before and while he swallowed it. He stated that he was now perfectly convinced that the phosphorus was actually swallowed. He likewise protested that there had been no collusion between him and the Fire King. This protestation was subsequently repeated by the Fire King himself, who added, in confirmation of it, that he could have no interest in drawing a large concourse of people to his room. He was paid a certain sum per week by Mr. Welsh, and whether there was one person in the room, or whether there was 20,000, was to him, as far as his own emolument was concerned, perfectly immaterial. M. Chabert stated, that after the pledge which Mr. Smith had given the public in his advertisement, he fully expected to have been put to a fair trial of his powers in the course of the day, and that he had in consequence made preparations and alterations in his course of action, which one way or another would cost him upwards of £20.

After an absence of twenty minutes, M. Chabert returned, dressed in a coarse woollen coat,

to enter the heated oven. Before he entered it, a medical gentleman ascertained that his pulse was vibrating 98 times in a minute. He remained in the oven for five minutes, during which time he sung "Le Vaillant Troubadour," and superintended the cooking of two dishes of beef-steaks. At the end of that time he came out, perspiring profusely, and with a pulse making 168 vibrations in a minute. The thermometer, when brought out of the oven, stood at 380 degrees; within the oven, he said it was about 600. He had never been exposed to such intense heat before. After performing this feat, which was the last exhibition of his powers, he remained on the steps leading to his oven for some time, conversing with the company. In the course of his remarks, he observed, that before he left England he should have a benefit in the room for himself, when he would astonish the world by performing something still more extraordinary than anything which he has yet done.

II.

CANCER OF THE STOMACH.

Some account of the progress and fatal termination of a case of Cancer of the Stomach, is given in the Provincial Gazette, by Charles Mayo, the distinguished Surgeon of the Winchester Hospital. The following sketch of this case is given in a London Journal.

A CATHOLIC priest, sixty-two years of age, of plethoric frame and sedentary habits, had long been subject to dyspepsia, with constipation; to which were add-

ed rheumatic pains of the limbs, and a "harshness" in the throat, with a relaxed state of the velum pendulum palati. He had much languor, and considerable dyspnoea. His pulse was 60, full and regular. These symptoms continued to increase during the summer, notwithstanding the use of various remedies, such as full bleeding, aperients, squill, astringent gargles, &c. At the end of July he went to France, where he remained for a month, and during this time recruited very much, recovering his appetite, as it appears "that the French cookery was more agreeable to his stomach." On his return he visited London, and took the benefit of Dr. Armstrong's advice, who prescribed the solution of chlorine, in doses of from 40 to 60 drops three times a day, the bowels being kept open by equal parts of blue pill and colocynth. He also directed a small quantity of blood to be taken from the arm occasionally.

No benefit having been derived from these means, the muriated tincture of iron was exhibited Oct. 11th, and afterwards, Nov. 13th, the Mist. Ferri Comp., which last he continued to take till the middle of January, together with Mx. of the black drop at night. Under this treatment he recovered so far as to give sanguine expectations of his restoration to health; but about the middle of February the loss of appetite and nausea returned, and on one occasion he vomited a large quantity of a brownish fluid, with an acid, offensive taste. An emetic, which was administered, produced no evacuation of any moment. He was now directed to take sulphate of quina, in doses

of two grains, three times a day, which he did without benefit.

He became extremely weak, and complained much of pain in his throat and the back part of his neck. He vomited, March 15th, nearly a wash-hand basin full of dark offensive matter, like the former; and this symptom afterwards returned several times, his food being frequently rejected. "He had been frequently examined by pressure on the epigastrium and hypochondria, with a view to detect some suspected disease in the abdominal viscera, but without success. I now discovered a large pulsating tumor beneath, and a little to the left of, the ensiform cartilage, and pointed it out to Dr. Crawford and Mr. Lyford, who had been added to us in consultation. Various ideas suggested themselves to us as to the nature of the tumor, such as aneurism of the aorta, diseased liver, pancreas, &c., and we were inclined to suppose it might have some sort of cyst attached to it, and communicating with the stomach, as the source of the offensive fluid thrown up by vomiting. Pressure on the swelling gave little or no pain, neither did he suffer any at other times, except from the violence of the vomiting.

From this time he continued progressively to sink, and died April 9th. The following appearances presented themselves on dissection, which took place the day of his decease:—

"At five this afternoon, I proceeded to lay open the cavities of the thorax and abdomen, assisted by Mr. Lyford and Dr. Crawford. The integuments were thick with fat; the omentum, spread over the intestines, was

quite loaded with it, and, on raising the sternum, we found the mediastinum and pericardium were equally burthened with fat; the stomach was large and distended with air; the tumor was readily felt, but it was so enveloped with the fat of the great and lesser omentum, as to render it impossible to ascertain the nature of it till these were removed; it was then clearly seen to be connected with the pyloric extremity of the stomach, and, on removing this viscus and laying it open, we found a carcinomatous enlargement of the pylorus, equal in size to a pint jug, loaded with fat externally, and presenting an ulcerated surface internally, with a highly vascular fungus protruding from it, of a brain-like consistence: on making a section of the tumor, it exhibited a complete scirrhous texture, and, from its density and thickness, must have weighed nearly two pounds. A few ounces of the black fluid were contained in the stomach, and no doubt the ulcerated surface of the scirrhous must have been the source of this morbid secretion: the pulsatory motion of the tumor was of course communicated by the aorta, upon which it rested. The heart was fat, but its muscular structure thin and soft, so that it appeared smaller than the general bulk of the body would have led one to suspect; the aorta, on the contrary, seemed larger than natural, but on splitting it down with scissors, the only morbid appearance was the large size of the cæliac artery branching from it, and, around its origin, a deposit of bony matter. Probably the great size of this vessel, from whose branches the diseased mass must have

been supplied, may account, in some measure, for the profuse secretion which seems to have been constantly poured into the stomach from the ulcerated and fungous surface; sanguineous exudation and sloughs broken down, had probably imparted the dark color and offensive odor to the ejected fluid: a considerable slough was drawn out from the orifice of the pylorus, through which the finger readily passed into the duodenum. The liver was studded with white tubercles, about the size of a hazel-nut, both on the surface and within its substance; the peritoneal surface of the diaphragm, contiguous to the liver and the tumor, was quite rough with minute granular tubercles. The bowels were nearly empty. The kidneys were healthy, but covered with an immense accumulation of fat, which extended down the loins into the pelvis, and across to the mesentery, rendering it unusually thick.

“Mr. W. had retained his usual appearance of obesity till within the last month or six weeks, but since the frequent vomiting came on, he became rapidly emaciated. From these circumstances, we may perhaps conclude that the scirrhus became ulcerated at this period, and that its fatal progress was much accelerated by frequent excitement in the act of vomiting. It may perhaps be worth while to observe, that Mr. W. was of a florid complexion, and that his mother died of cancer in the breast,—from which circumstance he always apprehended himself to have an hereditary tendency to that disease; and it may be curious to speculate, whether the rigid observance of the discipline of his religion may

not have had some tendency to determine the morbid action to the stomach.”

III.

ON PRESSURE AS A SURGICAL REMEDY.

By Mr. W. J. WICKHAM, Surgeon to the Winchester Hospital.

MR. WICKHAM considers the action of pressure under three distinct heads;—first, as a means of suppressing hemorrhage, and causing a temporary interruption of the circulation; secondly, as producing absorption; thirdly, as an adjuvant to other remedies in giving support to parts which require it.

“Pressure may be resorted to in the most desperate cases of hemorrhage from a large branch of an artery or trunk, but the benefit to be derived from it will entirely depend on the manner in which it is applied. The proper exertion of compression in this case, implies a correct knowledge of the course of the vessel which requires it, the selection of the most desirable spot on which it is to be used, and the fulfilment of that object alone, without injury to other parts. For the want of a correct knowledge of the course of the femoral artery, I have witnessed serious hemorrhage during amputation, the circular pressure being applied with the greatest degree of force which the screw would allow of, but the compress which should have been applied over the artery, being placed away from its course.

“Within these few days, a case of wound of the posterior tibial artery, near the malleolus, was brought into our hospital.

The patient had sustained very copious discharges of blood, and I think he could not have borne another jet from the vessel. The tourniquet had been applied over the posterior tibial artery above the wound, instead of the femoral, and but very inefficient pressure had been made on the bleeding wound. By this, though the blood did not issue from the upper extremity of the artery, yet the anastomosis afforded a large supply, by which the lower end bled to a very great amount. I immediately placed ligatures on both ends of the artery, and secured it from further bleeding. Here, then, the tourniquet had been misapplied, and rendered inoperative on the bleeding artery; and the parts about the wound had been bruised and injured, by an effectual compression of ten days, during which time hemorrhage was, from time to time, going on, being only arrested by the occasional formation of a coagulum, and returning whenever it was removed. The objects to be obtained in securing the bleeding vessel are, 1st, to close the orifice from which the blood issues, and secondly, so to suppress the force of circulation in the vessel, as to prevent the removal of coagulum which forms around it. In all cases it is most desirable to put ligatures on an artery, if it can be discovered at the wound; but in failure of this, which frequently happens, from the many difficulties occurring at these times,—difficulties which are known only to those who have experienced them,—the firm compression of the vessel may be resorted to. The part from which the blood flows should be covered with a firm compress, just large

enough to prevent the further escape of blood, and be pressed against the most resisting part; i. e., the nearest bone. Upon this, larger compresses should be applied, so as to press the greatest force on the bleeding part, which should be gradually increased as the surrounding parts recede from the wound. Over this a bandage is to be applied, rolled lightly from the lower extremity of the limb, and, gradually increasing its tightness as it approaches the wound, is to be carried on some way above it. In addition to this, it is well to apply a tourniquet on the main vessel for a few hours, which lessens the force of pulsation at the wound, and aids the formation of the coagulum.

“In the lower extremity, the anterior tibial artery may be compressed without fear throughout its whole course; also the posterior tibial, as high as the middle of the leg; but I think its calibre is too large, higher, to be treated by compression only. In the upper extremity, I would not confide in pressure higher than the brachial artery at the bend of the elbow.*

“I have several times observed very serious effects, the consequence of ill-directed pressure, for the suppression of hemorrhage from the temporal artery, where it has been opened in the common way of taking blood from that vessel. The cases have been of this nature;—after opening the temporal artery, and abstracting the desired quantity of blood, a compress, much larger than the wound, has been placed over it,

* See the excellent observations by Mr. Smith, of Bristol, on the wound of that vessel, at the bend of the elbow.

which for a time has succeeded in stopping the bleeding. After a few hours, perhaps, on exertion, or from some other cause, hemorrhage has come on, and instead of making a more immediate pressure on the vessel, the same compress has been continued, and the bandage tightened to a great degree. This has also for a time answered the purpose, but on its becoming in the least loosened, bleeding has recurred, and in this way a large quantity of blood has been lost at different times, the pressure having been applied to the surrounding parts rather than to the wounded artery. The parts, by this, have suffered so much injury from the compression, that inflammation of an erysipelatous character has supervened, which has sometimes terminated fatally.

“Large veins are occasionally wounded, and furnish a very considerable quantity of blood, which may be suppressed by the application of forcible and well-exerted pressure.

“It will be considered that the veins are not so liable to secondary hemorrhage as the arteries, whose pulsation is apt to force off the coagulum which may be formed; they therefore will be more readily and completely secured by compression. In addition to this, where veins are wounded, it will be borne in mind, that pressure should be adopted, in preference, where it can be confided in, to ligature, from the dangerous consequences which often attend on the latter.”

With regard to the second application of pressure,—namely, for the purpose of causing the absorption of newly deposited or diseased parts, it is necessary to

keep in mind, that if the pressure be adopted to a certain extent only, the action of the arteries is increased, and instead of causing the removal of the part, an increase is the result; but if it be more firmly applied, so as to check arterial action, and impede the circulation through them, absorption must follow. “Pressure operates in this ratio;—in a slight degree, the arteries become stimulated, more blood is sent to the part, and deposit is the result; but if it be exerted to a greater degree, the bloodvessels are lessened in their calibres, and less blood circulates in the part: the absorbent vessels likewise, no doubt, in this case receive the stimulus, and become more active.”

The author proceeds to make some observations on the plan of treating cancer by pressure, as recommended by Mr. Young. The results of his experience are not favorable to the opinion that the disease can be thus removed; and this corresponds to the general inference which has been drawn by the profession. Mr. Wickham thus continues:—

“There is a species of ulcer, in the cure of which, pressure, if properly applied, has a very decided and satisfactory power,—I mean the ulcer with callous edges. The usual denomination used for this sore, is that of *indolent*. The consequence of this term being employed, without reference to the cause of the sluggishness, is, that the sore is treated by stimulating means, which only prolong, rather than expedite its cure. The state of the sore appears to me to be this: the surrounding parts are in a state of chronic inflammation; the weak-

ened, distended, and overcharged vessels, are constantly depositing fresh matter at the edges of the sore, by which a firm band is at last formed, so as effectually to prevent the further progress of these vessels towards the sore itself; the effect of which is, that the sore is ill supplied with blood, and absorption, that is, the ulcerative process, proceeds, without admitting of any check from stimuli. Pressure in this ulcer

operates by compressing the vessels of the surrounding parts which supply the callous edges with fresh matter: thus, by reducing them to an ordinate and healthy action, the further deposit is put a stop to, and the edges become absorbed; the vessels then find their way to the sore, which now assumes a state of health and activity, and by it the process of healing is ultimately completed." *Provincial Med. Gaz.*

SKETCHES OF PERIODICAL LITERATURE.

INTERMITTENT FEVER.

THE depletory mode of treating this disease, which has lately been much the subject of discussion, is strongly advocated by Dr. BELL, of Philadelphia, in a paper on the subject published in the *N. A. Journal*. Dr. B. recommends the use of the lancet both in the cold and the hot stage, and even during the intermission, provided pain in the head and tenderness of the epigastrium be present. For other remedies during the hot stage, he advises cold affusion or immersion, and the use of cool acid beverage.

Dr. B. condemns the use of bark during the intervals of fever, unless the apyrexia be perfect, and the patient free from gastric irritation. When this is the case, full doses of the bark may be given, and repeated at short intervals. If, however, the disease is found to retain its paroxysmal character, and the head and stomach are distressed, this medicine must be omitted, and recourse again had to the lancet. This treatment

of Dr. B. is certainly a very remarkable one. It is a most signal illustration of the extent to which a man's reasoning may carry him, in opposition to innumerable facts and protracted experience. Although this disease may sometimes yield to the abstraction of blood when that fluid is accumulated in the internal organs, it is, we apprehend, too late in the history of medicine for the profession to be told that the lancet in all stages, and even the intermission of this malady, is the appropriate remedy; or that the paroxysmal character is not the clearest possible indication for the use of bark.—Dr. B. is of opinion that no other tonic is likely to succeed in that state of the stomach in which the cinchona and quinine fail, and that the treatment with arsenic is very hazardous, and frequently followed by permanent injury to the system. Some of the most obstinate cases of relapse which Dr. B. met with, were those in which the disease had been checked by the use of the *min. solution*.

With regard to intestinal evacuations, the author is not disposed to estimate their value very high. An emetic is sometimes required at the onset of the disease, but not always, and one or two cathartics are all which are usually needed. The best articles for this last purpose are, senna, manna, and the supertartrate of potash. Epsom salts are also a useful purgative, and possess the advantage of acting within a short time,—a circumstance which is often of considerable importance.

DELIRIUM TREMENS.

THIS disease forms the subject of a paper in the October No. of the N. A. Journal. The views which are taken, both of the nature and treatment, correspond, for the most part, with those of Dr. Coates, as expressed about two years since in the same journal. The author considers it a disease of debility, and condemns general bleeding in strong terms. The treatment suggested, consists in the exhibition of cathartic medicines, so as to produce free alvine evacuations; and subsequently of opium, until sleep is obtained. Dr. Coates advanced the assertion, that opium had never been known to produce any dangerous consequence. A case is cited by this author, which forms a striking and important exception to this remark.—A patient was ordered twenty drops of the acetum opii, every hour. He took it constantly for three days, when it produced stupor and a state resembling apoplexy. In this case, had sleep supervened at any hour of the seventy-two during which the narcotic

was administered, it would doubtless have been attributed to its influence. Yet the question might naturally have suggested itself, whether this was anything more than the spontaneous termination of the disease, without reference to the remedy. It is a fact well worthy of consideration, that where opium is given to produce sleep in delirium tremens, this effect is rarely found to supervene on the first doses, however considerable; yet it will usually happen, if the medicine be persevered in, although the doses be not much increased. That in most cases the sleep is owing to the opium taken, there is no doubt; but in some we are inclined to suspect, that it occurs when the morbid action has spent itself, without having been at all induced by the treatment. We have heard of cases of this disease left entirely to nature, which terminated favorably; and we know there are practitioners who treat it wholly without narcotics, and consider themselves very successful. In our own practice we have usually adopted Dr. Coates's system, and for the most part with fortunate results.

CRUSTA LACTEA.

It has generally been considered that Crusta Lactea is connected with dentition, and that it occurs about the time when that process commences. A writer in the N. A. Journal,—Dr. Mitchell, of Frankford, Pa.,—considers this opinion to be founded in error. He gives the particulars of a case which occurred in his own family, commencing when the child was three months old, and

continuing for five months. It seemed to be occasioned by the diet of the parent, who had confined herself almost exclusively to animal food. This idea was confirmed by noticing that when the child was permitted to suck and swallow the juice of meat, the disease was always aggravated. Various remedies, both external and internal, were employed without advantage. The greatest benefit was derived from the exhibition of calomel and chalk, and from the external use of the following ointment:—

R. Adip. Ss.
 Subm. Hyd. āā ss.
 Sulphur Sub.
 Lap. Cal. āā ʒi. M.

This plan of treatment appeared to contribute essentially to the cure.

RHEUMATISM CURED BY ACETATE OF MORPHIA APPLIED TO A BLISTERED SURFACE.

A FRENCH Journal, *La Clinique*, contains a history of two cases of rheumatism successfully treated by this endermic practice. The first occurred in an individual of advanced age and robust frame, who had been subject to the chronic form of the disease for twenty years, complicated of late with some obscure disease of the spine. Occasional pain and sudden loss of power in the left leg, with other indications of paralysis, led to the employment of strychnia, which was relieving the disease, when, learning that it was a powerful remedy, he declined using any more. On the 2d of July, violent pain and convulsion of the limb came on. His physician, by means of ammonia, procured in ten minutes

a blistered surface, about twice the size of a dollar, on the outside of the thigh, and applied to it half a grain of acetate of morphia. Failing to give relief, in fifteen minutes a second like application was made on the inner side of the knee, and a third succeeded in entirely relieving the pain. A little drowsiness and vertigo followed, which soon disappeared.

The second was a case of acute rheumatism, in which two applications like the above were made to the thigh. The pain, which was excruciating, was permanently relieved, although in other respects the disease pursued its regular course.

SUBCARBONATE OF IRON IN CHRONIC RHEUMATISM.

DR. BELCOMBE has given notice to the profession, in the *English Journals*, that he has for the last five years been in the habit of treating Chronic Rheumatism with Carbonate of Iron, and generally with good success. This he supposes may be attributed to the alliance of this disease with Neuralgia. Dr. Scudamore makes mention of this medicine, but gives no remark respecting its use. With this exception, it is a remedy new, we believe, with Dr. Belcombe.

DROPSY.

DR. BRIGHT, in his medical reports recently published in London, advances the opinion, that a considerable proportion of the cases of dropsy which are met with in practice, have their origin in organic derangement of the kidneys. This idea is con-

firmed by Dr. Christison, of Edinburgh, who has found the kidneys diseased in all the cases of death from dropsy which he has had opportunity to examine. Four cases of this kind, with the appearances on inspection, are given in a late No. of the Med. and Surg. Journal.

The structural changes discovered in these cases, differed considerably from each other, but in all they were amply sufficient to prove the existence during life of decided renal disease. Analysis of the urine, in all these cases, proved the urea to be deficient in quantity.

BOSTON, TUESDAY, NOVEMBER 17, 1829.

RETENTION OF A FÆTUS IN UTERO.

WE published, the week before last, a letter extracted from the London Medical Gazette, which contained the history of a case in which parturition took place *thirteen* calendar months after the period of conception. The author of that letter, Mr. CULLEN, a Surgeon in England, says that in the course of a long practice, he had neither seen nor heard of any similar case, nor had he met with any such in the course of his reading. This fact ought perhaps to call our attention more particularly to the history of a like phenomenon, communicated to the Editor of this Journal by Dr. Homæus, and published in the present volume, page 372. Such cases are important not only in a physiological and pathological point of view, but also, and more particularly, as connected with juridical medicine.

LECTURES IN BOSTON.

FEW forms of instruction are more inviting than public lectures. This sentiment is very generally entertained, we should judge, at the present day, since their number and va-

riety is annually increasing. The present season there are in progress in this city, courses of lectures on Anatomy and Surgery, on Midwifery and Medical Jurisprudence, on Materia Medica, on the Theory and Practice of Physic, and on Chemistry, at the Medical College. Full courses are also given on a variety of subjects of Science connected with the Arts, to the Members of the Mechanic Institute; others to the Society for the Diffusion of Useful Knowledge, and still others to the Mechanic Charitable Association. Besides, a course on Chemistry and Mineralogy is advertised by Dr. Webster,—on Entomology by Dr. Storer, and on Chemistry and Pharmacy by Dr. Gay. Book-keeping and other arts are also taught in this agreeable method; and the lectures generally are accessible for so small a fee, as to offer facilities for the acquisition of knowledge never before enjoyed in this place.

Solution of Camphor.—Dr. H. N. Preston, of Newton, recommends, in the last No. of the "Genius of Temperance," that a solution of Camphor in Lime-water be used in

families, instead of the common Spirits. His mode of dissolving this gum, is to pour six ounces of lime-water on two drachms of camphor, previously rubbed down with an equal weight of quick lime. After allowing it half an hour to settle, the clean solution to be decanted.

The Doctor is of opinion that the lime can in no case where camphor is used in families, interfere with its desired operation; and the advantages of this preparation over the spirituous are, that when mixed with water, the gum will not separate; it is more economical; and, most of all, it is one important step toward the desirable banishment of alcohol from medicinal preparations.—These are certainly very important objects; but we are not aware why the common Emulsion or Mixture of Camphor, which has long been in use and kept by all apothecaries, does not answer to the full all the purposes contemplated by this new preparation. The sweet almonds and sugar which enter into its composition, make it more palatable than the lime-water solution; and we should always be slow to adopt any new medicine in place of one which is well known and in common use, when the former offers no superior advantage. Physicians might well prescribe the Emulsion, in many cases where they are in the habit of directing the alcoholic solution.

Extraordinary Success.—A French writer recommends in high terms the oil of turpentine for the cure of lumbago and sciatica; and seriously gives, as proof of its value in these diseases, the remarkable fact, that

“out of seventy-one cases, he greatly relieved fifteen by its external and internal use.” Nothing surely will so soon or thoroughly deprive a man of his senses, as a hobby.

Case of Uncommon Growth.—This case is recorded by Dr. Bedor, in La Clinique. It occurred in a young man who had symptoms denoting organic disease of the heart, and who, in twenty-five days, increased in stature three inches. The patient died suddenly, a few days after he was seen by Dr. Bedor. He was scarcely nineteen years of age, and had attained the unusual growth of six feet three inches.

Fœtus affected with Fungous Hæmatodes.—Dr. Tonnele delivered a woman of a child, which had upon its right parietal bone an enormous fungous hæmatodes. The base of this tumor originated in the osseous tissue, and perforated it like a sieve; the dura mater was healthy.—*Journal des Progres.*

Bill of Mortality.—It will be noticed by our Bill of Mortality, that the number of deaths in the week has been but 10. This fact has been pretty extensively circulated in the newspapers. It appears, however, to be wholly incidental, since the number the week previous was 32,—very considerably more than the usual average.

NOTICE. Our subscribers are informed that Mr. BARNET PETERS, of Portland, is no longer Agent for the Medical and Surgical Journal.

WEEKLY REPORT OF DEATHS IN BOSTON, ENDING NOVEMBER 4.

Date.	Sex.	Age.	Disease.	Date.	Sex.	Age.	Disease.
Oct. 30.	M.	12mo	scrofula		M.	34 yrs	delirium tremens
Nov. 1.	M.	2 yrs	croup		M.	62	suicide
	F.	5	hooping cough		F.	84	old age
	F.	3	measles	3.	M.	48	consumption
	F.	14 mo	mortification in the bowels	4.	F.	4 mo	canker
Males, 5—Females, 5.				Total, 10.			

ADVERTISEMENTS.

ANATOMICO-SURGICAL DRAWINGS, and Descriptions of all the Surgical Operations, according to the most approved methods. By L. J. VON BIERKOWSKY. Translated from the German. In two volumes, and 570 drawings on 58 folio plates.

EXTRACTS FROM THE PROSPECTUS.

"Encouraged by the approbation of the Medical Profession, it is proposed to publish a work under the present title."

"This work contains 570 drawings, on 58 plates folio; to which is annexed, in two volumes 8vo. a concise explanation of each surgical operation. The plates exhibit not only the parts interested in operations, in their natural position and size, but, what is much more important, represent the different acts or stages of the whole operation, while others exhibit delineations of such morbid affections as consist in the change of the natural position, structure, color, &c. In order to afford the work at a moderate price, the plates will be Lithographic; and for the purpose of securing perfect accuracy, engagements have been entered into for their preparation in Berlin, under the especial direction of two of the most distinguished Professors of the University of that city."

A specimen of the translation, and the plates, is deposited for inspection at the Bookstore of CARTER & HENDEE, who receive subscriptions for the work.

Subscribers will be furnished with the work, and the first impressions of the plates, at the price of \$30.

The subscription list will be open until the 1st of November, 1829, after which period the price of the work will be raised to \$40.

P. S. For the accommodation of subscribers the work will be issued in five Numbers, at \$6 each, payable on delivery. Sept. 29. 18202N1D.

CONSOLIDATED COPAIVA.

"COPAIVA may be given in this form without the least inconvenience. Neither communicating taste, nor imparting odor to the breath, it is also retained without the least disquietude or uneasiness to the stomach; and I am informed by Dr. Rosseau, that in large doses it does not purge."—*Phil. Journal of Med. Sciences.*

See an article in this Journal, Aug. 18th.

EUROPEAN LEECHES.

An excellent lot of European Leeches, which will be sold at a reasonable price, or applied, in any part of Boston or in the vicinity.

For sale by NATHAN JARVIS, 188 Washington Street, where Physicians will find medicines at as reasonable terms as at any place in Boston.

Aug. 25.

eoptf.

CARTER & HENDEE have just published,—The Constitution of Man, considered in Relation to External Objects. By GEORGE COMBE.

From the Preface to the American edition.

"Mr. Combe's work should be placed with those, of which so many within a few years have appeared, which are devoted to the all-absorbing topic of Education. It treats of moral, intellectual, and physical education. This is not formally done under so many distinct heads. But the whole course of reasoning of the author, and the whole array of all his illustrations, have it always obviously in view to show how the highest cultivation of each of these may be most surely brought about.

"The publishers have printed this edition from a belief that there is much in the work to interest the community.

"It has a novelty to reward the general inquirer, and it presents the well known under novel aspects. There is one class amongst us who may study it with much advantage. Scholars are referred to, a class here too small to form a distinct order with habits of their own, and who insensibly fall into those which, although not mischievous, to the multitude on the score of health, too often make ill health the portion of the sedentary student, and bring upon him premature decay.—To all classes it is recommended, and the various learning and acuteness of the author well fit him to write a book which addresses its instructions to the whole community." Sept. 8.

A TREATISE on the Scrofulous Disease, by C. G. HUFELAND, Physician to the King of Prussia, &c., translated from the French of M. Bousquet, by Charles D. Meigs, M.D., is just received and for sale by CARTER & HENDEE.

Sept. 8.

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

I.

BIOGRAPHICAL SKETCH OF JOHN
HUNTER.

THE celebrated John Hunter, one of the greatest anatomists that ever lived, scarcely received any education whatever until he was twenty years old. He was born in the year 1728, in Lanarkshire; and being the youngest of a family of ten, and the child of his father's old age, would seem to have been brought up with the most foolish and unfortunate indulgence. When he was only ten years old his father died; and under the charge of his mother it is probable that he was left to act as he chose, with still less restraint than ever. Such was his aversion at this time to anything like regular application, that it was with no small difficulty, we are told, he had been taught even the elements of reading and writing; while an attempt that was made to give him some knowledge of Latin (according to the plan of education then almost universally followed in regard to the sons of even the smallest landed proprietors in Scotland), was, after a short space, abandoned altogether. Thus he grew up, spending his time merely in country amusements, and for many years without even thinking, as it would appear, of any profession by which he might earn a livelihood. It was, however, found necessary at last, that

something should be determined upon in regard to this point; for the family estate, such as it was, had gone to his eldest brother, and the father had made no provision for maintaining John any longer in idleness. So, destitute as he was of all literary acquirements, there was no other resource for him except some business that would give employment to his hands rather than his head; and one of his sisters having married a cabinet-maker, or carpenter, in Glasgow, it was resolved he should be bound apprentice to his brother-in-law. With this person, accordingly, he continued for some time, learning to make chairs and tables; and this probably might have been, for life, the employment of the genius that afterwards distinguished itself so greatly in one of the most important walks of philosophic discovery, but for circumstances which, at the time when they occurred, were doubtless deemed unfortunate. His master failed, and John was left without any obvious means of pursuing even the humble line of life on which he had set out. He was at this time in the twentieth year of his age. His elder brother, William, afterwards the celebrated Dr. Hunter, had very recently settled as a medical practitioner in London; but had already begun to distinguish himself as a lecturer and anatomical demonstrator. To him John determined to address

himself. The rumor of the one brother's success and growing reputation had probably, even before this time, awakened something of ambition in the other, with a wish to escape from the obscure fortune to which he seemed destined. John now wrote to his brother, offering him his services as an assistant in his dissecting-room, and intimating that if this proposal should not be accepted, he meant to enlist in the army. Fortunately for science, his letter was answered in the way he wished. On his brother's invitation, he set out for the metropolis. He was now put to work in the manner in which he had requested to be employed. His brother, we are informed by Sir Everard Home, his first and best biographer, gave him an arm to dissect, so as to display the muscles, with directions how it should be done; and the performance of the pupil, even in this his commencing essay, greatly exceeded the expectations of his instructor. The doctor then put into his hands another arm, in which all the arteries were injected, and these, as well as the muscles, were to be exposed and preserved. So satisfied was Dr. Hunter with his brother's performance of this task, that he assured him he would in time become an excellent anatomist, and would not want employment. Perhaps, although we do not find it so stated by any of his biographers, he may have felt an advantage, in making these preparations, in the habits of manual dexterity acquired during his apprenticeship to his first business.

So rapid, at all events, was the progress which he made in the study of anatomy, that he had not been a year in London when he was considered by his brother as quali-

fied to teach others, and was attended accordingly by a class of his own. His talents, and the patronage of his brother, brought him now every day more and more into notice. It does not belong to our purpose to trace the progress of his success after this point. We may merely remark, that long before his death he had placed himself, by universal acknowledgment, at the head of living anatomists; and was regarded, indeed, as having done more for surgery and physiology than any other investigator of these branches of science that had ever existed.

The important discoveries, and peculiar and most original views, by which John Hunter succeeded in throwing so much new light upon the subject of the functions of animal life, were derived, as is well known, principally from the extraordinary zeal, patience and ingenuity, with which he pursued the study of comparative anatomy, or the examination of the structure of the inferior animals as compared with that of man. To this study he devoted his time, his labor, and it may be said his fortune; for nearly every shilling that he could save from his professional gains was expended in collecting those foreign animals, and other rare specimens, by means of which he prosecuted his inquiries. When his income was yet far from being a large one, he purchased a piece of ground at Earls' Court, in the village of Brompton, and built a house on it to serve as a place of deposit for his collections. The space around it was laid out as a zoological garden for such of his strange animals as he kept alive. Even when most extensively engaged in practice, he used to spend every morning, from sun-rise till

eight o'clock, in his museum. Yet, in addition to his private practice, and a very long course of lectures which he delivered every winter, he had for many years to perform the laborious duties of Surgeon to St. George's Hospital, and deputy-surgeon-general to the army,—superintending at this time, also, a school of practical anatomy at his own house. Still he found leisure, in the midst of all these avocations, not only for his experiments upon the animal economy, but for the composition of various works of importance, and for taking an active part both in the deliberations of the Royal Society, of which he had been early elected a Fellow, and in other schemes for the promotion and diffusion of natural knowledge. He was the originator, in particular, of the *Lyceum Medicum Londinense*,—a medical society comprising many eminent individuals, which met at his lecture-rooms, and rose to great reputation. That he might have time for these multiplied objects of attention, he used to allow himself to sleep only four hours at night, and an hour after dinner.

In order to procure subjects for his researches in comparative anatomy, his practice was to apply to the keeper of the wild beasts in the Tower, and the proprietors of the other menageries in town, for the bodies of such of their animals as died, in consideration of which he used to give them other rare animals to exhibit, on condition of also receiving their remains at death. His friends and former pupils, too, were wont to send him, from every part of the world, subjects for his favorite investigations. "In this retreat (at Brompton), he had collected," says Sir Eve-

rard Home, "many kinds of animals and birds; and it was to him a favorite amusement, in his walks, to attend to their actions and their habits, and to make them familiar with him. The fiercer animals were those to which he was most partial, and he had several of the bull kind from different parts of the world. Among these was a beautiful small bull he had received from the Queen, with which he used to wrestle in play, and entertain himself with its exertions in its own defence. In one of these conflicts, the bull overpowered him and got him down; and had not one of the servants accidentally come by, and frightened the animal away, this frolic would probably have cost him his life." On another occasion, "two leopards," says the same biographer, "that were kept chained in an out-house, had broken from their confinement, and got into the yard among some dogs, which they immediately attacked. The howling this produced, alarmed the whole neighborhood. Mr. Hunter ran into the yard to see what was the matter, and found one of them getting up the wall to make his escape, the other surrounded by the dogs. He immediately laid hold of them both, and carried them back to their den; but as soon as they were secured, and he had time to reflect upon the risk of his own situation, he was so much affected that he was in danger of fainting."

Mr. Hunter died in the sixty-sixth year of his age, in 1793. After his death, his museum was purchased by parliament for the sum of fifteen thousand pounds; and it is now deposited in the hall belonging to the Royal College of Surgeons, in Lincoln's-Inn-Fields. It is understood to contain about

twenty thousand anatomical preparations, which are arranged so as (in the language of Sir Everard Home) "to expose to view the gradations of nature, from the most simple state in which life is found to exist, up to the most perfect and most complex of the animal creation,—man himself." The extreme beauty of these preparations is striking even to an unlearned eye; and their scientific value is such as to render the collection one of the most precious of the kind in the world. It is certainly one of the most splendid monuments of labor, skill and munificence, ever raised by an individual.

It is important to remark that, with all his powers, this wonderful man never entirely overcame the disadvantages entailed upon him by the neglect in which he had been allowed to spend his early years. He used to dwell, we are told, on the advantage which is gained in regard to clearness of conception, by the committing of one's ideas to writing, comparing the process to the taking of stock by a tradesman, without which he cannot know with certainty either what he has or what he wants. Yet he himself continued to the end of his life an awkward, though by no means an unpractised writer. After coming to London, he entered himself at St. Mary's Hall, Oxford, probably with the view of being able to maintain at least some pretension to scholarship, but it does not appear that he carried his assumption much farther. He attained little acquaintance with the literature even of his own profession; and it not unfrequently happened indeed, we are told, that upon communicating a supposed disco-

very of his own to some one of his more erudite friends, he had to suffer the disappointment of learning that the same thing had been already found out by some other well-known anatomist. But he felt his literary deficiencies chiefly as a lecturer, the capacity in which his more regularly educated brother excelled. It is asserted by Dr. Adams, who has written a life of John Hunter, that he always used to swallow thirty drops of laudanum before going to lecture. If these were heavy penalties, however, which he had to pay for what was not so much his fault as that of others, the eminence to which he attained in spite of them, is only the more demonstrative of his extraordinary natural powers, and his determined perseverance.—*Library of Entertaining Knowledge.*

II.

REMARKS ON THE USE OF SPIRIT OF TURPENTINE IN INCARCERATED HERNIA.

By C. B. HAMILTON, late Surgeon of the Marine Hospital at Washington City.

In the last number of this Journal, I have noticed a paper, by Professor Sewall, on the use of spirit of turpentine internally, as a remedy in incarcerated hernia. In his concluding paragraph the Professor observes, "It requires the experience derived from many cases, to entitle a new remedy to confidence;" and it may be added that a proper application of a remedy to those diseased conditions of the system, in which, from analogy and reason confirmed by experience, it is found to prove beneficial, is equally necessary to sustain that confidence when it is acquired.

I have for many years used the spirit of turpentine in incarcerated hernia, without being aware that it was a new remedy, and without its being in every instance successful; for in one case in which I employed it as a dernier resort, upon the patient's positively refusing to submit to an operation, no mitigation of the disease, but rather an aggravation of suffering, resulted from its exhibition. This was a case of omental inguinal hernia, and the patient died with all the symptoms of supervening mortification. That the hernial sac contained a portion of omentum only, I inferred from the bowels yielding to the operation of purgative medicine, which could not have been the case had a portion of the intestinal tube been shut up by the stricture: the stricture in this case was in the tendon forming the ring, and therefore beyond the immediate influence of a remedy applied to the stomach. Among the earlier recollections of my boyhood, is the use of the spirit of turpentine in spasmodic or flatulent colic; and a case that came under my observation when about ten years of age, served to fix its use in this disease indelibly on my memory. This was a case in which an uterine inflammation succeeding to concealed abortion, in the person of a servant girl, was mistaken by her mistress for colic, and the turpentine administered with the most melancholy effect.

Being called to a case, some years ago, of strangulated scrotal hernia, of but a few hours standing, which, from the great distension of the strangulated bowel by flatus and excrement, resisted all my efforts at reduction by taxis, I was naturally led to spe-

culate upon the cause of so great and sudden an accumulation in the gut. It struck me that if the occluding stricture existed in the abdominal ring, it must necessarily act alike upon the descending and ascending portions of the intestine, and that of course nothing could be derived to the incarcerated portion from that within the abdomen, to give it the volume it possessed. It therefore occurred to me that the descending portion of the tube was free, and that the distension was caused by a stricture taking place in the muscular fibres of the ascending portion, and arresting the passage of the contents of the bowels brought down by the peristaltic motion. Considering this state of things to differ in no particular from that which takes place in spasmodic colic, I at once resolved to make trial of the turpentine, the good effects of which I had so often witnessed in the latter disease, and it succeeded beyond my most sanguine anticipations. In a few moments the contents of the strangulated bowel were spontaneously removed, and the intestine restored to the abdominal cavity by taxis, with perfect ease.

About twelve months since, I was called to a colored man, the property of John Addison, Esq., of this district. On my arrival, I was informed by his master that he had been for many years afflicted with scrotal hernia; that he had been in the habit of reducing it himself; that a few hours before he had been seized with severe pain in the part, and that the rupture now resisted his usual efforts to reduce it. On examining the patient, I found the scrotum so enormously enlarged that no trace of a penis could be seen;

the integuments were cold to the touch, and the swelling elastic. The patient informed me that a short time before the attack of pain, he had eaten a quantity of unripe fruit, and ascribed his situation to that cause. Without making any attempt at reduction, I inquired if there was any spirit of turpentine in the house; and fortunately about the half of a common-sized wineglassful was produced, which I immediately administered. The relief was instantaneous; the spasm was removed; the air and fæces, by the elastic pressure of the intestine, was carried upwards with a gurgling sound into its continuous portion within the abdomen, and in five minutes after, the patient with his own hand reduced the rupture.

I have made these remarks for the purpose of directing the attention of practitioners to what I consider to be the only condition of the parts (which, by the way, might, I conceive, be properly termed a scrotal colic) in which the turpentine proves an invaluable remedy, and to express my opinion of the impropriety of administering it in those cases where the obstruction arises from a stricture of the tendon forming the abdominal ring, or from chronic enlargement of the incarcerated viscera.—*Amer. Journal of the Medical Sciences.*

III.

REMARKS ON THE EXCISION OF CARTILAGINO-BONY SUBSTANCES FROM THE KNEE JOINT, WITH A CASE.

By SAMUEL C. BRADBURY, M.D., of Bangor, Penobscot county, Maine.

IN his observations on the excision of cartilaginous substances from

the knee joint, after speaking of "the perilous symptoms sometimes following wounds of the knee joint," Mr. Samuel Cooper says, "Small as the chance is of losing the limb, and even life, in the attempt to get rid of the disease, since the inconveniences of the complaint are in most cases very bearable, and are even capable of palliation by means of a bandage, endangering the limb and life in any degree must seem to many persons contrary to the dictates of prudence." But the same surgeon says further, "If a man be deprived of his livelihood, by not being able to use his knee; if he cannot or will not take the trouble of wearing a bandage; if he be urgently desirous of running the risk of the operation, after things have been impartially explained to him; if a bandage should not be productive of sufficient relief; and lastly, *if excessive pain, severe inflammation of the joint, a great deal of symptomatic fever, and lameness, should frequently be produced by the complaint, I think it is the duty of the surgeon to operate.*"

Now it appears to me, these are the very circumstances under which the operation would most likely be followed by perilous symptoms. That cutting into a joint already much inflamed,* or, if I may use the expression, in a state tending to inflammation, with high symptomatic fever, and perhaps in a highly irritable or

* It appears to us that our correspondent has misapprehended Mr. Cooper, in supposing that he recommends the operation *during the existence of inflammation* in the joint; and we might adduce, in evidence of this, several observations from the same article in his *Surgical Dictionary*, quoted in the preceding paragraph.—
ED.

even tainted constitution, should be followed by still greater inflammation and danger, is what every surgeon might expect; and if the operation in question has sometimes "been followed by a violent inflammation, fever, and death itself," I think it may have been because it was performed on an improper subject, or at an improper time, or in consequence of improper treatment afterwards. It would seem that the most favorable circumstances for the operation, are a sound healthy constitution, and entire abstinence at the time of inflammation in the joint; and in this state of things, while the patient remains in a pure and healthy atmosphere, however dangerous or fatal the operation may have proved under opposite circumstances, or in crowded and tainted hospitals, I cannot believe the operation so hazardous as Mr. Cooper and others would have us believe; and I trust experience will prove that excision is the only sure and comparatively safe mode of relief, in cases such as the one I am about to describe. By delay, in tampering with knee-caps and bandages, in such cases, we every day endanger the production of the state of things above described by Mr. Cooper; a state at least as dangerous to the limb and life, as the operation, performed at a proper time on a suitable subject, can be; and a state which may forever preclude the reasonable hope of relief by the operation.

CASE.—Oliver Brooks, of Newport, a farmer, aged twenty-five, of robust constitution, consulted me on the 14th of July last, with two preternatural bodies in the

joint of the left knee. They were easily moved in different directions about the joint, and from one side of the patella to the other. The complaint was brought on about two years before by a severe strain, which laid him up for several weeks. At the time of consulting me, there was no inflammation or lameness of the joint, except when, in exercising the limb, these extraneous bodies came in certain positions of the joint. This he said would always happen on attempting to walk any considerable distance, and sometimes throw him down, as he expressed it, as suddenly as though he had been shot; causing severe pain and fainting at the time, and a degree of inflammation in the joint, which would occasionally confine him from his labor for several days.

I advised an operation, which was consented to, and which was performed in the following manner:—

The patient, sitting in the chair, with the limb extended and the heel on the floor, brought both the substances together, at the outer side of the articulation near the superior attachment of the capsular ligament, and assisted in confining them. Drawing the integuments a little towards the patella, I divided them, in a longitudinal direction, to the extent of an inch and a half, and then carefully made an incision through the capsular ligament, over the extraneous bodies, of a sufficient size for their exit. The wound was then accurately closed by adhesive plaster, compresses, and the uniting bandage. In two hours after the operation, a very severe pain came on in the knee joint, shooting up to the hip, which was

only relieved by large and repeated doses of laudanum and ether. In two or three hours more the pain entirely subsided, and never in any degree returned. The patient was kept in a horizontal position, with the limb constantly extended, for the first forty-eight hours. A strictly antiphlogistic regimen was enjoined, and as he had undergone no previous preparation, on the second day free evacuations from the bowels were procured by Epsom salt. No inflammation or fever followed the operation, the appetite remaining unimpaired, and sleep uninterrupted. On the third day, contrary to express directions, the patient walked on the limb for some distance, and in one week from the time of the operation resumed his usual labors, the joint being kept supported for some weeks with a large plaster of simple diachylon. The wound was but partially healed by the first intention; but soon healed entirely, and has since been perfectly well.

In this case the place of the incision was chosen, because the substances were not so easily brought together, or retained in any other position. The largest of these bodies was of a triangular shape, its longest side seven-eighths of an inch, and three or four lines in thickness; the outside cartilaginous and convex, the inside flat and bony.—*Ib.*

IV.

NECROSIS OF HALF THE LOWER JAW.

Extraction of the Sequestrum by M. Dupuytren.

THE phenomena of an incarcerated sequestrum does not belong

exclusively to the long bones.—A woman, 30 years of age, pale, fat, and eminently *lymphatic*, had experienced, during the last two years, slight and transient pains in the left side of the jaw, when about eight months ago these increased so much as to disturb her sleep. The teeth, which till then had been white, assumed a greyish color, and the breath became foetid. After a month of acute suffering, a fistula took place at the symphysis, within the base of the jaw; others soon showed themselves at various points nearer the angle, but always within the lower margin of the bone, and on the left side. One only formed to the right, about half an inch from the symphysis. The suppuration also burst into the interior of the mouth. The patient asserted that the pus only oozed from the gums; but the sequel proved that there was a true fistula internally. When she used a gargle, some of it always escaped by one of the four fistulae. It was six months since the mastication had become painful and almost impossible, and since the molares of the affected side became loose. At this time, also, the soft parts which cover the anterior maxillary foramen almost entirely lost their sensibility, which could only have arisen from the destruction of the nerve. Tonic remedies were employed without avail: the pains continued to increase in severity, and the suppuration to augment in quantity. The disease was recognised by M. Dubois, but he having found the sequestrum to be immoveable, advised the woman “to have patience.”

She came to the Hotel Dieu the beginning of August, at which

time it was difficult to recognise the dimensions of the new bone amid the swelling of the soft parts; but it was ascertained to be very solid, and to inclose the old bone in its cavity. A probe introduced at one of the fistulæ, gave the idea of a moveable body, and even caused a noise, which was audible at a certain distance.

On the 17th of August, the following operation was performed:—The patient's head being fixed by an assistant, M. Dupuytren laid the two posterior fistulæ into one, by an incision about an inch long; then cutting deeper, he opened, at its lower part, the bony cavity which contained the sequestrum. By means of the common pincers, he removed, not without some effort, a plate of bone, two inches long and one in breadth, and a line and a half thick. The forefinger introduced to the bottom of the wound, discovered another portion of bone, moveable and denuded, situated at the back part. The pincers were again applied, and extracted a triangular fragment, which proved to be the angle of the jaw. The finger of the operator traversed freely every part of the cavity, and felt the naked roots of the teeth;—those of the molares were loose, and M. Dupuytren debated with himself, whether, under such circumstances, they could live. The transplanting of teeth has so frequently succeeded, that it appears probable that in this case they will not perish, but recover their solidity by an approximation of the bone, from which they are now some lines distant. A *meche* was introduced into the wound, and the dressing completed with dry charpie.

From this time the matter only passed by the wound,—the mouth was no longer infested with it. A large opening existed between the cavity of the mouth and that of the new bone, and between this last and the exterior. This communication existed before; but the absence of the sequestrum now rendered it more pervious, so that the gargle readily escaped by the wound. After a few days the wound was not filled with the charpie, and it began to contract. The bony pouch contracted every day, if we may judge from the teeth becoming fixed, and from the quantity of fluid which passed from within outwards diminishing. The pain left her entirely.

Sept. 4th.—All the molares are now as fast as those of the opposite side.

6th.—M. Dupuytren has discovered, by means of a probe, that the other half of the jaw is also dead. He intends to operate on it when the sequestrum becomes mobile.—*Lancette Francaise*.

V.

A CASE OF EPILEPSY SUSPENDED BY A BURN ON THE SOLE OF THE FOOT.

Communicated for the Western Journal of the Medical and Physical Sciences, by Dr. H. E. GREEN, of Greensburgh, Ky.

ON the 5th of October, 1827, I was applied to for advice in a case of violent epileptic fits. The subject was a colored man and a slave, about 48 years old, and of steady habits. It was about three months since the first attack; but he had complained, for twelve or eighteen months previously, of tension, uneasiness and pain about

the umbilical region. He had all this time done the work of a common laborer. The convulsions came on, without any previous notice, at each full and change of the moon, and he would have from four to ten at each attack. When I first saw him, he was moderately corpulent, and looked healthy; he said, however, that he was in a very costive habit, and frequently went two or three days without an evacuation.

I bled him, and ordered it to be repeated every ten or twelve days for two months; inserted a large issue in the nape of his neck; directed the daily use of pills composed of aloes, ipecacuanha, and the blue mercurial mass, and prescribed a simple diet. This course was continued for three months, without any sensible variation in the disease. He then took three grains of the nitrate of silver daily, for two months, with no better success. He now fell into the hands of a *patent steam doctor*, by whose engine he was nearly destroyed.

At length all hope of relief was despaired of, when in the month of January, 1829, in a severe fit, alone, he fell into the fire and burnt severely the whole of the bottom of the left foot. *It did not get well for about four months, during the whole of which time he had no fits, but exhibited every indication of returning health and vigor. As soon, however, as it was healed, the fits returned.*

Profiting by the hint afforded by this accident, I have put an issue into each ankle, the effect of which remains to be ascertained.

VI.

AN ACCOUNT OF A SINGULAR CASE OF FETAL MONSTROSITY.

By Dr. JOHN COOK BENNET, of McConnelville, Ohio.

WHEN residing in Circleville, the following extraordinary case fell under my observation:—

A lady, in the sixth week of utero-gestation, was frightened in the street by the fighting of two dogs, one of which was mad. This was in the month of April. Immediately after the event, she was seized with uterine hemorrhage, which continued for twenty-four hours, and the same discharge returned, in a less degree, once a fortnight, till she suffered abortion in June. On the 30th of May, she was seized with a violent inflammation in the left eye, which returned for three successive days, and after an ineffectual resort to cupping and blistering, was cured by the loss of a quart of blood from the arm. On the 4th of June, the uterine hemorrhage returned. On the 5th, I was requested to visit her, and found that abortion was likely to take place, as tolerably strong uterine pains recurred every few minutes. I gave opium and laudanum freely, but the contractions of the uterus increased in violence; and in the evening, the liquor amnii was discharged. In half an hour after this occurrence, or about 8 o'clock, the arm of a fœtus presented, and soon afterwards delivery took place. The child was perfect, and weighed $3\frac{1}{2}$ ounces. The placenta was thrown off about 11 o'clock, and weighed half an ounce more than the fœtus.

At 7 o'clock next morning, another placenta was discharged, weighing 5 1-2 ounces, and brought

with it, attached by an umbilical cord, a monster, of rather less than its own weight, resembling the body and head of a puppy. It was destitute of extremities and sexual organs, but had an anus and meatus urinarius. Its head was composed of brains only, and in its outline was essentially canine. It had neither eyes, ears, nor mouth, but was marked with lines and spots indicating the situation of those organs. It was not subjected to dissection.

At 4 o'clock, on the same day, another monster, with its placenta, was thrown off. It weighed 6 1-2 ounces, and the placenta 6. It resembled the first in all respects, except that there was attached to its back a mass resembling liver, which extended, widening and thickening, from the neck to the sacrum. When detached, it weigh-

ed one ounce, which was also the weight of the head. I was permitted to make a hasty examination of the thoracic and abdominal organs of this monster; and found them all natural, except perhaps that the liver was larger than is common in a fœtus of such a size. It weighed two ounces. I could not obtain permission to preserve either of the monsters, or scarcely to examine them, so unpleasantly were the feelings of the patient and attendants affected by the phenomenon.

The patient before delivery appeared like one in the sixth month of gestation. Her recovery was rapid.

I am aware that the account which I have given will be read with incredulity, but am prepared to substantiate all that it contains. *Western Journal.*

SKETCHES OF PERIODICAL LITERATURE.

OPHTHALMIA NEONATORUM.

UNDER this title, Mr. Wishart, of Edinburgh, has published an able article on the purulent ophthalmia of infants, of which we shall endeavor to present our readers a brief analysis.

The disease usually commences in from three days to four weeks after birth. The eyelids are first observed to be frequently glued together, so that the child has considerable difficulty in separating them, as is evident from the action of the muscles in opening the eyes. They are however generally open in a moderate light, and still more so if the room is darkened. On farther examination, the conjunctiva of the

ball is found clear, but that of the lids is observed to be red, puckered, and covered with a white, mild, thick slime. The difficulty of opening the lids, the intolerance of light, the swelling and redness of the conjunctiva, gradually increase as the disease advances. At length the lids remain constantly shut, and any attempt to separate them occasions great pain to the patient. This can only be effected during sleep, by moistening their edges with lukewarm water. On making the separation, a copious discharge takes place of thick mucus, varying in color from white to a greenish yellow, and often mixed with streaks of blood. The quantity of this is in proportion to the vio-

lence of the inflammation, and the length of time that the lids have been allowed to remain undisturbed. Still, however, the redness is confined to the conjunctiva of the lid, or if the ball is inflamed, the injected vessels are not so numerous but that they appear perfectly distinct.

At this period, an attempt to open the eye is not unfrequently followed by eversion of the lid. This eversion must be carefully replaced; otherwise the lining membrane thus exposed to the air becomes more red and swollen, and acquires the appearance and character of inverted *rectum*. It will sometimes happen that the lid cannot be reduced, and the eversion is permanent. This state of things is usually followed by the gradual failure of the patient.

An occurrence not uncommon at this stage of the disease, is a greater or less hemorrhage from the lids. This, though alarming, is a favorable occurrence; for by this bleeding turgid vessels are emptied, and the inflammation diminished. If, however, the progress of the disease is not checked, the symptoms which ensue are more formidable. In consequence of the swelling of the lids, the edges of the tarsus are contracted, and the matter secreted can no longer escape. Rendered acrid by confinement, it increases the inflammation of the eyeball, an ulcer forms on the cornea, which becomes gradually deeper till the membrane is perforated, and the consequences which ensue terminate only with the entire destruction of the organ.

Among the causes of this disease, the more obvious are those which

produce other complaints among the poorer classes,—namely, exposure to cold or dampness, or to a strong light, as in too suddenly admitting the glare of sunshine, or in dressing the child before a large fire. A much more frequent cause, however, than is generally suspected, is the existence of morbid uterine discharge, whether venereal or otherwise, in the parent at the period of delivery. More than two-thirds of the infants affected, are born of mothers laboring under leucorrhœa.

The complaint, when treated in the best way, seldom continues less than three weeks, and if neglected or unskilfully managed, may be protracted to ten or twelve. The morbid changes most frequently left by it, are the ectropium or eversion already mentioned, and opacity of a portion of the cornea. Neither of these occur except in the worst cases, and are for the most part owing to injudicious treatment.

With regard to the prevention of this complaint, two precautionary measures are suggested by the considerations already mentioned,—one, to remove if possible any morbid discharge existing in the parent previous to delivery, and the other, to wash the eyes of the infant carefully immediately after birth.

The disease, as already stated, seems to have a certain regular course, and a violent or sudden interruption of its progress would be dangerous to the patient. The following mode of treatment, however, is safe and effectual. If the case is seen within a week from its commencement, which is as soon as ge-

nerally happens, the purulent discharge is to be carefully washed away with warm water, and the following lotion ordered:—

R. Sulph. Zinci ℥i.
 Aquæfont ℥x. Solve et adde
 Liq. Subac. ℞i.
 Tinct. Camph. ℞i.—℞ij. M. et cola.

This is to be carefully injected three times in a day with a fine pointed ivory syringe; at first diluted a little with hot water, so as to be rendered tepid, in which state it answers better, especially in cold weather. If the discharge be very great, the intervals of its application must be abridged. In the state above mentioned, it generally produces pain, which continues from five to ten minutes; if the child cry longer than this, it ought to be diluted. In the mean time, the eyes are to be frequently washed with warm water, and at night a small quantity of the ung. ox. zin. is to be inserted between the lids. Leeches or scarification may be added to the treatment, if necessary.

At the end of two weeks, if the cure goes on well, the inflammation will have diminished, and the discharge will acquire a watery appearance. At this period, the ung. hyd. ox. rub. may be substituted for that above mentioned, and the lotion altered to the following:—

R. Mur. Hyd. gr. i.
 Aq. Ros. ℥vi. M. et adde
 Vin. Op. ℞iss. M. f. coll.

At the end of a month, it generally becomes unnecessary to use the syringe, and the collyrium may then be continued occasionally by dropping a portion on the inner angle of

the eye, and allowing it to pass over the surface.

The most usual sequelæ of purulent ophthalmia, as above mentioned, are opacity of the cornea and ectropium. The former complaint is removed in young infants without difficulty. The best treatment consists in the use of the ung. hyd. prec. at night, and the vin. opii, more or less diluted, in the morning. The eversion of the eyelid, when recent, is easily reduced, and rarely becomes permanent or irreducible, except in consequence of neglect. When it is so, however, the conjunctiva must be treated with the ung. hyd. prec., or some mild caustic, until the swelling is diminished, when an attempt must again be made to accomplish its reduction. The sooner this is effected, and the changed surface is withdrawn from the action of the air, the sooner will it return to its healthy state.

AMAUROSIS.

It has, we believe, been generally supposed, that the insensibility of the retina and optic nerves which constitute this disease, are always accompanied by want of irritability in the iris, and permanently dilated pupil. Dr. Robinson, of the Eye Dispensary in Edinburgh, has observed that these two circumstances have no necessary connection with each other. He has met with repeated instances in which the pupil was permanently dilated and immovable, yet the vision not much impaired. On the other hand, cases of true amaurosis have occurred to him in which the

pupil was permanently contracted, while in others he found the iris as irritable as if vision had been perfect.

With regard to the remote causes of amaurosis, the disease is frequently hereditary, and is often observed to attack the successive generations of the same family at the same period of life. In persons predisposed to these attacks, they are very likely to recur from any cause which produces a determination of the blood to the head, and seem in these instances to be directly induced by pressure on the nerves of the organ. That the retina is very easily affected by slight changes in the circulation, there can be no doubt. Richter relates the

case of an individual who, when he held his breath and looked at a white wall, saw a kind of network, which appeared and vanished with the diastole and systole of the heart. The writer cites several cases in which amaurosis seemed evidently to depend on cerebral plethora, and in which general and local bloodletting were employed with a direct view to its removal, and with decided benefit. In one of these, the power of vision was to a great degree restored as soon as faintness was induced by the bleeding. As it appears that only part of Dr. R.'s cases are published, we hope to see this interesting point of pathology still further illustrated.

BOSTON, TUESDAY, NOVEMBER 24, 1829.

INFLUENCE OF THE AGE OF THE PARENTS ON THE SEX OF THEIR OFFSPRING.

THE interesting but mysterious subject of conception, and the laws, if any exist, which regulate the sex of the offspring, has received, of late years, an unusual share of the attention of the faculty. The following are the result of some researches on this subject, by Professor Hoffnacker, of Inspruck, published in the *Inspruck Med. Chir. Zeitung*.

1. In marriages where the mother is older than the father, the average number of male to that of female births is 90.6 : 100.

2. Both parents being of the same age, the proportion of boys to girls is 92 : 100.

3. The father being from three to six years older than the mother, the

number of male to that of female children is 103.4 : 100.

4. Where the father is from six to nine years older than the mother, the proportion is 124.7 boys to 100 girls.

5. The age of the father being from nine to twelve more than that of the mother, the proportion is 143.7 : 100.

6. Where the age of the father is eighteen years and more above that of the mother, the proportion of male to female births is 200 : 100.

7. Young men, from twenty-four to thirty-six, produce with young women, from fourteen to twenty-six, 116.6 boys to 100 girls.

8. If men between the age of twenty-four and thirty-six, are married to females between thirty-six and forty-six, the proportion of male to female children is 95.4 : 100.

9. Middle-aged men, from thirty-six to forty-eight years, being mar-

ried to young females, the proportion of their male and female children is 176.9 : 100.

10. Middle-aged men, and middle-aged women, produce 114.3 male to 100 female children.

11. Middle-aged men, being married to women of a more advanced age, the proportion of male to female children is 109.2 : 100.

12. Old men and middle-aged women produce 190 male to 100 female children.

13. If husband and wife are both equally advanced in years, the proportion of their male and female children is 164.3 : 100.

Mode of suspending the Secretion of Milk.—M. Ranque, chief physician to the Hotel Dieu of Orleans, employs with success, to diminish the sensibility of the mammary gland, upon which the secretion of milk depends, frictions morning and evening upon the breast, with the following liniment:—R. Laurel water ℥ij.; sulphuric ether ℥i.; extract of belladonna ℔ij. He prescribes at the same time rigid diet and sudorific drinks.

M. R., it is said, employs this liniment with success in engorgements of the testicles, after using antiphlogistics.—*Journal des Progrès.*

Vesicating Plaster.—Dr. Th. W. C. Martius recommends the following formula for this purpose. He says

it spreads easily, adheres well, and does not spoil.—R. Cantharid. contus. ℥iv.; inf. c. aq. ebull. ℥xx.; col. et evapor. leni igne ad syrupi consistentiam. Adde cer. flav. ℥iv.; resin pini ℥i.; ol. oliv., ol terebinth. āā ℥i.; alcohol vini ℥ij. M. exact.

The strength of this plaster may be increased by using a larger proportion of cantharides.—*Bul. des Sc. Med.*

Excision of enlarged Nymphæ.—Dr. Wagner has performed this operation with success in a girl aged eighteen, in which the nymphæ were enlarged to an extraordinary degree.—*Bul. des Sc. Méd., May, 1829.*

Pseudo-carics.—The shafts of bones, and especially the tibia, in consequence of chronic inflammation, are frequently enlarged, thickened, and at the same time loosened in their texture, which comes to have nearly the same appearance as that of the spongy articulating extremities. In bones so altered a state resembling caries occasionally occurs. Mr. Syme says that he has hardly ever known this pseudo-carics resist the local application of blisters, and internal use of mercury.—*Edinburgh Med. and Surg. Journ.*

Lithotomy.—Of eighty-three operations by the lateral method, performed by M. J. M. Viricel, at the Hôtel Dieu of Lyons, eighty were successful.—*Revue Médicale.*

WEEKLY REPORT OF DEATHS IN BOSTON, ENDING NOVEMBER 14.

Date.	Sex.	Age.	Disease.	Date.	Sex.	Age.	Disease.
Nov. 5.	F.	9 mo	lung fever		F.	50 yrs	inflammation in the bowels
	F.	35 yrs	brain fever		M.	31	consumption
6.	F.	33	consumption	10.	M.	46	pleurisy
	F.	5 mo	lung fever		F.	13 mo	dropsy in the head
7.	F.	36 yrs	consumption		M.	4 d	
	M.	12	do.		F.	43 yrs	consumption
8.	F.	15 mo	infantile		M.	3	measles
	F.	52 yrs	consumption	11.	M.	60	consumption
9.	F.	16 mo	measles		M.	50	intemperance
	F.	2 yrs	do.	12.	F.	67	
	M.	79	cancer	13.	F.	4	
	M.	17 mo	measles		M.	2 2-3	lung fever
	F.	92 yrs	old age	14.	F.	7 w	measles
	F.	3	measles				

Males, 10—Females, 17. Total, 27.

ADVERTISEMENTS.

NEW BOOKS.

CARTER & HENDEE have just published and for sale—

A Manual of Materia Medica, and Pharmacy, comprising a concise description of the articles used in medicine; their physical and chemical properties, &c. &c. By H. M. Edwards, M.D. and P. Vasseur, M.D. Translated from the French, with additions, &c. by Joseph Tongo and E. Durand.

Examinations in Anatomy, Physiology, Practice of Physic, Surgery, Chemistry, Materia Medica and Pharmacy, for the use of students. By Robert Hooper, M.D. from the last London edition, with upwards of one hundred additional questions, and an entire new chapter on Poisons.

The American Journal of the Medical Sciences, No. 11, for November, 1829.

Nov. 24.

ANATOMICO-SURGICAL DRAWINGS, and Descriptions of all the Surgical Operations, according to the most approved methods. By L. J. VON BIERKOWSKY. Translated from the German. In two volumes, and 570 drawings on 58 folio plates.

EXTRACTS FROM THE PROSPECTUS.

“Encouraged by the approbation of the Medical Profession, it is proposed to publish a work under the present title.”

“This work contains 570 drawings, on 58 plates folio; to which is annexed, in two volumes 8vo. a concise explanation of each surgical operation. The plates exhibit not only the parts interested in operations, in their natural position and size, but, what is much more important, represent the different acts or stages of the whole operation, while others exhibit delineations of such morbid affections as consist in the change of the natural position, structure, color, &c. In order to afford the work at a moderate price, the plates will be Lithographic; and for the purpose of securing perfect accuracy, engagements have been entered into for their preparation in Berlin, under the especial direction of two of the most distinguished Professors of the University of that city.”

A specimen of the translation, and the plates, is deposited for inspection at the Bookstore of CARTER & HENDEE, who receive subscriptions for the work.

Subscribers will be furnished with the work, and the first impressions of the plates, at the price of \$30.

The subscription list will be open until the 1st of November, 1829, after which period the price of the work will be raised to \$40.

P. S. For the accommodation of subscribers the work will be issued in five Numbers, at \$6 each, payable on delivery. Sept. 29. 18202N1D.

CARTER & HENDEE have just published,—The Constitution of Man, considered in Relation to External Objects. By GEORGE COMBE.

From the Preface to the American edition.

“Mr. Combe’s work should be placed with those, of which so many within a few years have appeared, which are devoted to the all-absorbing topic of Education. It treats of moral, intellectual, and physical education. This is not formally done under so many distinct heads. But the whole course of reasoning of the author, and the whole array of all his illustrations, have it always obviously in view to show how the highest cultivation of each of these may be most surely brought about.

“The publishers have printed this edition on a belief that there is much in the work to interest the community.

“It has a novelty to reward the general inquirer, and it presents the well known under novel aspects. There is one class amongst us who may study it with much advantage. Scholars are referred to, a class here too small to form a distinct order with habits of their own, and who insensibly fall into those which, although not mischievous, to the multitude on the score of health, too often make ill health the portion of the sedentary student, and bring upon him premature decay.—To all classes it is recommended, and the various learning and acuteness of the author well fit him to write a book which addresses its instructions to the whole community.”

Sept. 8.

ATREATISE on the Scrofulous Disease, by C. G. HUFELAND, Physician to the King of Prussia, &c., translated from the French of M. Bousquet, by Charles D. Meigs, M.D., is just received and for sale by CARTER & HENDEE.

Sept. 8.

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

I.

PHYSIC AND SURGERY.

The following is an extract from Mr. Lawrence's Lecture, introductory to his Course on Surgery at St. Bartholomew's Hospital,—the theatre on which the genius of ABERNETHY has been so long and luminously displayed, and from which he has recently retired.

THERE has been as much difficulty experienced in France as in this country, in defining the limits between the two professions. I am convinced that the boundary, as now fixed, is not very clear, and the consequence is, that great disputes have arisen. Operations, injuries, and external local complaints, are the undisputed possession of surgery, and internal diseases are assigned to the physician. But it is not easy to distinguish between external and internal diseases; here, in fact, surgery and physic join. Since it is found thus difficult to draw a satisfactory line of demarcation between physic and surgery, you will not be surprised to find, in a great majority of instances, that both are practised together, in this country, by one description of persons,—surgeon-apothecaries. Nineteen-twentieths of diseases are under the care of this class of persons in the country, who are therefore styled general practitioners. On the other hand,

in the metropolis, we find that these two branches of the profession are exercised by a different class of persons, whose education differs widely in some important points. We find it taught by separate teachers, in distinct courses of instruction, and we find this regulation enjoined by the laws of two distinct incorporated bodies.

Finding these contradictions, we are led to inquire more particularly into the distinctions between physic and surgery,—to ask whether it consists in the nature of the disease allotted to each, or in the mode of treating it,—to inquire whether there is any difference in the mode of learning them,—to ask how and when the distinction originated, whether it is well founded, whether it is of any benefit to the public, or any advantage to the practitioner? Nothing like the modern distinction was known to the ancients; at least, we find no traces of it in the Greek, Roman, or Arabic writers. Particular branches of medicine were indeed followed separately in Egypt, where the diseases of the eye, and some internal organs, formed the distinct occupation of different practitioners; and a distinction somewhat similar is said to have prevailed at Rome. But Hippocrates, Galen, and Celsus, treat of the nature and management of fever, of injuries, and of external and internal complaints in common. Celsus, in

speaking of the treatment of diseases, distributes what he has to say under three divisions, the same as are this day employed, according as the treatment is to be accomplished by dietetical, pharmaceutical, or chirurgical means. But the idea of splitting medicine into two parts, and learning the practice separately, seems never to have been entertained by this writer, nor any other great author whose name is still regarded as authority.

In the long night of barbarous ignorance which intervened between the downfall of the Roman empire and the revival of learning in the West, the treatment of diseases was preserved by the ecclesiastics. The exercise of medicine harmonized well with the more immediate object of their calling. But when the Council of Tours had declared,—*ecclesias abhorret a sanguine*,—that the church was defiled by blood, the priests and monks could no longer use any of those means that involved the loss of blood, and the practice was taken up by infidels and itinerants. In the course of time, surgery, which then consisted merely of bleeding and tooth-drawing, fell into the hands of a few persons who practised these in conjunction with the trade of the barber, and which ultimately led to the incorporation of the barbers and surgeons into a company. This separation of surgery from that medical knowledge which is an indispensable guide to its proper application, and its union with the art of the barber, long survived the circumstances that gave rise to it. It continued in this country till the middle of the last century, when it was dissolved in the reign of George II. The combination of the two branch-

es still remains in many parts of Europe.

In order to determine whether there is any real ground of distinction between physic and surgery, it is necessary to advert to the general practice of both. The individual organs which make up the human body, although various in their structure and office, are all intimately connected with and dependent upon each other. They are subordinate parts of one great machine, and all concur in one common object,—the life of the individual. All the leading arrangements are calculated to give a character of unity to the organic and living actions of the body. There is one source of nutrition of the whole frame; there is one centre of circulation; there is a common place of union of all senses and volition,—a common centre of nervous energy. The various organs are not only intimately connected, but act on each other by a mysterious, or at least hitherto unexplained cause, which is denominated sympathy. Every part composing our frame acts dependently; all the parts are immediately or remotely connected; and hence you could form no adequate idea of the sympathies of the organs, if you insulated them from the rest, any more than you could estimate the use and action of a single wheel or lever detached from a watch or steam engine. As a united machine, though complicated, is essential to accomplish the end for which it is formed, so living actions, although numerous and intricate, form an indivisible whole. Hence there is one anatomy and one physiology, and there can be only one pathology. If you wish to understand any part, you must not only examine the part itself, but must survey

the whole. In the same way, if you wish to investigate disease, you must observe not only the local affection, but the influence that other parts may exert over the seat of the complaint.

It must be the first business of the medical student to examine the structure and living actions of the frame ; that is, to study man in a state of health. These are the objects of the two sciences, which are denominated Anatomy and Physiology. He then proceeds to observation. He notices the circumstances under which disease arises ; he watches its progress, and its fatal termination ; he explores the organic changes it produces after death ; and learning to connect these with the appropriate external signs by which the disease is accompanied, and deriving from these comparisons the means of ascertaining the exact seat of the disease, he is able to foretel its fatal termination. This forms the subject of two other branches, which are distinguished by the names of Morbid Anatomy and Pathology. Morbid anatomy is opposed to anatomy ; pathology is opposed to physiology. Anatomy regards the healthy structure ; morbid anatomy the diseased one. Pathology regards the diseased functions ; physiology those that are healthy. The student is now prepared to apply the external influences, such as diet, climate, exercise, the outward or inward remedies, or the surgical operations which may be necessary for the removal of disease, and the restoration of health. The real question relative to the distinction between physic and surgery, then, comes to this : after treating disease generally, in the way just mentioned, can you discover any

portion of it insulated from the rest ? Can you find out any division that can be undertaken without a reference to other parts ? Can you divide the subject of disease into two classes that may be treated in a different manner ? Certainly not. The structure and functions are universally connected ; no part is independent. The causes that constitute disease are often to be found, not in the part itself, but in a remote portion of the frame ; the means of cure are seldom to be applied actually to the part diseased : for instance, if a person has a gouty inflammation of the toe, no cause of disease can be ascribed to the part itself ; but if you examine the state of the individual, you will find a full and strong pulse, and other marks indicating a fulness of habit, or plethora, as it is called ; the tongue will indicate a disorder in the digestive organs, and your treatment must consist in adopting the means necessary to remove the fulness of habit, and to correct the digestive organs, and the patient goes on well without any application to the toe. Another person may have a paralytic affection of his finger, and you can discern no cause for it in the part itself ; you will find everything in the paralyzed member perfect as to structure ; but, on examination, you find disease existing in the head ; you take the means of allaying that disease, and then the paralyzed parts recover the power of motion. In many cases, disease originating in one part, affects a great many other organs of the body ; and very often the secondary disease thus produced, attracts more attention than the original complaint itself. A person has an affection

of the head, which may be produced by various causes, and within a short time the circulating system, the digestive organs, and the secretions, become deranged, and he is in a state of continued fever;—another individual receives an injury,—inflammation is set up in the part, and in a short time the same febrile disturbance arises. The patient has a sympathetic fever in both cases, and the latter disease seems of more consequence than the former. Again, although individual organs are numerous, the components of organic structure in the body are few; the different proportions in which they enter into the composition of parts, is what makes the difference, just as the combination of a few letters give the infinite variety of words. When you have arranged and divided the causes of disease into two halves, you may give those different names, and require that they should be practised by different individuals, but the two divisions that you establish will be like each other, and the cause and the treatment of disease will in both cases be exactly similar. If you will insist on a distinction, it must be arbitrary. Then you can establish it clearly. You may divide diseases into those of the right side and of the left, or into those of the upper and lower halves of the body.

To assert that surgery and physic are essentially distinct, would be to say that there are two descriptions of pathology,—that the external and internal parts of the body were to be treated on different and distinct principles. When you reflect that the primary tissues composing the various organs of the body

are the same throughout, and that the difference consists solely in the number and proportions of those tissues, you will see that the various parts of the body cannot alter the nature of the disease, though perhaps there may be a difference in the mode of its treatment;—the way in which it is to be carried into force may be varied, because local applications may be made to the external parts which cannot be done to those that are internal. We treat the disease in the same manner, whether it is in the eye, the breast, the testicle, the heart, the lungs, or the liver. The principles of pathology, therefore, are general; they are the same in all parts of the body; and they must be common to the physician and the surgeon. Hence we may say, as Mr. Abernethy has most justly done, that surgery and physic, considered as objects of scientific information, are one and indivisible. We may with great propriety affirm, that no single branch of medicine can be acquired except by those who have studied the structure of the whole frame.

By those who are inclined to defend existing distinctions, various views have been taken as to the ground on which they ought to rest: for example, external diseases have been referred to the surgeon; those that are internal to the physician. But, unfortunately for this distinction, nature has connected the outside and the inside of the body so closely, that it is impossible to say where the one terminates and the other begins. If we were to adopt this distinction, we should consider how far the exterior of the frame extends, and how far

the province of the surgeon is to go; whether it is to extend half an inch into the body, or an inch? What is the boundary of the internal cavities and of the external outlets: for example, those lined with mucous membrane? The distribution of disease between the physician and surgeon seems to be absurd. The surgeon is allowed to take care of the diseases of the mouth: where, then, is he to stop? Inflammation of the throat, arising from syphilis, is referred to the surgeon,—catarrhal inflammation to the physician;—polypus of the nose is assigned to the surgeon,—a coryza of the same part is entrusted to the care of the physician. The diseases of the bones and of the joints have been considered a part of surgery, and yet they are hardly to be called external parts. In hernia and aneurism there is an external tumor, but they are produced by the diseases of parts that are quite internal. When we come to consider the cause and nature of disease, the absurdity of the distinction becomes more apparent, and the indispensable connexion between particular parts of the frame more obvious. External diseases are often produced by internal causes, as erysipelas, nettle-rash, gout, &c.; and on the other hand, external agents produce inward disease, as in rheumatic inflammations and catarrhal affections, from exposure to cold. The eye, considered as an external part, has been entrusted to the surgeon; yet that organ is the most complicated in the body, and is subject to so great a number of diseases, that it requires a greater knowledge of the principles to be derived from general pathology and therapeu-

tics, than any other part. The eye, together with its appendages, not only contains mucous, serous, fibrous, and glandular structures,—parts peculiarly liable to disease,—but it suffers from gout, rheumatism, smallpox, scarlet fever, and measles: it is affected by scrofulous and syphilitic inflammation; by cancer, fungous hæmatodes, and melanosis. If, then, an organ so complex in its structure, and subject to such numerous diseases, as the eye, can be safely entrusted to the care of a surgeon, I am at a loss to know why any distinction should be made, so far as disease goes, between surgery and physic. It is vain to establish distinct professorships for external and internal pathology, that surgery and physic should be taught by distinct lecturers, and in separate courses of instruction. Neither lecturers nor authors can make the distinction, and thus we find the same diseases are often considered by both; they are treated on the same general principles, and regarded in the same manner. Again, local diseases have been given to surgeons, and general ones to the physician. It really may be a matter of question, whether there be any local or general diseases, in the strict sense of the terms. When an organ of little consequence in the animal economy is slightly diseased, no sensible effect may be produced beyond the part itself; but when an important organ is considerably affected, then a great number of other parts feel its influence: hence arise general or constitutional diseases. Even in fevers, we can trace the general affection to some particular organ; and the existence of fever as a

general disease, independent of primary local mischief, may be made a matter of doubt. Thus, the distinction of general and local disease consists in degree, and not in kind;—it is a question of more or less. If you were to arrange diseases in one column, beginning at the most local, and ending at the most general, you would find them passing insensibly into each other, without any marked separation.

It has been recommended that Surgery should be confined to cases that require manual proceedings, or operations of some kind. This notion seems to be just worthy of that ignorance to which the unnatural separation owed its origin, and of the dark period in which it occurred.

According to such views, the distinction would depend not on the difference in the treatment of diseases, but on the accidental and often-varying circumstances of the mode by which the object is to be accomplished. What shall we do with the numerous cases, such as affections of the head, gout and rheumatism, in which changes of diet and internal treatment are necessary, in conjunction with the manual proceedings of bleeding, cupping and leeching? What shall we do with the numerous cases, such as hernia, retention of urine, &c., which, after various internal remedies, are often followed by surgical operation? In many cases, it is a question of degree, whether internal remedies only shall be employed, or surgical operation shall be added. If it is meant to confine surgery to operations or manual proceedings, and to a merely mechanical department of the profession, I for

one must enter my strongest protest against such an arrangement. I should really feel myself degraded by exercising this kind of barber surgery. If this arrangement were carried into effect, it would not be necessary to study scientific principles. We might spare ourselves the toil and trouble of learning anatomy, physiology and pathology, altogether; we might be contented to resign our profession into the hands of barbers, its original founders.

Historically speaking, we cannot deny that surgery originally consisted of this mechanical and subordinate part of the profession, which was practised by the permission, and under the sanction, of physicians. But surgeons have long since emancipated themselves from this bondage, and surely they will not again submit to such degrading trammels. They have cultivated, with ardor and success, the scientific department of the art; they can appeal to the great progress which surgery has made since the middle of the last century, and to the present state of its progression. The good opinion of the public which they have secured, is not inferior to that of other scientific men. They can point, in the annals of medicine, to the names of men who have been the most signal contributors to the advancement of medical science. Among these, I would not omit to mention the name of the illustrious Pott. He was equally distinguished as an able practitioner, and a clear and elegant writer. I must, however, confess that he has been thrown into the shade, by the transcendent merits and more brilliant talents of his contemporary and rival, John Hunter. In

contemplating this extraordinary character, we are at a loss to discover whether he surpassed others most in his energy or his genius. The novelty of his views, and the splendor of his discoveries, excite our admiration, and we are lost in astonishment when we enter his museum, and view the treasures there accumulated. We can hardly believe that they could have been brought together by one individual. To this name must be added that of a kindred spirit, who entered with ardor into the path traced out by his great predecessors, and followed it into new regions of knowledge. I allude to the founder of this school, Mr. Abernethy, (cheers). Fellow laborers have not been wanting in France, Germany and Italy. It will be enough for me to allude to the names of J. L. Petit and Desault; to Richter, Bichat and Scarpa. The two latter have been among the most distinguished writers of modern times.

The attempt to reduce surgery to its former limits, to bring it back to the art of bandaging, bleeding, tooth-drawing, and so on, which constituted almost its entire encyclopædia in the *venerable* times of barber-surgery, if it could be effected, would be no less injurious to the profession than to the public. The proposal now comes a century too late. In those cases in which local injury or disease exists in conjunction with a more or less general derangement, as in compound fracture with fever, in erysipelas, and in strangulated hernia, the patient requires to be attended by a person who thoroughly understands the case in all its bearings. The surgeon who only knows

the local, and the physician who understands only the general treatment of cases, are but half informed, and surely deserve less confidence than one who understands both. The confidence which ignorant persons are inclined to repose in what they call a combination of talent, is fallacious, if it consists of a surgeon who knows nothing of general, and a physician who knows nothing of local management: this is not a case, like that of grammar, where two negatives make an affirmative.

Let me take this opportunity of mentioning to you, that the mere performance of an operation is often the least part of a surgeon's duty, even in cases that require it. To judge whether or not the disease admits of cure by other means, to perceive when an operation becomes advisable, to determine when it is necessary, to prepare the patient judiciously for its performance beforehand, and to manage the case well afterwards, are points of superior importance.

Do not let it be supposed that I speak lightly of operations; on the contrary, it is necessary for you to study carefully each part of your duty; but I wish to caution you against attaching too much importance to the branch of surgery that you will most seldom be called upon to exercise. It is a great mistake to suppose that a surgeon is always employed in operating, however extensive his practice. It is the boast of modern surgery to have diminished the number of operations. I speak within limits when I assert that there are not so many operations performed now, by one-half or two-thirds, as when I first be-

gan to study the profession. This important difference to which I allude, has arisen from the improved knowledge of the nature and treatment of disease. Thus, whatever view of the subject we take, the same conclusion forces itself on our minds; viz., that there is no natural distinction between physic and surgery: they are inseparably-connected parts

of one science and art,—the practical principle of both having the same foundation, the different branches must employ the same means, because they have the same purpose to accomplish. Thus the great distinction turns out at last to be purely artificial,—to be founded on no fixed principle,—to be dependent on nothing but custom.

SKETCHES OF PERIODICAL LITERATURE.

MARSH MIASMA.

In a paper on the autumnal fever of Georgia, published in the *Western Journal*, Dr. J. C. Finley, of that state, has presented the result of his experience, during four years, in regard to the mode of production of febrile miasm. Dr. Finley is of opinion that too much stress has been laid on the decay of vegetable matter, as a cause of disease in the clearing of new countries; while the predisposing causes, such as the change of climate and habits, the unwholesome food and exposure, and the mental depression, which affect the settlers in a new region, have been too much overlooked. The impression in regard to the noxious qualities of marshes, has also, in Dr. F.'s opinion, been much too vague and general. A marsh, when covered with sufficient vegetation to screen it from the influence of the sun, is comparatively innocent. Situations in the neighborhood of millponds, which have previously been the haunts of fever, become healthy if the pond is drawn off early enough to allow the rank vegetation

usual in such places to spring up before the commencement of the sickly season.

A long continuance of warm weather is necessary, to give the exhalations of marshes sufficient activity to produce disease. "Hot and dry summers," says Dr. F., "are uniformly healthy. *Marshes, when perfectly dry, are comparatively innocent.*" Those seasons are most unfavorable to health which are distinguished by warm winds and a humid atmosphere.

It is a familiar fact in regard to intermittent fever, that it will outlast, by many months, or even years, the causes which produce it, and follow its subject into climes far remote from the place of its origin. A more remarkable fact is, that the seeds of this disease, sown during the summer and autumn, will sometimes take effect only in the succeeding season, having lain dormant in the system during several months, and being called into action by some very slight occasional cause. This predisposition, however, ceases after a few months,—*vernal* intermittents rarely appearing,

except in those who have suffered from the disease during the preceding fall.

It is further remarked by Dr. F., that trees or the brow of a hill form an effectual obstacle to the diffusion of fever. Many planters secure to themselves an immunity from attack, by simply leaving a certain extent of uncleared land around their houses. Elevated spots near marshes are insecure, though generally thought safe, and those who select them under this impression, are almost always disappointed. The town of Milledgeville, Geo., is mentioned in proof of both these positions. The town stands on the west bank of the Oconee, about half a mile from the river, upon two elevated ridges of land, running nearly parallel with each other. The streets on the brow of the hill, next the river, are proverbially unhealthy, while the remainder of the town is very much the reverse.

The views taken of this subject by Dr. Finley, coming as they do with the sanction of much experience and extensive observation, and being evidently uninfluenced by any preconceived theory, are certainly worthy of much consideration. In regard to the main points, they perfectly coincide with those adopted by Mr. M'Culloch, and other distinguished observers abroad; and contribute together with them to furnish distinct and accurate information on this interesting topic of medical inquiry.

TRACHEOTOMY.

AN interesting case in which this operation was performed, and which

occurred to Mr. Charles Bell, is related in a late No. of the London Medical Gazette. The patient, a child nine years old, was startled while in the act of eating a plum, and the stone slipped into the trachea. The opening was made between the thyroid and cricoid cartilages. After eluding several attempts made by the surgeon, the foreign body was at length found in the trachea, and extracted. The wound did well.

It has repeatedly been remarked, that where tracheotomy was performed, and the substance lay too deep to be extracted, or could not be reached, it has afterwards been expelled at the orifice by coughing. In order to determine the probability of this occurrence by a large number of cases, a series of experiments was not long since performed in France, the result of which was somewhat remarkable. The trachea was successively divided in ten dogs, after various substances had been introduced to a greater or less distance below the glottis; and in all of these the body was cast out the moment the incision was made. These experiments were performed to remove the impression of the uncertainty attending the operation, and they furnish a strong argument in favor of its immediate performance in those cases in which the existence of a foreign body in the trachea has been clearly ascertained.

INTESTINAL OBSTRUCTION.

A CASE of obstinate constipation is mentioned in the Edinburgh Journal for October, which, after resisting

the usual treatment by cathartics, injections, &c., at length yielded to simple mechanical means. A flexible tube, connected with a syringe, had been introduced into the rectum, for the purpose of dilating the intestine with warm water. When this means failed, the tube was passed higher up into the organ, until, at the distance of ten inches from the orifice, it encountered an obstruction. The obstacle was overcome with some difficulty, and the tube having passed through it, a discharge of liquid feces immediately took place, to the great relief of the patient. It was ascertained by the appearance of the tube, that the barrier had been formed by indurated and scybalous feces. The case did well. The operation, simple as it was, appears to have been original with the practitioner who performed it, and certainly does credit to his readiness and ingenuity. It seems that he was at the time twelve miles distant from his residence, which was in Kirkwall, Scotland, had employed the few

medicinal agents he had with him (laudanum, ol. ricini and croton oil), and was unable, at any less distance than that above mentioned, to procure a new supply. This country practice is certainly, what we have been said to say to the contrary notwithstanding, an excellent sharpener of the wits.

RHUS GLABRUM IN PTYALISM.

WE learn, from a paper in the American Journal, that this article has been employed with great success in ptyalism arising from the use of mercurials. The preparation recommended is an infusion of the inner bark of the root, which is to be used as a gargle and a wash for the mouth. The berries, prepared in the same way, are already in extensive use as a refrigerant in fevers, and a topical application in sore throats. The author of the paper, Dr. Fahnestock, gives particular directions for distinguishing this species of Rhus from the others, many of which possess widely different qualities.

BOSTON, TUESDAY, DECEMBER 1, 1829.

TREATMENT OF HYDROCEPHALUS.

A LATE English writer on the diseases of women, &c. gives a very interesting chapter on a complaint of children commonly attributed to congestion of the brain;—a complaint apparently resembling what Dr. Marshall Hall has termed “a morbid affection of Infancy, arising from exhaustion, but resembling Hydrocephalus.” The writer referred to

gives the result of several dissections which throw much light on the treatment of this disease. In these cases the children had been kept for several days under the influence of purgative medicines and leeches, for the purpose of subduing cerebral congestion. He found, on examination, the bloodvessels of the brain containing an extraordinarily small quantity of the vital fluid, and an abundance of serum in the ventricles.

The conclusion drawn from these dissections is inevitable,—namely, “that there may be effusion of serum from a state opposite to congestion, and that the depletory treatment, which is used so actively to prevent it, may sometimes be the cause of it.”

Dropsy in persons of all ages does often result from a debilitated state of the system, and effusion is known often, perhaps most often, to occur where no inflammation, no active visceral disease exists. In the management of children presenting symptoms of hydrocephalus, this fact ought at least to be kept in view,—we ought to remember that tonic treatment and country air are far more applicable to many such cases than bleeding and purging, which are too often resorted to as matter of course.

UNITED CHILDREN.

SCARCELY a journal reaches us but contains some case or cases of foetal monstrosity. From the great rapidity with which such unhappy occurrences are accumulating on the records of the profession, we should be inclined to believe we live in an age of wonders. The whole truth, however, appears to be, not that the idea of one such monster in the mind of the female *enceinte*, is the occasion of others, but that the contagion is in the *publication* of these cases. Many which are but just brought before our notice, occurred years ago, and in the truth of their wisdom, the medical attendants have thought it best to let the unfortunate events pass by in silence,—a mode of disposing of them in which they have doubtless found a most cordial aid

in the feelings and wishes of the parents.

The arrival and public exhibition of the Siamese brothers, has been matter of such general remark, that the dread of such subjects has been in a great measure done away, and almost every practitioner who finds a parallel case in his note book or in his memory, thinks that this is the time to lay it before the profession. By comparing the dates of the instances lately published, we believe it will be found that no one year has been greatly more productive of such monsters than any other, and that the explanation above given is correct. The following letter, addressed to Mr. Charles Bell, and published in the London Medical Gazette, justifies this view of the subject.

MY DEAR SIR,—A recent excursion to Switzerland gave me occasion to see, on the 1st of August last, at Geneva, a remarkable example of a living *lusus naturæ*, or monstrosity in the human frame; namely, twin infants furnished with two heads, two necks, and four arms, but grafted or united side to side, so as to form only one female body, terminating in two legs, or inferior extremities, of usual shape. This phenomenon presents nothing disgusting to the beholder; on the contrary, the intelligence which already begins to develop itself in the heads, makes it an object of great interest. I had not the opportunity of a very minute personal examination, in consequence of only seeing it at the hour of its daily exhibition to the public; but my observation verified the accuracy of the subjoined description, by Mons. F. Mayor, which was published in the *Journal de Genève* of the 30th of July:—

Marie-Terèse Parodi, 32 years of age, the mother of several perfect

children, gave birth, on the 12th of March of the present year, to a double child, now 140 days old. The one to the left was baptized by the name of Christina, the other by that of Harriet.

At the first glance it is perceived that the twin infants have become grafted together; however, when they are regarded before, the lower parts of the body appear simple from the stomach downwards, while the chest is divided at its upper part, at least on one side of the trunk. A more attentive examination speedily enables us to recognise the following peculiarities:—Anteriorly, the chest only appears to form one thorax: the sternum forms a kind of gutter at its inferior part, while above it widens and enlarges very much, in order to give attachment to four well-formed clavicles, two of which are fixed at the external angles of that bone, and the other two at the middle of its superior border. Each of these four clavicles is directed towards one of the shoulders, and gives all the support necessary for the movements of the arms, of which two are placed between the heads. The right edge of the sternum appears to give attachment to the right ribs of Harriet, and the left to the corresponding ribs of Christina. There are four mammæ, the two in the middle being smaller than those which are external to them, and are encroached upon by the armpits of the middle set of upper extremities. There is but one umbilicus. When the examination is made from behind, two spinal columns are distinctly seen, sufficiently separated from each other at the upper part of the body; but they approximate towards the sacrum, of which there are two, united by the left edge of the one and right of the other, in such manner, however, that the ossa coccygis are quite distinct. From each vertebral column there arise ribs, which are directed towards each other: the four or five first run to the anterior

sternum; but the rest are united to those of the neighboring body, at least by their external surface, and appear only to form one circle with those of the anterior part of the trunk. Thus, then, the thoraces are really separated externally throughout their upper third, and probably entirely so within: the posterior ribs of this double trunk participate in the movements of respiration in the same way as those of the anterior part. The beating of the heart in Christina is perceived at the anterior and left surface of the trunk; the beating of the heart in Harriet is seen at the middle part of the posterior surface. Beneath the ribs of this same side there is, between the two spinal columns, an abdomen twice as small as that on the anterior surface of the trunk. Harriet has had from her birth some malformation of the breast, for it is not long since the blueness with which she was affected began to disappear. For some days she has had a catarrhal affection, and her pulse was at 168 in a minute; while her sister enjoyed perfect health, the pulse not exceeding 144 in the minute. Their breathing is not always synchronous; however, there is reason to believe that a communication exists between the lobes of the lungs of the two children. The one sometimes sleeps while the other is awake,—sometimes sucks while the other plays, or wishes also to get the breast; but never has one an evacuation without the other making the same efforts, which even wake her, if asleep. As they grow older, other and yet more interesting phenomena will doubtless be observed.

Examples of this kind of union are happily but little common, and it is rarely that they survive their birth. A good many cases, indeed, are mentioned by authors, but most of them are apocryphal; some, however, are well authenticated: such, for example, as the two Hungarian girls, spoken of by Buffon, who were

united by the loins, and who lived 21 years. Another case of a similar kind occurred at Verdun, in 1709: here also two females were united, and in the same manner: they were then seven years of age, and could walk; and their intelligence was so great that they had acquired several languages. There is also an instance in which two little girls were united from the lower part of the sternum to the umbilicus. *The accoucheur divided the parts; and thus separated by an operation, the children lived.*

In 1495 there were born, near Worms, twins united by the forehead: they lived for ten years, when one died, and the other was separated by an operation; but it proved unavailing.—In 1525, a native of Savoy, 30 years of age, and of the ordinary stature, exhibited himself. He had, hanging from the sternum, a body about a foot in length, having feet and arms, but without motion, while the head appeared, as it were, planted in the body of the man.—In 1538 there was, in Bavaria, a female mendicant with two heads, who was driven from the country lest the pregnant women should give birth to similar monsters,—a fear as imaginary as the result of it was cruel and uncharitable. Buchanan, in his History of Scotland, mentions the case of a monster with two heads, which lived 28 years. The two heads, having different volitions, often quarrelled. They both felt wounds of the lower part of the body, but those of the upper part were only perceptible to the corresponding head.—In 1552, a French woman at Geneva, was brought to bed of a monster, the heads of which were united by the posterior part, and the union extended to the lower part of the back. Gaspard Materier took a portrait of it. The monster lived some hours, and is compared to Janus by a writer (Lycostliene) who describes it.

Before we conclude, we may allude to the opinion which has been

frequently started and recently renewed, that such monsters ought to be destroyed immediately after their birth. *No one can have a right to do so;* for since God ordains that such beings should come into the world, the laws owe them protection. Besides, it would be very difficult to determine the degree of imperfection at which an infant would cease to have a right to live; for these phenomena are met with from a simple supernumerary tip of the ear, up to the example above mentioned, of two girls who were successfully separated by an operation.

The catarrhal affection, with febrile excitement, under which the twin named Harriet labored on Thursday, the 28th of July, noted by M. Mayor, had subsided on the 1st of August, and she then had an appearance as healthy and lively as Christina. Both infants seemed to exercise some control over the motion of the lower limbs; but should they live until their mental faculties and animal powers are further developed, it will become a matter of curious inquiry to ascertain in what manner nervous influence, springing from two distinct organs of sensation and volition, shall be directed towards the lower extremities, so as to effect locomotion in accordance with the will of each sensorium; or whether there shall be occasional contentions between the *heads* for a dominating power over the *legs*.

Although the precise peculiarities of structure in the abdominal viscera, and the question as to whether the internal organs of generation correspond in unity and simplicity with the external, are points which cannot be fully determined till after death; yet, from the circumstance of each infant taking food with avidity at different times, it may be inferred that each has its proper stomach, and that the union of the alimentary canal takes place below that organ.

Many facts desirable to be ascer-

tained hereafter, during the growth of this extraordinary animal phenomenon, must arise, referring especially to anatomy and physiology; and as you have been long an eminent professor of these branches of medical science, I am induced to address to you this letter, in the belief that it may invite you to gratify your own zeal, and to indulge that of the profession, by instituting farther inquiries, from time to time, regarding the interesting subject of it.

I remain, my dear Sir,

Very faithfully yours,

J. BORLAND.

The subject being open, many questions present themselves to the mind which seem difficult of solution. The exact nature of such connections, and their precise effect on the physical and moral identity of the individuals united, are, we apprehend, in a fair way to receive solutions from an actual observation of phenomena which must occur in such persons, in the course of a life so beset with ills as that they are destined to live. To our readers, the effect of disease and of death in one, on the health and life of the other, taken in connection with the parts united or common to both, is perhaps of all these questions the most interesting; and the following case from a western periodical, seems not to confirm the commonly received opinion on this subject. For this reason, and as matter of record, we have thought it worth preserving. It was published by the medical attendant, Joshua Martin, M.D., of Zenia, Ohio.

On Monday, the 31st of August, 1829, I witnessed a most extraordinary *lusus naturæ*, of which I am induced to publish a brief notice.

The wife of a gentleman of this

vicinity was delivered, on Saturday, the 29th of August, at the close of the eighth month of utero-gestation, of two living children, of ordinary size, who were attached together by a round substance, of about three inches diameter, commencing at the ensiform cartilage, or lower end of the breast bone, and extending down the abdomen.

The superior part of the attachment was hard and cartilaginous, formed by the ensiform cartilage of the one extending across and uniting with the other; below, it was soft, and gave the sensation, to the touch, of a membranous sac, containing part of the abdominal viscera.

At the inferior part of the connecting medium, the skin was wanting; and at that point arose one umbilical cord, which served both children.

Anastomosis, or union of the superficial veins of the two children, could be distinctly perceived. They were both females, and in every respect natural, except that one had two thumbs on the left hand. I saw them about forty-eight hours after their birth; one of them had been dead twelve hours, and the other died in a few hours afterwards.—*Far. Rec. and Zenia Gaz.*

Ununited Fracture of the Os Femoris, cured.—A boy was admitted into the Bath Hospital, under the care of Mr. Henry Lyford, with a fracture of the thigh, produced eleven months before, and which had been treated in the usual way, but without any union having taken place. On his admission, an oblique fracture was evident, "rather above the centre of the femur, at which part there was a very considerable degree of motion, so much so, that the disunited portions of bone could be made to form an obtuse angle, and that without producing the slightest pain or inconvenience. The foot and leg quite œdematous, and much everted, the limb one inch and a quarter

shorter than the opposite extremity, and incapable of being elongated by extension. There appeared to have been an unusual degree of constitutional languor and inactivity, manifested by a very slow and feeble pulse, extreme coldness of the hands and feet, pallid countenance, dry skin, and impaired appetite, with constipated bowels.—Ordered a large blister to be applied on either side of the thigh, contiguous to the fracture; meat diet; a pint of porter daily; the bowels to be kept open by equal parts of the mercurial pill and extract of aloes, and three spoonfuls of the compound mixture of steel to be taken three times a day.

“On the twelfth day, the blisters having totally failed to produce any effect in the way of exciting ossific inflammation, Mr. L. introduced a seton between the end of the bones. At the expiration of two months from the time of his admission, he was discharged cured.”—*Lon. Med. and Surg. Journal.*

Gonorrhœa and Chancre.—We learn from a communication by M. Gibert, in the *Nouvelle Bibliothèque Medicale* for March last, that M. Biett had under his care a man who was afflicted with gonorrhœa, caused by cohabiting with his wife shortly after delivery, and during the continuance of the lochial discharge. The gonorrhœa being suppressed in a great part, an acute purulent oph-

thalmia supervened. We learn from the same source, that there was, in the hospital of St. Louis, a patient with a large ulcer on the internal surface of the prepuce, and at the base of the gland, caused by having connexion with a woman a few days after her delivery.

These cases are conclusive, as showing the non-specific nature of these diseases. We have known gonorrhœa several times induced by cohabiting with a woman during or too soon after menstruating; and chancres, and also gonorrhœa, produced by the leucorrhœal discharge. *American Journ. of the Med. Sci.*

Case of Hydatid Tumor simulating a Crural Hernia.—M. Pigeotte, Physician of the Hôtel Dieu of Troyes, in examining a female subject, observed two tumors, one on each side, resembling crural hernia. The one on the right side was reduced by taxis: being preceded by a fold of intestine, that on the left resisted all efforts at reduction, and on dissection proved to be a hydatid tumor.—If this woman had been attacked with disorder of the bowels, attended with symptoms analogous to those produced by strangulated hernia, she would no doubt have undergone an operation.—*Nouvelle Biblioth. Med.*

NOTICE.—Mr. Baruet Peters is no longer Agent for the *Med. Journal.*

WEEKLY REPORT OF DEATHS IN BOSTON, ENDING NOVEMBER 21.

Date.	Sex.	Age.	Disease.	Date.	Sex.	Age.	Disease.
Nov. 13.	F.	5 yrs	dropsy in the head		F.	3	dropsy in the head
	F.	16	affection of the head		M.	8	accidental
	F.	66	inflammation in the bowels	17.	M.	14 mo	measles
44.	F.	35	consumption		M.	18	quinsey
	F.	12 mo	unknown		M.	62 yrs	hydrothorax
	M.	48 yrs	consumption	18.	F.	3	lung fever
	F.	9	chronic fever		F.	22	childbed
15.	F.	36	childbed		M.	4	measles
	M.	21	typhous fever		M.	6 mo	croup
	M.	3	measles	19.	F.	29 yrs	consumption
16.	M.	27	mortification	20.	F.	3 d	unknown
	M.	4	burn	21.	F.	21	dropsy

Males, 11—Females, 13. Total, 24.

ADVERTISEMENTS.

NEW BOOKS.

CARTER & HENDEE have just published and for sale—

A Manual of Materia Medica, and Pharmacy, comprising a concise description of the articles used in medicine; their physical and chemical properties, &c. &c. By H. M. Edwards, M.D. and P. Vasseur, M.D. Translated from the French, with additions, &c. by Joseph Tongo and E. Durand.

Examinations in Anatomy, Physiology, Practice of Physic, Surgery, Chemistry, Materia Medica and Pharmacy, for the use of students. By Robert Hooper, M.D. from the last London edition, with upwards of one hundred additional questions, and an entire new chapter on Poisons.

The American Journal of the Medical Sciences, No. 11, for November, 1829.

Nov. 24.

CONSOLIDATED COPAIVA.

“**COPAIVA** may be given in this form without the least inconvenience. Neither communicating taste, nor imparting odor to the breath, it is also retained without the least disquietude or uneasiness to the stomach; and I am informed by Dr. Rosseau, that in large doses it does not purge.”—*Phil. Journal of Med. Sciences.*

See an article in this Journal, Aug. 18th.

EUROPEAN LEECHES.

An excellent lot of European Leeches, which will be sold at a reasonable price, or applied, in any part of Boston or in the vicinity.

For sale by **NATHAN JARVIS**, 188 Washington Street, where Physicians will find medicines at as reasonable terms as at any place in Boston.

Aug. 25.

coptf.

MORBID ANATOMY.

CARTER & HENDEE have just received,—The Morbid Anatomy of the Stomach, Bowels and Liver; illustrated by a Series of Plates from Drawings after Nature, with explanatory letter press, and a Summary of the Symptoms of the Acute and Chronic Affections of the above-named Organs. By **JOHN ARMSTRONG**, M.D.

The above work will be completed in

six numbers, at \$6,00 each. Three numbers are already published. Subscriptions received by C. & H.

Oct. 6.

2am3m

MEMOIR OF DR. HOLYOKE.

JUST published, and for sale by **CARTER & HENDEE**,—A Memoir of **EDWARD A. HOLYOKE**, M.D. LL.D., prepared in compliance with a vote of the Essex South District Medical Society.

CARTER & HENDEE have just published,—The Constitution of Man, considered in Relation to External Objects. By **GEORGE COMBE**.

From the Preface to the American edition.

“Mr. Combe’s work should be placed with those, of which so many within a few years have appeared, which are devoted to the all-absorbing topic of Education. It treats of moral, intellectual, and physical education. This is not formally done under so many distinct heads. But the whole course of reasoning of the author, and the whole array of all his illustrations, have it always obviously in view to show how the highest cultivation of each of these may be most surely brought about.

“The publishers have printed this edition from a belief that there is much in the work to interest the community.

“It has a novelty to reward the general inquirer, and it presents the well known under novel aspects. There is one class amongst us who may study it with much advantage. Scholars are referred to, a class here too small to form a distinct order with habits of their own, and who insensibly fall into those which, although not mischievous, to the multitude on the score of health, too often make ill health the portion of the sedentary student, and bring upon him premature decay.—To all classes it is recommended, and the various learning and acuteness of the author well fit him to write a book which addresses its instructions to the whole community.”

Sept. 8.

A TREATISE on the Scrofulous Disease, by **C. G. HUFELAND**, Physician to the King of Prussia, &c., translated from the French of M. Bousquet, by **Charles D. Meigs**, M.D., is just received and for sale by **CARTER & HENDEE**.

Sept. 8.

Published weekly, by **JOHN COTTON**, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

I.

CLINICAL LECTURE ON THE OPERATION
OF LARYNGOTOMY.

By CHARLES BELL, Esq., Surgeon of the Middlesex Hospital, and Professor of Surgery in the University of London.

GENTLEMEN,—At no time does the duty of the surgeon appear more important, than when he comes into the midst of a distressed family, one of whom is in danger of immediate death from suffocation; for the suddenness of the attack, the agony of the sufferer, and the real danger to life, are apt to agitate him at a time when he must be calm, decided, and dexterous. Before I read the case to you, I shall put certain preparations into your hands, to which I must refer in explanation.

[The lecturer here handed round the preparations, showing the natural structure of the larynx, and gave a short description of the anatomy of this part. He then drew attention to the peculiar sensibility residing in the glottis.]

This sensibility of the glottis calls into action the whole class of respiratory muscles. It is placed here for the purpose of guarding the entrance of the lungs; and if the smallest husk, or crumb of bread, alight upon this part, there is an immediate spasm, extending through all these muscles,

to expel the foreign body. But just in the same manner that this extensive class is roused into action, those little muscles which move the arytenoid cartilages and the chordæ vocales, contract spasmodically. Whenever anything foreign touches the highly-irritable spot in the glottis, these muscles shut up the narrow slit of the rima glottidis, and cause the sensation of suffocation. In such a case, therefore, as the present, when a foreign body is lodged in the windpipe, we have to observe that there is, at first, a sudden spasm, or fit of suffocation: after a time, this painful struggle relaxes; but it returns, and this return of the difficult breathing marks that the obstruction is spasmodic, and not mechanical.

In the course of the attack, these fits recur at shorter intervals,—they become more frequent, though apparently less violent; and you will observe how they are attended with flushing and turgescence of the face, with a bloodshot eye, great anxiety and struggling. But by-and-by a change takes place,—there is now no struggle, nor any effort to avoid suffocation,—there is no longer that animated and terrified look; but, on the contrary, the patient lies still; instead of the suffused face, his cheek is pale and cold, and his hand feels clammy. Had the obstruction been altogether

mechanical, the effects would be uniform; but being, as I have said, spasmodic, there is a deceptive appearance of improvement from diminished irritability. Seeing this change in his condition, his attendants think that he is relieved, and in the way of doing well; when, in truth, his case is desperate. These new symptoms arise from effusion taking place in the lungs. The difficulty experienced of drawing the breath through the narrow glottis, and the violent mechanical play of the lungs, bring on effusion into the extremities of the bronchiæ, or into the common cellular texture of the lungs; and of this, the pale leucophlegmatic countenance is the sign.

Thus, when the patient dies, the immediate cause of death is the state of the lungs; the remote cause is the spasm in the glottis. The inference which you are to draw from this is, that if you do not decide at the first what is to be done, but defer operating, there is danger of being too late: you may perform the operation, and remove the foreign body, but the patient will die from the effusion into the lungs.

Case of Foreign Body in the Trachea.

Sept. 1st.—Mary Waters, æt. 9, was admitted into the hospital at nine o'clock this morning, with symptoms of suffocation. The report given by the friends was, that yesterday afternoon, being in school, and eating a plum, the child laughed, and was reprimanded by the mistress, who gave her at the same time a slight tap on the cheek: at that moment the child was sensible that the plum-stone had got into her throat. She was immediately seized with a

difficulty of breathing, which has continued, with occasional severe attacks, ever since. A probang was passed into the œsophagus, and an emetic was given to her, before she came into the hospital.

It was evident that she required immediate relief. Mr. Bell said that he slipped, unobserved, to her bedside, so as not to disturb or frighten her, for the purpose of examining her manner of breathing. She lay with her head raised high; she was restless, shifting her position, and tossing her arms; her chest rose high, and her nostrils were dilated; the sound of her breathing was hissing, husky, and impeded,—it was in sudden gasps.

Having collected what tubes, probes and forceps were likely to be of use, the child was laid on pillows, placed on the table so that her position was inclined, not horizontal. This was done for two reasons,—because a person breathes with difficulty in the horizontal posture; and, because it permits the blood in the wound to flow outwards.

An incision was made through the integuments an inch and a half in length, the centre being opposite to the cricoid cartilage. The thyroid and guttural veins were seen turgid: it was not possible to avoid them, and they bled freely. Continuing the dissection on the forepart of the trachea, a small artery, the thyroidea anastomotica, was divided, and the wound bled considerably, so that the incision into the larynx was delayed a few minutes. The point of the scalpel was then thrust into the membranous space between the cricoid and thyroid cartilages. The child did not appear

at all relieved, or only in a very slight degree, by this opening.

“My disappointment was now considerable. When I had done this operation before, the relief was immediate : no sooner had the point of the knife penetrated the membrane, than the harsh sawing sound of the voice ceased, and the air came *siffling* through the wound ; and when the end of the scalpel was used to hold apart the sides of the slit, and a quantity of mucus was discharged, the breathing was composed and easy.”

The probe was passed upwards through the glottis into the pharynx, but nothing foreign was found interrupting the passage. The probe was then passed from the wound in the larynx down into the trachea, with every precaution, lest the foreign body might be thrust downwards by it ; but nothing was to be discovered there. At this time the breathing was worse ; the child's color was darker, and a degree of insensibility prevailed. A portion of a large gum catheter was passed down into the trachea, and retained there, and the child's face and neck were bathed with cold water. The breathing became sensibly easier, and the freshness of color returned to the cheeks and lips. The tube being withdrawn, further attempts were made to discover the stone, but without avail. Mr. Bell at this time thought of putting the child to bed, but, resolved to leave nothing undone, he explored the passage once more. He felt the pharynx with his finger introduced into the mouth. He then passed the catheter by the wound through the chink of the glottis, and examined the sacculi laryngis ; he then sounded deep into the trachea ; and now he thought he could feel a

roughness more than belonged to the cartilages. He therefore enlarged the incision downwards, and having bent the end of a probe so as to make a little hook, he passed it down into the trachea : by means of this, he succeeded in catching the edge of the stone, and brought it to be visible in the wound ; then, with the small dressing forceps, he extracted it. It was half of the stone of a plum, and it had lain with its rough convex surface towards the concavity of the tube.

Immediately after the stone was withdrawn, the child opened its eyes and looked about, apparently with the conviction that the thing was accomplished. Nothing could be more striking, during the whole of the operation, than that a child so young should have so perfect a notion of the necessity of something being done for its relief, and that it should remain so submissive.

The wound was dressed superficially, and the child was put to bed, breathing freely,—to the great delight of those present, for it had been abundantly apparent that it was an affair of life or death.

Evening.—The child is perfectly quiet, and has slept a great deal.

Sept. 2d.—She is remarkably well ; she speaks low, and complains of hunger. She breathes at present with perfect ease, and has done so ever since the operation. Leeches have been applied to the neck, and she has had some laxative medicine.

Sept. 12th.—The child is running about, and is quite well ; but the wound is still open, and the granulations projecting. The zinc lotion is ordered, with compression by adhesive strapping.

Sept. 22d.—The wound is healed. Mr. Bell said that the father,

with the child in his arms, came running after him as he left the hospital, to return thanks. When he said to the father, "I am distressed that the child has not recovered its voice," he replied, "It was only her shyness; she speaks as well as ever she did in her life."

It is first to be remarked, gentlemen, that in this, as in former operations, it was the surprise of every one how deep the trachea and larynx lay in the wound. It is this which makes the operation difficult; the more so, that from dissecting the dead body, you are not led to expect it.

It is said in this case that I passed the probe upwards. The reason of doing this is, that foreign bodies are apt to be caught in the chink of the glottis, and it is necessary to push them up into the pharynx. But, indeed, I ought to have considered that in such a case the symptoms are more severe than those exhibited in the present. I passed the probe downwards in the absolute certainty of finding the foreign body there. I shall here show you how the surgeon may make a fatal error. A child was brought into the hospital some years ago in a state of suffocation, as it was said, from having drawn a pebble into his windpipe. The house-surgeon, seeing there was no time for delay, made an incision between the thyroid and cricoid cartilages, and he then passed a probe from this part up into the throat. Thinking he could do no more, he desisted. The child died; and on examining the part, it was found, on slitting up the trachea, that the stone was impacted not a quarter of an inch below the

incision. If he had turned his probe down, he would have touched the stone, and the child would have lived.

A case lately occurred in Dublin to a surgeon whose reputation has extended so as to make him well known to us here, which was attended with some curious circumstances.—A boy had rubbed down a plum-stone in its centre, so as to open its cavity, and make a whistle of it. While practising upon this whistle, it suddenly slipped into his windpipe. He could breathe, notwithstanding, without much difficulty, although he had occasional paroxysms of suffocation. Several days had elapsed before he presented himself at the hospital. To satisfy those around him that the stone was still in his windpipe, the boy began to whistle, of his own accord, upon his instrument. Without puckering his lips at all, he could produce a very clear whistle by merely throwing out the breath from his chest. With this evidence, the surgeon made an incision into the trachea; and when he had pushed a catheter through the chink of the glottis into the mouth, the boy called out that he felt the stone, and had swallowed it. Three days afterwards, however, he was again heard whistling as before. The breathing had continued impeded; and it was found, also, by the use of the stethoscope and percussion on the chest, that the lungs on one side did not expand in breathing. It was inferred that the foreign body was probably still lodged in the trachea, and that it might be covering one of the divisions of the bronchial tubes. The incision in the trachea was therefore enlarged a

little downwards, and the stone was expelled shortly afterwards during a fit of coughing.

In illustration of this fact, that a foreign body may be expelled by coughing, you will find some very interesting experiments performed upon dogs by M. Favier, as quoted by Sabbatier. He popped a foreign body into the glottis at the moment of inspiration. The animal was immediately convulsed, and it was thought he must have died, but he became so quiet that they deferred the further part of their operation for six hours. They then opened the trachea by dividing three of the cartilages, when the body was immediately forced out. The experiment was ten times repeated with a nail, a ball of lead, &c.; and although these were pushed deep with instruments, the body was cast out the moment that the incision was made. These experiments were performed to oppose the opinion which declared the operation of bronchotomy to be precarious, from the difficulty of discovering the body.

The most important part of a clinical lecture, gentlemen, is the confessions of the surgeon. I ought in this case to have determined in my own mind where the foreign body lay, for you will observe that the symptoms are different according as the body lies in the grasp of the glottis or the trachea. I might have known that if it had been in the sacculus laryngis, for example, the symptoms would have been more violent, and the danger more pressing.

In the case operated upon by the house-surgeon, the mother came running in with the child in

her arms, just after the pebble was swallowed, and in twenty minutes the child was dead. In the present instance the stone lodged lower down, and the child you have seen survived during the night. But do not delay performing the operation after you have ascertained that a foreign body is in the windpipe, because the child may be suffocated in the instant by the body rising from the depth of the windpipe, and being caught in the glottis. Thus a child, after drawing a cherry-stone into its windpipe, was nearly choked, but suddenly got relief; and some time after, while playing on the carpet, it was seized with another fit of suffocation, and died. The cherry-stone was found in the sacculus laryngis; and there can be no doubt that in the period between the two attacks, the cherry-stone had lodged deep in the windpipe, but that during the gambols of the child it had fallen forwards into the larynx.

In Pelletan's Clinique Chirurgicale, you will see a case where a surgeon performed bronchotomy on a child, and extracted a bean. The weakness of the child after the operation was such that they believed him dead; but he recovered, called on his parents, and cried to have his playthings, and yet this boy died in fourteen hours. Another boy had the operation performed, and died in consequence. The expression is strong, — "*le coup mortel etait porté*;" although he lived for two months. Now the fatal termination in these cases was attributed to a gorging of the brain; and there is no doubt that a long-continued struggle for breath affects the circulation in the head in a very remarkable

manner. But it affects the lungs more directly and more violently. When a person dies from suffocation, owing to some disease of the throat, the lungs do not freely collapse on examining the body. Here, then, there is a proof that they have suffered, and to this danger I call your attention particularly. But let us in future be alive to the observation of Pelletan, of what takes place in the brain.

For some time after this operation I was very anxious for the child's life, and I shall state the reason of this anxiety. A woman was brought into the hospital, who, in her phrenzy, had plunged a penknife into her throat. It pierced the upper part of the thyroid cartilage, and entered at the union of the cordæ vocales. She was suffocated, at the end of some months, by the granulations which filled up the passage of the glottis. Another young woman, attempting to destroy herself, drew a penknife down the forepart of her throat,—not in the vulgar way of cutting it across. She thrust the knife into the trachea, and divided five rings of the tube. She survived the first effects, but was suffocated by the retraction of the cut edges of the cartilages, and the swelling of the inner membrane, which thereby diminished the capacity of the tube. You see, therefore, the source of my anxiety. When we saw the granulations spring out from this wound, it was natural to apprehend that such granulations might also sprout inwards. With regard to the possibility of the divided cartilages retracting, the manner in which I operated might possibly prevent this; for you will observe that my first in-

cision was made through the membranous space between the thyroid and cricoid cartilages; and when I enlarged it, I cut through the cricoid cartilage. Now you mark the peculiarity of this cartilage,—that it is a complete circle, and that, when divided, its edges will resume their place, being supported by the continuity of the hoop on the back part. The cartilages below, that is, the cartilages of the trachea, are not complete hoops, or rings; and therefore, when divided into two lateral portions, they may be displaced and retracted more easily. However, I must not omit saying that the windpipe has been divided with this perpendicular incision, without being followed with the consequences which I have apprehended, and which I have myself witnessed. I have recommended to my young friends to make experiments to illustrate this subject.

The last observation I shall make is less practical; but still it is very curious in a physiological point of view. When the probe was passed upwards, the child coughed and expressed uneasiness, which showed that the chink, and the parts above the chink of the glottis, were much more sensible than where we were operating.

It was also remarked that, although no sensibility was evinced on putting the probe downwards into the trachea, yet, when it was passed so far within the tube as to touch the bifurcation, coughing and indications of superior sensibility were produced,—as in touching the larynx.

[The operation of Laryngotomy is becoming more and more common

and successful, since the profession have been persuaded that it is necessarily attended with much less hazard than was formerly supposed. In all extreme cases it is, in fact, expected of the medical attendant that he will give his patient the chance of relief afforded by it;—we would recommend, therefore, to the particular notice of our readers, the foregoing Lecture from one of the most distinguished Surgeons of the age.]

II.

GANGRENOUS EROSION OF THE FACE.

MR. EDITOR,

DEAR SIR,—I take the liberty of sending you for publication in the Boston Medical and Surgical Journal, the history of a case of Gangrenous Erosion of the Face, which has recently come under my care,—it being one which seldom occurs, and upon which authors have not been very explicit. In fact, I have met with no accurate description of the disease in any standard work. In some of our medical journals, cases have been described very similar in their appearance, but most of them have ensued upon the exhibition of mercury.

In the No. of the American Journal of the Medical Sciences for November, 1829, four cases are given by Dr. Samuel Webber, of Charlestown, N. H., the last of which is almost a precise history of the one which I have recently been called to witness. I regret that Dr. W. did not state whether or not his patient (a little girl ten years old) had taken any preparation of mercury during the typhoid state. A number of cases of a similar

character have occurred in this city within a few years, but so far as I have been able to ascertain, mercury had been previously administered.

It is important to collect as many facts in relation to this disease as possible: it is therefore desirable that those who may have an opportunity of witnessing its symptoms, should communicate such information as they possess, that the disease may be properly classed and accurately defined. For myself, I am at a loss whether to consider it an idiopathic or symptomatic disease. Some circumstances in the case which came under my care, incline me to the former opinion, and to view it as a disease *sui generis*,—viz., it commenced after the typhoid symptoms had entirely subsided, during a state of convalescence, after the child had recovered its appetite, and in a measure its strength; at a time when aphthous affections are not expected, and seldom or never occur. The disease, too, both in my patient and that of Dr. Webber, took a marked and definite course, viz., one half of the face, as high up as the eye. In the lips, it is true that it somewhat exceeded its bounds; but in those soft parts it could not be otherwise, as a disease of this description could not accurately divide them, as with a knife. The gangrene pursued the same course in both Dr. W.'s patient and mine, and was confined to the same parts. Is it therefore unreasonable to suppose that, like Hemiplegia and Hemicrania, it was governed by some prescribed, though inscrutable law of the animal economy, and that the "gangrenous erosion of the face" is a distinct and idiopathic disease?

After writing thus far, I was accidentally informed that the case described by Dr. Webber occurred in a very interesting child, the daughter of a respectable merchant of this city. The father, by my request, wrote to Dr. W. to ascertain whether mercury had been given in the case referred to, or not. Dr. W., in answer to the inquiry, says that he cannot speak with certainty about particulars which had nothing remarkable at the time to impress them on his mind,—that most probably some calomel was administered at the commencement of the fever as a cathartic, this being his usual custom,—and that very possibly calomel might have been subsequently given, in very minute portions, combined with Dover's powder; but not in sufficient quantities, as I infer from his letter, to produce any constitutional effect. He is even doubtful whether calomel was given at all. He further states "that the disease has been known to attack and prove fatal where no calomel, or other preparation of mercury, had been used; and in otherwise favorable states of the constitution, to have amended under the use of it, and seemingly in consequence thereof."

My little patient took but five grains of calomel, combined with an equal quantity of jalap in powder, and this more than four weeks before her death, and nearly three weeks previous to the first appearance of the disease of which she died.

Dr. Webber, in giving a history of his patient's case, has so accurately described that of mine, that I cannot do better than to request

you to copy it verbatim. The variation in regard to treatment was trifling and unimportant. His patient was a little girl of ten years old,—mine was a little girl of four years old. His patient was affected on the left side of the face,—mine on the right. His patient had a troublesome diarrhœa,—mine had not. The teeth of my patient, on the affected side, either fell out, or were all loosened;—he makes no mention of this circumstance, and I am told by the father of the child that it did not take place. Both cases ensued upon typhus; both lived about an equal number of days from the commencement of the local affection; and both "died completely exhausted."

You will, my dear Sir, by reading Dr. Webber's description of his case, and keeping in mind the above circumstances, have a complete and accurate history of the one which I have recently attended.

Yours, very respectfully,
JOHN B. BROWN.

The following is the case referred to by Dr. Brown.

"This happened in September, 1828, in a little girl ten years old. It ensued upon typhus, in which diarrhœa had been a troublesome symptom. About the fourteenth day, when the fever was apparently beginning to abate, she complained of a feeling of soreness and pain in the left cheek, not far from the angle of the mouth. The part was slightly swollen, somewhat hard and reddish, like the commencement of a boil. Volatile liniment with laudanum was applied, and the redness disappeared, though the

swelling continued, being however less hard and rather more diffuse. A day or two after, some aphthæ appeared in the mouth and fauces, for which a gargle of diluted muriatic acid was employed. She complained, however, of the cheek's being hotter and sorer, and the swelling had evidently increased. On the inside of the cheek it protruded in a ridge between the teeth. Lead water was used externally as a constant application, in addition to the occasional use of the liniment above mentioned, and the inside of the mouth was frequently touched with honey acidulated with muriatic acid; small quantities of wine were given, and one-fourth of a grain of sulphate of quinine thrice a day; also small doses of Dover's powder to regulate the bowels, still rather too loose, and to procure sufficient rest. The cheek nevertheless continued to swell, and the breath became very fœtid with the odor before mentioned. The aphthæ nearly disappeared in a day or two, but upon the most prominent part of the internal swelling of the cheek was a kind of flabby pustule or blister, seemingly beneath the whole thickness of the internal integument, which over the swelling was opaque, and of a dirty white color. This broke the same evening, discharging a small quantity of fœtid fluid, and leaving a sloughing appearance of its membranous covering. It was repeatedly touched, during the night and the following day, with a strong preparation of muriatic acid and honey, sufficiently caustic to corrugate the sloughing membrane, and make it settle down below the level of the surrounding parts. This it was hoped would put a check to the diseased action, and cause the slough to separate. Not-

withstanding, it continued to increase during the subsequent night, and on the next morning had nearly reached the angle of the mouth, which looked dusky, cracked, and approaching to gangrene. An eminent practitioner from a distance met me in consultation this morning, and advised carrot and fermenting poultices with charcoal over the teeth, a small blister externally across the angle of the mouth, and one on the inside of the cheek, of a size sufficient to cover the slough and the surrounding sound edges, while the internal remedies were continued in increased doses. The disease however proceeded with redoubled rapidity. Gangrene in undisguised blackness passed in a few hours across the external blister, and at the same time came through the cheek opposite to the point on the inside first attacked. In spite of the assiduous application of fermenting poultices with charcoal, these spots spread so as to coalesce in the course of the night, and by next morning to involve most of the unattacked portion of the cheek. The case was now deemed hopeless, and dissolution was soon expected. The fœtor being excessive, with a view to lessen it, the part was covered with a cloth wet with a solution of chloride of lime (bleaching powder). This also lessened the rapid spreading of the gangrene so much, that for hours it seemed almost entirely stationary, but did not become wholly so, though it went forward very slowly, till it had covered the whole of the swelling existing at the time of its commencement, reaching almost to the lower eyelid, over the membranous part of the nose on the same side, the septum, two-thirds of the lips, and half of the chin,

including all the cheek to below the under edge of the lower jaw, and backwards nearly to the ear.

“The parts were completely sphacelated, and had nearly separated, when, at the expiration of

twelve days from the first appearance of the danger, the little patient died, completely exhausted.

All the peculiar symptoms of the fever had subsided long before her death.”

SKETCHES OF PERIODICAL LITERATURE.

AMELIORATION OF CLIMATE.

IN the course of some remarks on the climate of the 40th degree, north latitude, published by Dr. Sexton, of Baltimore, in the *American Journal*, are some valuable data on the comparative character of the seasons in this country at different periods during the last century. The three most remarkable changes during this period, according to Dr. S., are the following:—1st. The winds have become more variable. 2. Those from the western quarters have diminished in number. 3. Snow and ice are formed in less quantities, and are less durable, and the temperature of the winters has increased. The first two of these facts is proved by various records and incidental memoranda in the history of the country. The Swedish Professor Kalm, who travelled in North America in 1748 and 1749, kept a register of the winds at Philadelphia, and a few miles to the southward of that city. From this, it appears that the variation of the wind was sometimes limited by three or four points of the compass, for six or seven days in succession; and in some tabular observations of Bartram appended to Kalm's work, the wind is several times marked as blowing in the same

direction for six days, and in one instance, in the month of June, for eleven. The change which has taken place in this respect may be judged of from the fact, that in late tables we may examine the records of five years in succession, without meeting with an instance in which a current from any eighth part of the compass has existed for more than five days together.

It is mentioned by Jefferson, in his *Notes on Virginia*, that the east and south-east breezes had, in 1782, very sensibly advanced into the interior of the country, within the memory of persons then living. But more accurate information on this point may be gained from the valuable observations of the traveller already referred to. In ten months between August, 1748, and June, 1749, Prof. Kalm recorded four hundred and seventeen observations on the course of the wind. Of these, forty-six are marked as north and south. Of the remaining number, three-fourths are winds from the western semicircle, and but one-fourth, or ninety-eight, from the eastern. At the present time, Dr. S. remarks that the number of easterly and westerly winds, during a year, is nearly equal.

The existing testimony in regard to the increasing mildness of winter during the period referred to, is not less conclusive. For many years from the discovery of this country, the annual season during which the earth was partly or wholly covered with snow, in the latitude of 40 deg., was three or four months. Forty or fifty years since, the usual depth of snow during the winter was estimated by Rush at from six to nine inches, occasionally increased to two and three feet. In the year 1740, the Delaware was crossed with sleighs at Philadelphia, on the 16th of March, and in 1779-1780, was frozen across at the same place for nearly three months. Messrs. Mason and Dixon, while engaged in making astronomical observations about thirty miles west of Philadelphia, in 1767, saw the mercury in the open air fall to 22 deg. below zero. In the winter of 1783-1784, the snow lay, in the south-east part of Pennsylvania, from two to three feet deep during most of the season; and the rivers, which were frozen in December, continued bound, except a short interval in January, until the middle of March.

If with these facts, and many similar ones which might be adduced, are compared the records of modern winters in the same latitude, the change which has taken place in the severity of this season will at once be obvious. Nor is this amelioration at all more remarkable in the region described by Dr. S., than in that which is found two or three degrees farther north. So far as we have documents to judge from, our own climate has been undergoing a

similar alteration, to a nearly or quite equal extent. Men of scarcely more than middle age recollect the period when the sleighing continued good in the neighborhood of this city for three months in the year; while storms which covered the earth with snow to the depth of three or four feet, were affairs of frequent occurrence. Analogous facts are on record with regard to many of the countries of the old world. In our own country at least, we find a plausible explanation of these changes, in the destruction of her forests, and the increased cultivation of her soil. The uniformity of the atmospheric currents has been lessened by varying the character of the surface over which they blow; and the keenness which they formerly derived from passing over tracts of woodland, covered with almost eternal snow, is no longer to be felt. Still, as our author remarks, a continuance of these north-western breezes sometimes produces a temperature worthy of the days of our ancestors; and we are yet to wait for great improvements in our neighbors of the hyperborean regions, before the airy messengers they send us will, instead of bearing the snow and hail on their pinions, ripen our grapes and our olives, and breathe on us a perennial spring.

SARCOCELE.

AN interesting case of this disease is related in the London Med. and Phys. Journal for October. The patient was twenty-six years of age, had previously enjoyed good health, and had not been affected with go-

norrhœa for many years. Without any assignable cause, a swelling manifested itself in one of the testicles. This continued to increase, notwithstanding the employment of the usual remedies, until at length its extirpation was found necessary, and was performed. From this time the patient enjoyed good health for four months. At the end of this period, he felt some uneasiness in the remaining testicle. On examination, the organ was found enlarged, hard, and tender to the touch. Various local applications and general treatment were employed, but with little effect. The disease proceeded until the testicle attained four times its natural size, with an aggravation of all the other symptoms. At this period Mr. Guthrie was consulted, and recommended, in addition to the treatment already employed, the use of a large-sized metallic bougie, to be passed three times a day, and kept in the urethra for several minutes. This produced at first considerable irritation, and even hæmorrhage. In the course of a fortnight, however, both the size and the tenderness of the testicle diminished. After three months use of the bougie, every symptom of disease subsided, and the patient could take active exercise without the least uneasiness.

The theory on which this mode of practice has been proposed in this disease, and which is maintained by the author of the article referred to, is that of its removing a morbid irritability of the urethra, usually connected with the complaint. Nothing is said, however, to show that such a state of the passage existed in the

case referred to; and we are inclined to think that this is not generally or even frequently the proximate cause. Where orchitis occurs as a sequel of gonorrhœa, it is not too much to presume a transfer of inflammation from the urethra to the testicle; and undoubtedly one of the remedies indicated under these circumstances, is the irritation of the urinary passage with a bougie. The primary effect of this measure, however, is not to diminish the sensibility of the urethra, but to increase it; as is evident from the strangury which ensues upon its use. On the whole, therefore, we should be more disposed to attribute the cure obtained in this and similar cases, to a temporary transfer of the disease, somewhat analogous to what takes place under the use of vesication in common inflammation. It seems not very improbable, that in cases which yield to the use of the bougie, as above described, the local stimulus derived from copaiba or cantharides taken internally, might be of equal advantage.

NITRATE OF SILVER IN UTERINE
DISEASE.

A MR. JEWELL, of London, has lately published some cases of the successful use of lunar caustic in vaginal discharges proceeding from a diseased state of the cervix uteri. He thinks this a more frequent cause of the morbid discharge generally recognized as leucorrhœa, than has been commonly supposed. Admitting this observation to be correct, we should hardly expect the treat-

ment suggested to be useful in any considerable proportion of the cases of leucorrhœa met with in practice. That this disease sometimes proceeds from active inflammation in the cervix uteri, there is no doubt; but the symptoms in such cases would certainly be so far peculiar, as to induce a practitioner of ordinary prudence to examine and ascertain the fact. He who should infer the existence

of such inflammation from the discharge itself, and on this ground employ local stimulants to subdue it, would in many cases aggravate, instead of relieving the disease, and would soon make shipwreck of his own reputation.—So far as Mr. J.'s remarks go to show the necessity of careful examination in suspected cases, we deem them highly valuable and important.

BOSTON, TUESDAY, DECEMBER 8, 1829.

LOCAL APPLICATION OF NITRATE OF SILVER.

MR. HIGGINBOTTOM, of Nottingham, whose name will ever be associated with lunar caustic, has published another edition of his work on the curative powers of this remedy. Even abating much for the zeal of a man engaged on a favorite topic, the incontrovertible practical evidence of the influence of the Nitrate of Silver in restraining inflammatory action, adduced in this volume, is exceedingly valuable, and places the remedy in a much higher place than it has hitherto held in our materia medica.

Proofs very satisfactory are brought by Mr. Higginbottom, of its use in phlegmonous and erysipelatous inflammation, in bruised wounds, ulcers, and in burns and scalds. His mode of applying it is generally, first to wash the part clean with soap and water, and wipe it dry. The diseased surface, and from half to a whole inch of the surrounding healthy skin, is then to be moistened, and a stick of the caustic drawn over it once twice, or oftener, according to

the object to be effected. If the disease be superficial, and only a blackening of the surface is desired, once will be sufficient; if vesication is to be produced, the operation should be repeated several times; and if an eschar, a still longer application will be necessary. It is a point of the greatest importance, to carry the effects of the caustic beyond the diseased surface. No dressing is found necessary, the deadened cuticle being a sufficient protection to the part. Mr. H. is of opinion that by the free application of this remedy over a tumor in which suppuration has already taken place, a degree of absorption of the pus may be produced; and in bruised wounds and burns, he has uniformly succeeded in preventing, by this mode of treatment, the sloughing of the parts,—their integrity being preserved by the peculiar and specific tendency of this remedy to promote the *adhesive* process. Even wounds to be healed by the first intention will progress more certainly and rapidly, by blackening the surrounding

skin; and punctured wounds heal under the influence of this remedy, without suppuration.

In local *erythema*, we have found the free and early application of Nitrate of Silver, so as to blacken the skin, uniformly successful in arresting the progress of, and subduing the inflammation. In several species of *Herpes*, it has operated with great expedition, and to our entire satisfaction. A case of *Burn* is reported, as having been very successfully treated by this application so as to form an adherent eschar, at St. Bartholomew's Hospital; and in another case, of the *bite of a cat*, at the same Hospital, it was immediately curative, applied in the same way. A *wound received in dissection* is reported in a British Journal as having been entirely cured by the same process.—All these cases are entirely independent of the authority of Mr. Higginbottom. We might go on to adduce further evidence of the value of the researches of this gentlemen, but enough we trust has already been said, to induce the profession to turn a greater degree of attention to this subject than it seems generally to receive.

ROBBERY OF A TOMB.

ANOTHER step has been taken toward that horrid catastrophe to which we are fast hastening. The great amount of human dissection constantly going on in this city and commonwealth, both by private anatomists and in our Schools of Medicine, creates every year an increasing demand for subjects. Heretofore, this demand has been met by bodies taken from

the grave, in the stillness of the night,—a fact most disgraceful to that public which has established schools of anatomy, and refused to provide the means of pursuing its study,—which requires of the Practitioner a minute knowledge of the structure of the body, and denies him the possible means of acquiring this knowledge in an open and honorable manner.

In urging the necessity of legislating on this subject, we have repeatedly said that as the demand for bodies increases and the price of them is enhanced, and the temptation offered to the resurrectionist to get them at all hazards magnified, he will become bolder and bolder in his vocation, and soon the poor man will be afraid to live in a retired alley, and the rich will fear to carry the comforts of life to the needy sick, lest darkness, and with it an untimely end, should await him. And well he may, for all this *has* happened, and the course of events here is in a train precisely similar to that which led to the recent scenes of horror at Edinburgh.

One step more has now been taken toward this dreaded communication. The *Tomb*,—the cavern of stone closed by fast bolts of iron,—has been entered in the night, and the corpse which had just been deposited, stolen from its supposed resting-place! The next step is *easier* than this! and unless some measures are speedily adopted to supply *proper* subjects for dissection, and of these there might be obtained a great abundance, no man will be safe, we do not say in his grave, but in his visits

to the sick poor, or in his own house, if it is far from that of his neighbor.

Cancer of the Uterus cured by Injections of Hydrocyanic Acid.—A case of this nature was reported by Dr. Bruni to the Medico-Physical Society of Florence, at one of its sittings in March. The injections were made four times a day. The acid was prepared agreeably to the process of Scheele, and four denarii were mixed with four pints of barley water. Cicuta and aloes were administered internally. During the first few days, the injections caused sharp cutting pains of the severest kind; but the patient having passed by the vulva fragments of a membranous and fleshy substance, her pains became from that time less severe: she regained her strength and flesh to such a degree, that in six months there was not a vestige of disease of the uterus. The menses returned at regular intervals.—*Med. & Phys. J.*

Remarkable Case of Cataract.—A Swedish Journal (*Arsberattelse om svenska lakare sällskapets arbetem*) contains the following fact, communicated by Dr. Wendelstrom:—

A robust peasant, æt. sixty, who had always had excellent sight, and who had only suffered from slight gouty attacks, being occupied in cutting wood in a forest, suddenly felt that his vision was obscure. In a few hours he was completely blind, and he was obliged to be led home. He complained of no pain, nor were there any appearances of external inflammation. When he was examined by Dr. W. a few days afterwards, it was found that both eyes were affected with cataract. The operation of extraction was afterwards performed.

Polydipsia cured by Camphor.—Dr. Allert, of Bromberg, relates an instance of excessive thirst which occurred in a female. Notwithstanding the incredible quantity of cold water drunk by the patient, the thirst was not in the least abated. Her tongue was red, and her feet began to exhibit appearances of œdema. The cause of the affection could not be determined. After the employment of many ineffectual remedies, the patient was finally speedily and fully cured by the exhibition of large doses of camphor.—*Journ. der Practischen Heilkunde.*

WEEKLY REPORT OF DEATHS IN BOSTON, ENDING NOVEMBER 26.

Date.	Sex.	Age.	Disease.	Date.	Sex.	Age.	Disease.
Nov. 20.	F.	.9 mo	mortification		F.	4	croup
	M.	15 yrs	bilious fever		F.	74	old age
	M.	30	consumption		M.	3	croup
	F.	2 mo	stoppage in the bowels		M.	6	scrofula
21.	F.	46 yrs	lung fever		M.	4	lung fever
	F.	12 mo	do.	24.	M.	15 mo	do.
	M.		drowned		M.	38 yrs	consumption
	F.	5 d	convulsions		F.	43	do.
	F.	6 yrs	inflammation on the lungs		M.	19	bleeding at the lungs
	F.	86	old age	25.	F.	39	drowned
22.	F.	5 w	infantile		M.	21	consumption
23.	F.	29 yrs	typhous fever		F.	40	do.
	F.	46			M.	18 mo	inflammation on the lungs
	M.	38	dropsy on the brain	26.	M.	2 yrs	cholera infantum
	F.	24	consumption		Males, 13—Females, 16. Stillborn, 2.		
					Total, 31.		

ADVERTISEMENTS.

MEMORIA MEDICA.

THIS day published by CARTER & HENDEE, corner of Washington and School Streets, Memoria Medica,—a Medical Common-place Book,—with an alphabetical Index of the most common terms occurring in practice. Carefully selected and arranged by a Fellow of the Massachusetts Medical Society.

From Dr. James Jackson, Professor of the Theory and Practice of Medicine in Harvard University.

Gentlemen,—I have examined the "Memoria Medica" which you sent to me. I think the plan of it very excellent, and that it will be found highly useful to practitioners and students of medicine. I have never believed that a voluminous common-place book can be very beneficial to any man, unless he means to become an author. But on the other hand, every one will find an advantage in keeping a common-place book in which he may notice the detached facts which come under his notice, and which are likely soon to be lost from his memory. The book you have prepared will be found well adapted for this purpose by medical men, and will be more likely to be used by those who procure it than a common blank book, because all the labor of arrangement is saved.

I am, gentlemen, your obedient servant,
JAMES JACKSON.

From Dr. Walter Channing, Professor of Obstetrics and Medical Jurisprudence in Harvard University.

I have examined the Medical Common-place Book which was left with your note this evening, and with pleasure offer you my thanks for the publication of so useful a volume. Every practitioner of medicine will agree with the remarks in the preface on the inconveniences and absolute loss of what is very useful, which result from depending solely on the memory. Not unfrequently it happens that some particular prescription is peculiarly suited to an individual. Some time passes, and an occasion again arises in which we believe that the same medicine might be equally beneficial; what it was, however, has wholly escaped us; and though something else may be equally useful, still some regret may be felt, at least by the patient,

that what has been found beneficial cannot again be at once resorted to. Some object to an artificial method of preserving, for such and other uses, what may be safely trusted to the memory, if that faculty be faithfully cultivated. I am willing to admit that there is force in this objection; but it is a simple question of fact only we have to consider. If it be true that there is much lost to the individual, and certainly much more to the profession, by trusting entirely to the memory, the occasional use of the Common-place Book for the preservation of what is truly valuable, has all the recommendation it needs. For such purposes, viz., for the registering of cases the most rare, and the frequent, if important, epidemics, prescriptions, &c., your *Memoria Medica* promises to be very useful; and for these it well deserves to be recommended to physicians. Students attending hospital practice will find it very valuable. Its tables of names are very full, and under references very easy. I cannot but hope it will get into general use.

Yours, &c.,
W. CHANNING.
Dec. 6.

NEW BOOKS.

CARTER & HENDEE have just published and for sale—

A Manual of Materia Medica, and Pharmacy, comprising a concise description of the articles used in medicine; their physical and chemical properties, &c. &c. By H. M. Edwards, M.D. and P. Vasseur, M.D.: Translated from the French, with additions, &c. by Joseph Tongo and E. Durand.

Examinations in Anatomy, Physiology, Practice of Physic, Surgery, Chemistry, Materia Medica and Pharmacy, for the use of students. By Robert Hooper, M.D. from the last London edition, with upwards of one hundred additional questions, and an entire new chapter on Poisons.

The American Journal of the Medical Sciences, No. 11, for November, 1829.
Nov. 24.

A TREATISE on the Scrofulous Disease, by C.G. HUFELAND, Physician to the King of Prussia, &c., translated from the French of M. Bousquet, by Charles D. Meigs, M.D., is just received and for sale by CARTER & HENDEE.
Sept. 8.

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

I.

SUCCESSFUL MODE OF TREATING FISTULA OF THE PAROTID DUCT.

A SALIVARY fistula is neither a very pleasant nor tractable complaint, and any mode of treatment which shall prove more successful than those in common use, will undoubtedly be a boon to surgery and surgeons. We have no intention of entering into prolix details respecting fistulæ of the duct of the parotid gland, or duct of Steno, as it is usually termed; we would simply remark that it is rarely met with, and is one of the most obstinate of the salivary fistulæ. When it opens within the mouth, through the mucous membrane lining the cheek, it can scarcely be called a disease, as the fluid in that case is discharged, though not by its original route, into its natural receptacle. But when the opening is situated externally, and the saliva, instead of reaching the mouth, dribbles down the cheek, a train of inconveniences arises, which finally fall under the cognizance of the surgeon, and which it is his interest and business to remedy, if he can. The following case, which occurred in the private practice of M. Roux, will show that eminent operator's methodus operandi.

M. Auguste Godin, a notary at Neuvy, was loading a fowling-

piece, when his powder-flask exploded, and one of the fragments produced a wound in the right cheek. The wound was both deep and wide, and being in the situation of the parotid duct, great pains were taken to procure union by the first intention. Much inflammation, however, succeeded, and the above object was but partially accomplished; suppuration succeeded, and, along with the pus, saliva flowed in considerable quantity. It was now quite obvious that a salivary fistula was established. Cauterization of the edges of the ulcer, and afterwards compression, were employed, but they failed in effecting a cure, and, two months after the accident, M. Godin repaired to Paris, and consulted M. Roux. The fistulous opening evidently communicated with the duct of Steno, and not with the substance of the parotid gland. On introducing an Anel's probe through the natural orifice of the duct, on the inside of the cheek, it was stopped, after a course of about half an inch, by what appeared to be an obliteration of the canal; and the same thing took place on attempting to pass the probe from the fistulous opening without.

Finding that the cavity of the duct was obliterated between the fistula and the orifice in the mouth, M. Roux was convinced that neither the caustic, nor compression,

nor any other similar proceeding could avail, unless a route into the mouth were made for the saliva. M. Roux accordingly proceeded to an operation for that purpose, and first of all exposed the bottom of the fistula, by excising a portion of diseased skin which surrounded the external opening. The next step consisted in making two successive perforations of the cheek, from without inwards, by a hydrocele trocar, taking care to avoid the gum. The openings were made on a horizontal line, and a quarter of an inch distant from each other; the one corresponded directly with the bottom of the fistula, exactly opposite the external opening,—the other was nearer the parotid gland, and close to the anterior border of the masseter muscle. A small seton, composed of silk threads, was then passed through both openings, and the ends tied loosely in a knot, and retained on the outside of the cheek.

A good deal of swelling and inflammation of the cheek succeeded, but were quickly subdued by local applications. A superficial abscess, however, formed close to the parotid gland, and communicated with the wound which had been made in the operation. It was freely opened, and the skin, or rather the old cicatrix over it, was removed, so that the two wounds were laid into one. The saliva continued for some time to flow, in part externally, and in part by the openings into the mouth. Light dressings and gentle compression were employed, and the seton-threads were frequently moved backwards and forwards, in order to render the perforations completely fistulous. At one time strong compression was made on the external wound, but it brought

on a return of inflammation, which extended to the parotid gland itself; it was therefore abandoned. Six weeks after the performance of the operation, the saliva all at once ceased to flow from the wound, which rapidly cicatrized, and soon afterwards the silk thread came away spontaneously. M. G. stopped some time longer in Paris, and the cicatrix which ensued proved to be smooth, regular, and unaccompanied with any appreciable deformity. On the internal membrane of the cheek a transverse sulcus, with slightly elevated margins, could be felt, from which the saliva flowed into the mouth.

We have thought it right to publish the heads of the case, because they display the practice of M. Roux in this troublesome disease. That it ultimately succeeded there cannot be a doubt, but that some other method would not have done as well, perhaps there may. We do not clearly perceive the necessity for establishing two perforations in the mucous membrane of the cheek; indeed, we are convinced that one, of sufficiently ample dimensions, would be simpler and better. The seton thread passed through the two openings, and, including a portion of intervening soft parts, must frequently cut through that portion by ulceration, and lay the openings into one at last; or, at all events, if even they remain distinct, the two can answer no useful purpose, that would not be equally or better answered by a single one. This however is a trifle, and does not affect the principle of the operation, viz., the establishment of an artificial route for the saliva into the mouth. If this be the indication, as it certainly is, it must matter little how the minor steps

of the operation that fulfils it are conducted.—*Jour. Hebdomadaire.*

II.

FRACTURE OF BONES FROM TRIFLING VIOLENCE IN CASES OF CANCER.

MR. SALTER, a Surgeon of Poole, Dorset, has published two cases of fracture of the thigh that occurred almost spontaneously in patients affected with cancer of the breast. We shall only notice the second case, as in that, examination of the limb, post-mortem, was permitted.

Mrs. Pringle, in October, 1823, had the left breast removed in Guy's Hospital, by Sir Astley Cooper, for scirrhus tumor, but in January, 1824, the disease returned in the cicatrix. In the succeeding July, whilst raising the right thigh in the attempt to get into a cart, the thigh bone broke, about three inches below the trochanter major, with an audible snap, and on the 19th of October the patient died. She was 56 years of age, and had long complained of slight rheumatic pains in the affected limb, which, for about five months prior to the accident, had been converted into violent pain extending from the hip joint to the knee, and appearing deep-seated, as if in the bone. The pain was worse at night, had produced great lameness, and the muscles of the thigh were extremely shrunk. The increase of pain alluded to, she attributed to striking her foot against one of the stairs. A little above the patella, in front of the limb, there had been for some time a slight tumefaction, tender, upon pressure, and depending, it would seem, on thickening of the periosteum. These are the important features of the case,

and we proceed to the appearances found on dissection.

The muscles of the thigh were pale and shrunk;—a bloody fluid escaped from the capsular ligation of the knee joint;—two or three small clots of blood were contained in the articular cavity;—and, on removing the patella, an ulcer, about the size of a finger nail, was discovered in the upper and external part of its articulating surface. The head of the femur had lost its wonted smooth cartilaginous polish, but was rough and softened in its centre, whilst the thigh bone itself was so soft that a knife could easily be pushed through it, and could readily be bent in any direction, about three inches from either extremity. It was at the upper part of this portion that the fracture had taken place, though the precise point would be difficult to determine, as there seemed to be no entire separation, as occurs in common fractures. The distortion of the limb did not arise from any overlapping, but resulted from a bending of the bone produced by the contraction of the muscles. Those in immediate contact with the trochanters and the upper half of the limb were blended together into an uniform mass, firm and semicartilaginous, of pale red color, with bony spiculæ thickly dispersed through it, and puriform matter slightly tinged with blood. Corresponding to the swelling above the patella, the tendon of the cruræus was much thickened and altered in structure; pus issued from beneath it; and the periosteum was also greatly thickened, and readily separated from the bone. The table of the thigh bone at this part was almost en-

tirely absorbed quite down to the condyles ; the medullary cavity was filled with a bloody pul-taceous substance ; and indeed so great was the disorganization, that the author abandons the task of endeavoring to describe it in words, and refers to two drawings made by his pupil, Mr. Bul-lar, and engraved on stone for the volume of the Transactions which contains the paper.

Mr. Salter, in the remarks he has appended to the case, seems not to be aware that the connexion between cancer and this cu-rious condition of the osseous sys-tem has been frequently pointed out by authors on surgery. He observes that Mr. Samuel Cooper is the only author to whose works he has access, in which this dis-ease has been noticed. We can assure Mr. Salter that no less a person than Mr. Cooper's cele-brated namesake, Sir Astley, has particularly adverted to the fact in his public Lectures on Surger-y, and mentions, if we remem-ber right, the case of a lady whose thigh bone broke, on merely at-tempting to turn in her bed. We could cite several other authors to establish the correctness of our statement, but really we believe that the occurrence of a morbid state of the bones, in many cases of cancer, is too well known to require any labored disquisition to prove it so. It was but in a very recent number of this Jour-nal that we translated a case from the French, in which the bones of a patient who had died of can-cer, fractured in every direction, as the persons engaged in that office were putting her into the coffin. We are not aware, how-ever, that many accurate dissec-tions of the diseased bone, such

as that given to his brethren by Mr. Salter, are met with in works of common circulation, and there-fore we have been induced to notice it so fully here. Mr. S. deserves credit for his zeal in laying before the profession what he conceived to be a fact not gen-erally known.—*Medico-Chirur-gical Review.*

III.

CANCER OF THE UTERUS.

SIR,—There is no organic disease attended with such excruciating and appalling symptoms as the complaint on which I am now addressing you. When we con-sider that it is one of the most distressing maladies to which the female part of the community is liable ; when we reflect on the agonizing torture it inflicts on these objects of our tender care and solicitude ; when we view them bereaved of every hope, and a prey to misery and despair ; and when we contemplate how sedulously they are wont to con-sole us in our sorrows, ready and ever willing to pour the balm of comfort into our hearts, and to soothe the language of affliction whenever we stand in need of their sympathizing sorrow, and likewise how largely we are in-debted to them for the greater part of the comfort and happiness we enjoy ; it cannot but excite in us, who study humanity as well as physic, a more than ordinary zeal to relieve them from the accumulated ills which this dis-ease entails upon them. I have long observed, but not without painful emotions of commiseration, that this distressing complaint,

having hitherto been looked upon as incurable, has not had that attention devoted to it which it deserves; the means that have heretofore been adopted for its relief having been merely palliative. I am fully convinced that in its commencement, before considerable structural derangement be produced, much may be done to obviate it, and after ulceration has taken place, much more remains to be done than has been generally attempted. Now this is one of those diseases for which the whole artillery of three branches of the profession is more essentially necessary to be called into action than any other. In this case, the profession being constituted as it is, possibly may account why so much apathy exists respecting it, and so little has hitherto been done for its removal. As far as my investigations and experience go, it is very gratifying to my feelings to say that this disease is much more under the influence and control of medical assistance, when properly combined with surgical aid, than the generality of the profession are inclined to believe. The symptoms in different patients are so variously modified, that no universal plan can be made applicable to all cases. In its early stage, I have been in the habit of prescribing the tincture of iodine, with an appropriate dose of the solution of the acetate of morphine, night and morning, just sufficient to subdue irritation, using at the same time the warm hip-bath with a small portion of bay salt dissolved in it; and I have been pleased in observing that this plan, in this state of the disease, has been capable of effecting a complete removal of it. In

the more advanced period of the disorder, in addition to what has been previously proposed, I have been compelled to adopt more active means; sometimes I have used injections of extract of lead and elder-flower water, sometimes infusion of digitalis with the superacetate of lead, at other times the decoction of dulcamara with the muriate of ammonia, and where there is much pain, infusions of opium with the acetate of zinc, selecting one or the other, and regulating the strength of the medicine as the case and symptoms may seem to require. In administering these injections, it must be observed that, to be advantageously used, they must be exhibited differently from the mode usually pursued. They must be applied more like ablutions than injections, not with the common syringe, but with an apparatus properly adapted for the intention internally. I have ordered different preparations of iron with decided benefit, and I have sometimes prescribed the liquor arsenicalis with the tincture of henbane. I have also given the fucus helminthocorton with advantage, and this last medicine has been, by my suggestion, exhibited by my worthy friend Mr. Philip Marshall, of Shepton Mallet, to a patient laboring under this distressing affliction, which effected a complete cure. I can with great truth assert that this method, if properly persevered in, even in its more advanced stage, will make the patient not only comfortable, but tend to prevent the progress of diseased action. In the last and most dreadful stage of all, when the afflicted sufferer is deprived of almost every hope,—when, by its

progressive continuance, the uterus has become much increased in size, and the ulcerative process has taken place, accompanied with the most aggravated and distressing symptoms,—here, even here, much more may be done effectually to relieve the complaint, than has generally been contemplated. In this untoward situation, I recommend suppositories of morphine and cicuta, to be applied up the vagina to the uterus, and likewise suppositories of belladonna; but those with the belladonna must be very cautiously exhibited by the vagina to the ulcerated surface; they may, however, be safely applied by the anus: and here I must beg leave to call your attention to an application from which I have found more essential benefit,—which is the oil of tin. Lint moistened in it, and applied by the vagina to the diseased part, I have found a very sedative and soothing application, and I am inclined to think it has a specific power in this disease: by its application alone, I have cured an ulcerated cancer of the breast: by its employment, the pain gradually ceased, the diseased part became more and more exposed, and at last completely sloughed away; healthy granulations succeeded, and the wound healed without any difficulty. If this medicine should not answer the end proposed, the ablutions, with the injunctions previously recommended, should be used, with such quantity of the solution of the acetate of morphine, as is sufficient to alleviate the urgency of the pain: if the discharge should be profuse, instead of these injections, I use the decoction of oak bark and tincture of myrrh; and

if it should be offensive, a solution of the chlorate of soda in a strong emulsion of bitter almonds, with the morphine; giving internally the infusion of the fucus helminthocorton, and keeping up the strength of the patient by bark and other appropriate medicines, attending at the same time, in the several stages of the disease, to the state of the stomach and chylipoietic viscera.

I have thus described some of the general remedies which I have been in the habit of exhibiting with advantage in this disease. I shall make no apology for the length of this communication, the nature of its object being such as entitles it to our best consideration. Callous and insensible must we be to the finer feelings of humanity, if we were not more than ardently solicitous in arresting the progress of the insidious ravages of this malignant complaint, and in exerting our utmost efforts in averting the arrows of death from the seat of life.

I am, Sir, your obedient and
very humble servant,

JOHN TUSON.

Gazette of Health.

IV.

DIABETES.

DR. CHALMERS, an eminent physician of Hull, has published an interesting case of diabetes, in which the hydrosulphuret of ammonia (lately noticed by us as a remedy for the disease) was successfully administered under his direction at the General Infirmary of Kingston-upon-Hull. The patient (a male) about thirty-six years of age, had been for some time a laborer in a fenny part of

Lincolnshire. At the time of being admitted into the institution, he passed saccharine urine to the extent of twenty-eight pints daily, and was affected with the characteristic symptoms of the malady, as excessive thirst, dry and rough skin, wasting of the body, voracious appetite, constipation, &c. The Doctor ordered a warm bath, cupping over the loins, fifteen grains of Dover's powder with two of calomel, to be taken at bed time, and a drachm of compound jalap powder the following morning, with the common diet of the hospital. This treatment having failed to produce any beneficial effect, the Doctor directed a quarter of a grain of emetic tartar, dissolved in an ounce of water, to be taken every second hour, a grain of opium at bed time, a pint of lime water with an equal quantity of milk daily, and the loins to be rubbed twice a day with the ointment of tartarized antimony. The symptoms continuing unabated after this treatment had been adopted four days, the Doctor prescribed the following mixture :—

Take of Hydrosulphuret of Ammonia, 30 drops ;
Pure Water, 6 oz. Mix.

A sixth part to be taken three times a day. To have animal food twice a day.

After continuing the mixture two days, the quantity of urine was reduced to twenty pints in the course of twenty-four hours. To keep up a regular state of the bowels, the Doctor ordered a pill, compounded of calomel, two grains ; bitter apple, four grains ; and croton oil, one drop :—to be taken occasionally. After persisting in the use of these reme-

dies a fortnight, the quantity of the hydrosulphuret of ammonia in the mixture was increased to twenty drops. The warm bath was sometimes employed. During this treatment, the quantity of the urine and the other symptoms gradually abated ; and in the course of six weeks, when he was much more active in his habits, the healthy function of the skin was restored, the appetite and thirst nearly natural, and the quantity of urine, which was less, reduced to seven pints daily, and less saccharine. At this time, when there was every reasonable hope of a favorable termination of the case, he was dismissed the hospital for irregularity.—*Ib.*

V.

ULCERATED CANCER, CURED.

By GEO. FIELDING, M.D.

Mrs. C——, æt. 81, June 1st, 1829.—She informs me that, for upwards of fifteen years, she has had a complaint in the right mamma. Without any known cause, she first discovered a small tumor within the breast, near the nipple ; it very slowly and gradually enlarged, retracted the nipple, and puckered the integuments ; she had not constant, but occasional severe darting pains ; these most commonly came on in the night, when they awoke her from sleep. She has been several times ill during this period, and has had medical advice, but did not mention the complaint in her breast. About five weeks ago she slipped and fell, in the house ; hurt her right hip, and “shook” herself a good deal. Soon afterwards, the breast began to give more pain, and distressed her so much that

she was induced to show it to the attending physician and surgeon, who have prescribed up to the present period. For some time previous to the accident, cracks and small openings formed in the integuments, which discharged a thin bloody fluid. There is now an ulceration extending from the outer edge of the pectoral muscle within the axilla, towards the inner edge,—say about four inches in length, and from an inch to two inches in breadth. The broadest part is about the situation of the nipple, of which there is not a vestige remaining. The ulcer here is a very deep excavation, as if the whole middle part of the gland had sloughed away. The edges of this extensive ulcer are ragged and irregular, in some places hanging over, and in others everted; a lurid blush of different breadths surrounds the whole of the edges, but I discover no disease in the neighboring lymphatics. The general aspect of the ulcer is of a foul ash color, except at the outer edge of the pectoral muscle, where there are a few red points. From the state of the cloths removed, the discharge from it, which is thin and pale, must be very considerable, and has the peculiar foetid odor of this kind of ulcer. The odor is distinguishable on the stair-case, long before entering the room, notwithstanding great pains have evidently been taken to obviate it. Countenance pale and bombycynous; tongue clean; pulse very little above the natural standard. Complains of restless, feverish nights. Bowels are kept regular. The old lady says the dreadful smell deprives her very much of appetite, as everything she takes is

offensive to her. Her friends were told that the case was nearly hopeless; that all that could be promised was to soothe her, and counteract the horrible foetor, which was as distressing to her attendants as to herself. I directed the carpet to be removed, a mild diet, some common febrifuge, and the following:—

* R. Coninæ, gr. vi.
Ext. Conii, gr. xxiv. M. div.
in pilul. xij. s. pil. ij. om.
nocte.

R. Solut. Chlor. Calcis ʒij.
Aquæ Fontanæ ʒvi. ft. Lotion.
Lint dipped in the lotion to be applied over the ulcerated surface, and to be kept constantly moist.

8th.—Ulcer looks much the same, except at the lower side, where the lurid edge has extended every way. This portion of gland and integument is condemned. Has rested better, and is delighted that the offensive smell is removed by the use of the chlorine.

14th.—The remedies have been continued regularly. The ulcer generally looks cleaner; the edges are not so ragged, but the lower part is in a state of sphacelus, and will drop off. Complains of restless nights, but is not feverish. A moderate opiate substituted for the conium at night.

22d.—Ulcer looks much cleaner everywhere, except at the lower side; red, healthy granulations in various places, particularly in the axilla, where there is a patch of healthy-looking surface. Sleeps pretty well, and takes sufficient food.

July 2d.—Up to this time the

* How is this prepared?—E. G.

appearance of the ulcer has gone on gradually improving. A small cicatrix has formed in the axilla, and at the edge of the pectoral muscle; the upper edge is much flattened, and the lurid redness has nearly disappeared at that part; throughout, good granulations are arising, except at the lower side, where the gland and integument, nearly an inch in depth, and of considerable extent, are gangrenous; but there is a line of separation formed, which looks pretty healthy. Eats and sleeps well. Opiate continued at night, and the following ordered to be taken in the day:—

R. Tinct. Coninæ ʒiss.*

Aquæ Menthæ ʒvi. s. 6 part.
ter die.

6th.—The mortified portion on the lower side has principally dropped off, leaving a deep and foul excavation, but the corresponding edge of the integument looks healthy. Cicatrization going on from the outer edge all round the upper and inner sides of the ulcer. Sleeps well; general health and appearance improving.

14th.—The whole of the blackened parts are removed, and healthy granulations are now fast filling up the cavity, the lower edge approximating them being much flattened. In every other part of the ulcer, cicatrization is proceeding rapidly.

Aug. 4th.—In a few days after the last report, the inferior edge of the ulcer, and the granulations from its base, approximated, and cicatrization went on rapidly all around. There is now only an ulcer, about the size of a half-

crown, in the middle. The general health and appearance are much improved; walks from room to room, and is free from complaint, except a little dyspnœa, which she says has come on the last two or three nights, upon lying down. It was my intention to establish an issue, provided the ulcer went on healing, before complete cicatrization took place; and, upon inquiry, I learnt that she had an issue made about "a certain age," which she healed up many years ago. For the relief of the dyspnœa, a blister was put upon the left side of the chest, and an issue placed in the right arm. Omit the opiate, and continue the conine.

13th.—By these means the dyspnœa was removed in two or three days. The ulcer is now entirely healed, and the cicatrix has a healthy, natural appearance, free from crust or deposition. The old lady seems in good health for her years,—having entered her eighty-second year about a month ago. Throughout the whole of the process of sloughing, the lotion prevented all fœtor, and, as it gave not the slightest pain, was continued until the whole was cicatrized.

Several times during the cure, a slight erythema appeared upon the surrounding sound skin, which was always speedily checked by the application of warm brandy.—
London Medical Gazette.

VI.

STRANGURY.

DR. JOHN DAVY, of Zante, recommends a small catheter to be introduced into the bladder in cases of strangury from blister plaster, or from canthari-

* The tincture we use contains four grains to one drachm of spirit.

des taken internally. "This treatment," says he, "I have found almost constantly to succeed, not with the view of drawing off the urine, but for the purpose of distending the urethra, particularly the prostatic portion." The tincture of belladonna rubbed over the perineum with warm fomentations, speedily terminates the most violent attacks of this malady.

SKETCHES OF PERIODICAL LITERATURE.

MESMERISM.

DR. CHENEVIX has published, in the *London Med. and Phys. Journal* for October, his fifth and last article on Mesmerism. It contains an account of trials of this agent on eleven persons, all of them females, and affected with various diseases. These cases are peculiarly interesting, from the minutes of the phenomena having been taken by Dr. Elliotson, who was an eyewitness, and who appears to have drawn up his statement with great care and accuracy. On ten of the number, no effect was produced except that of sleep, which took place in two or three at variable periods, and may be accounted for, from the circumstances present, without difficulty. The last case is more remarkable; and as,—considering the reputation of the narrator, and his freedom from prejudice,—it contains the strongest testimony to the efficacy of Mesmerism which Dr. C. has published, we shall present it to our readers without abridgment.

"A fourth patient was now seated in the chair. She exhibited no apprehension of any kind, but was talking very cheerfully to me. Mr. C., without saying one word to her, began his manipulations, at the distance of half a foot, but did not touch her. In about one minute she said,

in a plaintive voice, 'Sir, don't do that;' and seemed in great distress. She afterwards told us that Mr. C. drew weakness into her, and made her feel faint. She complained of pain in her abdomen. Mr. C. moved his hands transversely before it, and she said the pain was gone. (She had felt a slight pain there before we saw her.) She then complained of great uneasiness in her chest; and after some transverse movements made by Mr. C. with the intention of removing it, she declared it was gone. The pain in the abdomen returned and ceased, as before, by the manipulations of Mr. C.—Mr. C. then darted his open hand towards one arm, without touching it, and told her to raise both arms. She scarcely could move that which he had thus mesmerized. He then made some transverse passes before it: she at once moved it, and declared the stiffness and uneasiness to be gone. The same was repeated with the other arm, and with the same effect. He told her to lift her feet: she did so with perfect ease. He then darted his hand toward one leg, and she stared with astonishment at finding that she could not stir it without the greatest difficulty. He then made some transverse passes, when she instantly raised it, and said there was neither pain nor stiffness in it. He then closed her eyes, and put a very small piece of paper, weighing perhaps one grain, on her foot, in such manner that it was utterly impossible she could perceive it: she could scarcely move that foot.

The paper was removed in the same manner, and without her knowing it : she could instantly raise her foot. She now complained of pain about the heart : Mr. C. demesmerized her, and she said it was gone. In all these experiments, Mr. C. had most clearly announced to me, in French, what his intentions were ; and the effects coincided so accurately with those intentions, that I confess I was astonished. Deception was impossible. Mr. C. looked round at me, and asked, in French, if I was satisfied. I really felt ashamed to say no, and yet I could scarcely credit my senses enough to say yes. I remained silent. He then asked me, still in a language unintelligible to the patient, ' Shall I bring back a pain or disable a limb for you once more ? ' I of course requested that he would do so. He complied instantly, giving her a pain in the chest once, and disabling her several times from moving her limbs, and removing those effects at pleasure, according to the intentions which he announced to me ; the whole taking place exactly as it had done in every former trial on this woman. As, however, she began to feel faint and uncomfortable, Mr. C. judged it prudent to desist ; assuring me that such experiments as these should never be repeated but with moderation, and only by experienced mesmerizers.

" On questioning the woman, a few days after Mr. C. had produced such decided effects upon her, respecting what had occurred, she declared that he had disabled first one limb, then another, and restored their use, exactly as appeared to be the case ; that she had never felt anything like it in her life before ; that, though she had not slept during the operation, she had felt very drowsy ; that she had not been at all afraid ; but, said she, ' I hope never to see that doctor again, as I am sure he has something to do with the devil. ' "

Of the accuracy of this narrative we presume there can be no question ; and it can only be explained by supposing that Dr. C. has acquired, from the habit of exercising his art, and from the confidence which he himself feels, an extraordinary power of affecting the imagination of nervous patients. That this power can be made available to any useful purpose, although possible, it is by no means easy to perceive ; in its application to disease it seems to have produced aggravation rather than relief, and there is no reason to suppose that, under any circumstances, its physical operation can be permanent or important.

MEDICAL STATISTICS.

IN a late work by Dr. J. Bisset Hawkins, are some curious facts and speculations connected with this subject. The first chapter of the work contains a comparison of the mortality of ancient and modern times, the result of which is decidedly in favor of the latter. The data on which the calculation is founded, it is confessed, are not very numerous ; but a table is given of the expectation of life at Rome in the third century of the Christian era, which possesses considerable interest. From birth to 20, there was a probability of 30 years ; from 20 to 25, 28 years ; from 25 to 30, 25 years ; from 30 to 35, 22 years ; from 35 to 40, 20 years ; from 40 to 45, 18 years ; from 45 to 50, 13 years ; from 50 to 55, 9 years ; from 55 to 60, 7 years. On the other hand, the modern tables of Mr.

Finlayson give 40 years as the probable duration of life at the age of 20 ; 29 years at 40 ; 22 years at 50 ; and 15 years at 60. Admitting, therefore, that the mode of estimating probability was the same in both calculations, it would appear that the advantage in point of longevity is decidedly on the side of the moderns. Much of this advantage is attributed by Dr. H. to the improvements which have taken place in medical practice. Hippocrates gives an account of thirty-seven cases of continued fever without local affection, treated only by glysters and suppositories ; and of these, twenty-one died. Yet there is no disease in which we are accustomed to rely more on the effort of nature to effect a cure, than in fever ; and hence the conclusion is irresistible, that medical practice, however undervalued or decried by the ignorant and prejudiced, exerts a most important agency in the diminution of disease and death.

We are by no means disposed to deny the force of the reasoning above stated, or the accuracy of the conclusion obtained, although we cannot believe that the continued fevers of the present day would, if left to themselves, be attended with a fatal result in a majority of the cases. It seems singular, however, that even physicians should so often underrate the efficacy of their own practice, and shut their eyes to the importance of their own art. Hufeland, whose philosophical views on the nature and treatment of many diseases are so well known, maintains on this topic the following remarkable language :—

“ After thirty years’ practice, I am now fully convinced, that of all the patients whom I treat, two-thirds would recover without my assistance or that of medicine, and even under the most opposite modes of treatment. The remaining third I divide again into three parts, of which two-thirds would remain alive without my care. Art only enables them to pass through the disease more easily and quickly, and without leaving sequelæ behind. The last third, therefore, or one-ninth of the whole only, might, without my active aid, become the prey of death ; and here it is certainly not indifferent *how* the patient is treated ; for that mode of cure only which is adapted to the disease and the patient can preserve him ; consequently, the *sanatus fuit* may mean no more than that he did not die, or perhaps that he fortunately escaped the mode of cure.”

It is too true, that even the most attentive and successful practitioner must meet with frequent disappointments in regard to the effect of remedies, and will often find himself to have been deceived both in his diagnosis of his cases, and his anticipation of their favorable or unfortunate termination. These occurrences are but the indications of that uncertainty of the art which is conceded on all hands ; but to deny that the art itself, in its present state, is a blessing to the human race, is to disregard the authority of reason, and the testimony of daily experience.

EFFECTS OF THE GASTRIC JUICE.

FROM some experiments which have lately been instituted on animals, it would seem that this substance does not possess the power, usually ascribed to it, of eroding the coats of

the stomach during inanition. The secretion of this fluid is in fact rather diminished than augmented during hunger. This state does not produce inflammation of the stomach; so that where death occurs from this cause, it is not immediately attributable to any local effect, but must be referred to the general prostration of the vital forces.

BOSTON, TUESDAY, DECEMBER 15, 1829.

CUTANEOUS DISEASES.

A NEW and much improved edition of Bateman's Synopsis, and an Atlas of his delineations of cutaneous diseases, has been lately published in England. The Editor, Dr. Thompson, has enriched the work with numerous references, and in the margins of the plates he has indicated the different stages of each disease represented. This last is a very great improvement on the original plan; for these diseases change so much in their progress, that what at one time would be a most accurate picture of a disease, might, at a more advanced period of its course, possess no point of resemblance.

In the Atlas, no larger surface is given than is necessary to show the appearance of the eruption, and by this economy, the delineations are afforded at about a tenth part the cost of Bateman's original plates.

VACCINIA IN THE COW.

IT is to be regretted that this disease so rarely affects the animal which first furnished it for the human subject. Attempts have often been made, of late years, to procure from the cow some fresh virus, and every pimple which is discovered on the udder is made the subject of experi-

ment. Several cows in Hyde Park, London, were recently affected with an eruptive disease on the udder, and strong hopes were entertained that it was the cowpox. Two attempts were made to induce that disease in the human system, by this matter, but they proved wholly fruitless. Although it is by no means certain that the vaccine virus has deteriorated, yet such a thing is far from impossible, and it becomes, therefore, very desirable to get a new supply from the cow. Those who are in the habit of noticing these animals, should be reminded by the faculty to watch the part on which the disease originally appeared, and give early notice of any eruptive malady. There certainly can be no reason why it should not exist now and in this country, as well as in any former year, or any other country.

Illustrations of the Peculiar Operation of Medicines on different Classes of Animals.—Medicines have very dissimilar effects on different animals. For the expulsion of worms, or to assist the action of purgatives, two drachms of calomel are often given to the horse; two grains would puke the strongest dog. The reason why persons are enabled to give the excessive and preposterous doses of fifteen or twenty grains is, that the stomach very soon rejects

the whole or the greater part; or if a few grains be retained amidst the rugæ of the stomach, they produce inflammation of the bowels, discharge of blood, and tenesmus. Four ounces of spirit of turpentine may be given to the horse, not only with impunity, but with advantage, in spasmodic colic. One drachm cannot be administered to the dog but with almost certain destruction. From four to eight drachms of aloes are required to purge a horse: the smallest dog requires nearly a drachm; while six or eight grains will purge the largest hog. Castor oil is with dogs as bland and safe a purgative as in the human subject; with opium and some aromatic, it is a specific for spasmodic colic in the dog. In the horse, it is uncertain, irritating, and unsafe. Two grains of the antimonium tartarizatum will vomit the largest, and destroy a small and delicate dog. From two to four drachms are, according to the opinions of some surgeons, given to the horse as a vermifuge or as a nauseant, or a diaphoretic; and a greater quantity has been administered without unpleasant consequences. A drachm of the superacetate of lead would destroy a dog; an ounce has destroyed the horse; a pig will drink almost enough to float him, with impunity.—*Provincial Med. Gazette.*

Anatomy of the Skin.—Dr. Weber, of Leipzig, asserts that the sebaceous follicles of the skin are organs distinct from the bulbs of the hair, and that they exist over the whole surface, excepting the palms of the hands and soles of the feet. The bulbs of the large hair are situated very deeply in the derm, and sometimes penetrate even into the subcutaneous adipose tissue; the sebaceous follicles, on the contrary, are nearer to the cutaneous surface, and are never found extending to the adipose structure. Their size, also, says he, is too large to permit them to be confounded with the bulbs of

the hair, which are much smaller. In new-born children, sebaceous follicles may be discovered on all parts of the skin, with the two exceptions already named. The skin of the scrotum shows them very much developed: each of these follicles is composed of four or five compartments, or cells, agglomerated together; their transverse diameter exceeds their depth. The greatest diameter observed by the author was a quarter of a line.—*N. A. Med. and Surg. Journal.*

Diagnosis of Dislocation from Fracture of the Neck of the Humerus.—The first part of the sixth volume of the Repertoire contains Dupuytren's directions for distinguishing dislocations of the humerus from fractures of its neck. The position of the arm at the time of the fall is one means of discrimination. If it were thrown outwards or forwards to break the fall, so that the hand first struck the ground, dislocation is the more probable accident. If the person have fallen on the shoulder, while the arm was close by the side, fracture is more likely. Even when the patient cannot tell in what manner he fell, much may be gathered from the marks of contusion and abrasion on the hand in the former case, and on the shoulder in the latter. In luxation, if ecchymosis occurs, it is on the inner and fore part of the arm, because it arises from the laceration of the parts on the inner side of the joint. In fracture, in which it is more common, it is on the top of the shoulder itself, because it is produced by the direct contusion. In dislocation, the prominence of the acromion, and the flattening of the deltoid, are greater than they are in fracture. In the latter, the muscle seems shortened and swollen. In luxation, there is a hollow on the inner side of the deltoid, from the removal of the head of the bone. This is less conspicuous in fracture. These, with the differences in the

shape of the bony tumor in the axilla, in the degree of mobility, in the facility of reduction, and with the presence of crepitus in the one, and its absence in the other, sufficiently distinguish the two accidents.—*Glasgow Medical Journal*.

Suspended Animation.—In a memoir presented to the Royal Academy of Paris, M. Leroy condemns full inflation of the lungs in cases of suspended animation. He related some experiments on rabbits and sheep, to prove that “air, driven once with force into the lungs, occasioned sudden death, and that by full inflation, suddenly made, the pulmonary cells are ruptured.” In some cases, air was found in the bloodvessels and cellular substance of the lungs. The rapid distension of the stomach with warm water, and the sudden removal of it, by means of an instrument made by Mr. Read for the purpose, by agitating the thoracic viscera, and at the same time diffusing caloric through them and the abdominal contents, are of much greater consequence in cases of suspended animation than inflation of the lungs. By inflating the lungs with cold air, the heart is robbed of the chief vital stimulant, caloric, which the object of treatment should be to increase.

The application of warm water to the head, warm lavements, and dry friction on the surface of the body with warm flannel, and occasional compression of the ribs, are powerful auxiliaries to the rapid injection and ejection of warm water. Indeed, besides electricity and galvanism,

and occasional agitation of the body, what more can be done to bring the vital organs into action?—*Gaz. of Health*.

Strangulated Rupture.—The Editors of the *Journal of Medicine*, published in Bourdeaux, have given a case of a large inguinal rupture, which had been in a state of strangulation for five days. Numerous attempts to reduce it having failed, Dr. Brulateur was requested to visit him. The Doctor, after examining the tumor, ordered ice to be applied to it, a large dose of castor oil to be administered, and blood to be taken from a vein. This treatment failing, he introduced a bougie, thickly besmeared with purified opium, into the urethra; soon after which the patient fell asleep, during which the rupture disappeared, and soon after awaking, he had two foetal evacuations.—We should certainly have given a preference to the extract of the belladonna, and have introduced it into the rectum, instead of the urethra; or rubbed a solution of it over the tumor,—a practice, the good effect of which we have noticed in a late number.—*Ib*.

Locked Jaw.—An Italian journal relates the case of a woman affected with locked jaw, following a slight wound of the forehead, which was cured by applying the acetate of morphine to a blistered surface on the nape of the neck. Thus applied, it speedily exerted its peculiar antispasmodic powers, although, when administered internally, it proved of no avail.

WEEKLY REPORT OF DEATHS IN BOSTON, ENDING DECEMBER 3.

Date.	Sex.	Age.	Disease.	Date.	Sex.	Age.	Disease.
Nov. 25.	M.	20 yrs	measles		F.	4 yrs	unknown
26.	M.	23	throat distemper	2.	F.	3	convulsions
	F.	75	consumption		M.	35	consumption
	M.	8	unknown		M.	21	dropsy in the head
28.	M.	7 w	lung fever		M.	9 mo	convulsions
29.	M.	45 yrs	consumption	3.	F.	5 yrs	croup
	F.	10 mo	scrofula		M.	21	intemperance
Dec. 1.	F.	52 yrs	consumption		M.	10 mo	infantile
	M.	2	croup				
Males, 11—Females, 6.				Stillborn, 3. Total, 20.			

ADVERTISEMENTS.

MEDICAL SCHOOL OF MAINE.

THE MEDICAL LECTURES at BOWDOIN COLLEGE will commence on TUESDAY, February 23, 1830. Theory and Practice of Physic, by JOHN DELAMATTER, M.D. Anatomy and Surgery, by J. D. WELLS, M.D. Midwifery, by JAMES McKEEN, M.D. Chemistry and Materia Medica, by P. CLEVELAND, M.D.

The ANATOMICAL CABINET is extensive, and very valuable.

The LIBRARY, already one of the best Medical Libraries in the United States, continues to be every year enriched by New Works, both foreign and domestic.

Every person becoming a member of this Institution, is required to present satisfactory evidence that he possesses a good moral character.

The amount of fees for admission to all the Lectures is \$50. Graduating fee, including diploma, \$10. There is no matriculating fee. The Lectures continue three months.

Degrees are conferred at the close of the Lecture term in May, and at the following Commencement of the College in September. A systematic course of instruction, embracing Recitations in all the branches of Medical Science, Demonstrations, and Lectures, will be given by the Professors, during the interval between the annual courses of Lectures.

Boarding may be obtained in the Commons Hall at a very reasonable price.

Brunswick, Dec. 4, 1829.

Dec. 15.—4teop.

CONSOLIDATED COPAIVA.

“COPAIVA may be given in this form without the least inconvenience. Neither communicating taste, nor imparting odor to the breath, it is also retained without the least disquietude or uneasiness to the stomach; and I am informed by Dr. Rosseau, that in large doses it does not purge.”—*Phil. Journal of Med. Sciences.*

See an article in this Journal, Aug. 18th.

EUROPEAN LEECHES.

An excellent lot of European Leeches, which will be sold at a reasonable price, or applied, in any part of Boston or in the vicinity.

For sale by NATHAN JARVIS, 189 Washington Street, where Physicians will find medicines at as reasonable terms as at any place in Boston.

Aug. 25.

eoptf.

ANATOMICO-SURGICAL DRAWINGS, and Descriptions of all the Surgical Operations, according to the most approved methods. By L. J. VON BIERKOWSKY. Translated from the German. In two volumes, and 570 drawings on 58 folio plates.

EXTRACTS FROM THE PROSPECTUS.

“Encouraged by the approbation of the Medical Profession, it is proposed to publish a work under the present title.”

“This work contains 570 drawings, on 58 plates folio; to which is annexed, in two volumes 8vo. a concise explanation of each surgical operation. The plates exhibit not only the parts interested in operations, in their natural position and size, but, what is much more important, represent the different acts or stages of the whole operation, while others exhibit delineations of such morbid affections as consist in the change of the natural position, structure, color, &c. In order to afford the work at a moderate price, the plates will be Lithographic; and for the purpose of securing perfect accuracy, engagements have been entered into for their preparation in Berlin, under the especial direction of two of the most distinguished Professors of the University of that city.”

A specimen of the translation, and the plates, is deposited for inspection at the Bookstore of CARTER & HENDEE, who receive subscriptions for the work.

Subscribers will be furnished with the work, and the first impressions of the plates, at the price of \$30.

The subscription list will be open until the 1st of November, 1829, after which period the price of the work will be raised to \$40.

P. S. For the accommodation of subscribers the work will be issued in five Numbers, at \$6 each, payable on delivery. Sept. 29. 18202N1D.

ATREATISE on the Scrofulous Disease, by C. G. HUFELAND, Physician to the King of Prussia, &c., translated from the French of M. Bousquet, by Charles D. Meigs, M.D., is just received and for sale by CARTER & HENDEE.

Sept. 8.

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

I.

VAGINAL DISCHARGES.

On the Use of Nitrate of Silver in Vaginal Discharges.

By GEORGE JEWEL, Esq.

THERE are no diseases, to which the female system is liable, more common, or, to a superficial observer, more diversified or anomalous in their character, than those which are attended by vaginal discharges. So intractable, indeed, do they sometimes prove, as to induce, by their long continuance, even under ordinary circumstances, the severest dyspeptic symptoms, feverish paroxysms, hysterical uneasiness, excessive languor, and emaciation; or, by operating upon the brain through the medium of the digestive organs, occasion other sympathetic affections, still more serious in their nature and termination.

It must be familiar to the practitioner, that every discharge which issues from the vagina, not sanguineous, is among females usually included in the term *Leucorrhœa*, or "whites." There is also a very popular opinion that vaginal discharges have their origin in constitutional or local debility: hence a complaint of this kind is denominated a "weakness." That such a term should be employed to perpetuate an error in practice, is to be lamented; for I believe, if we

investigate into the pathology of *leucorrhœa*, we shall find, for the most part, general or local increased action to be the exciting cause.

It would appear, from a strict investigation into the numerous causes of *leucorrhœal* complaints which have fallen under my observation, that one uterine affection gives rise to vaginal discharge more frequently than any other,—namely, a subacute or chronic inflammation of the *cervix uteri*. I am disposed to believe, also, that very many of such cases are mistaken for *carcinoma uteri*, and that, in consequence, either no remedies are prescribed, or a very inefficient mode of practice is adopted. I am aware that, in many cases, the train of symptoms about to be noticed may be attributed to an irritable condition of the uterus, so ably described by Dr. Gooch. I cannot, however, easily relinquish the opinion I had originally entertained upon the subject, namely, that inflammation, either of the chronic or subacute kind, of the *cervix uteri* is, in the majority of cases, the exciting cause of vaginal discharge. The distinction, however, although pathologically recognised, cannot, I conceive, be material in practice: indeed, this will be obvious to the talented author himself, whose mode of practice, in cases of irritable uterus, appears precisely applicable to cases of chronic uterine affections generally.

Again, in some cases it may be difficult to discriminate between such diseases as I have alluded to, and incipient scirrhus disorganization. The following remarks will probably assist the young practitioner in his diagnosis :—

This inflammation of the cervix uteri, like scirrhus or other organic disease of the uterine system, attacks occasionally at the period of life when the catamenia are about to cease; but I have more frequently found it to exist in married women, from the age of twenty-six or twenty-seven to that of forty, and very recently I have seen several severe cases occurring in young married females, within three months after the birth of the first child. The local symptoms in both diseases are very nearly allied, namely, occasional lancinating pain, more or less acute, through the region of the uterus, with a constant dull kind of pain about the inferior portion of the sacrum, the hip, or groin; attended also by an irritable bladder, or frequent desire to void the urine, and in some severer cases by tenesmus. The vaginal discharge is of a milky or cream like color, and is commonly, but particularly in the more acute cases, mixed with a dark-colored or grumous secretion. Upon making an examination per vaginam in this disease, the os uteri will not be found opened to the same extent as in carcinoma, nor will its margin present the same cartilaginous hardness to the touch. The pain does not appear to be situated in the edges of the os uteri, as described by Mr. Burns, but in the cervix, as pressure upon this part alone occasions the patient to complain. The uterus will be found projecting lower in the vagina than natural; but this will depend upon

the nature of the complaint: the more acute, the farther it will have descended.

It is not my intention to dwell upon the routine practice usually had recourse to in uterine diseases; such as the local abstraction of blood, perfect rest, narcotics, the warm bath, &c.; but rather to draw the attention of the profession to a therapeutical agent, which I believe has never, or to a very limited extent, been employed in such cases, namely, the nitrate of silver, applied directly to the part affected; a practice which I have been led to adopt, from having so frequently witnessed the extensive and healthy changes which have resulted from the application of this remedy to the different mucous tissues, when their secreting surfaces had taken on a disordered or unhealthy action. The mode I have adopted in its application has been either to conceal it in a silver tube, upon the same principle as it is employed in cases of stricture (except that the tube should be adapted to the size of the caustic), or in the form of solution, in the proportion of three grains to the ounce of water, the strength being gradually increased. A bit of sponge, firmly and neatly tied to a piece of whalebone, is to be moistened with the solution, and carefully introduced into the vagina up to the os and cervix uteri. This mode of application is preferable to the injection, and can easily be effected by the patient herself. The application should be frequently made, or no permanent good can be anticipated.

The following cases, which I have selected from others in consequence of their having been unusually protracted and severe, will

exhibit the mode of treatment successfully practised.

I. Feb. 24th.—Mrs. C., æt. thirty-three, had been delivered, three years ago, of a healthy child, after an easy labor. For the last two years and a half, she has been subject to constant and profuse leucorrhœal discharge, with frequent and shooting pains through the region of the uterus, and about the right groin, with occasional dysuria and tenesmus. The general health is greatly disturbed; bowels irregular, with loss of appetite. Upon making an examination per vaginam, pressure of the finger upon the cervix uteri occasioned considerable pain, which, in subsequent examinations, often continued several minutes after the finger had been withdrawn. The os uteri was not indurated, but considerably more open than natural. She had been under the care of several respectable practitioners, and the impression on her mind was that she was laboring under cancer of the womb.

In the first instance the usual mode of treatment was adopted: blood was abstracted by means of cupping from over the inferior portion of the sacrum, to the amount of eight ounces, and repeated three times, with an interval between each of about three weeks. She had taken aperients frequently, and injections of various kinds had been used with little or no benefit.

July 2d.—The nitrate of silver was conveyed by means of the tube, and applied to the cervix uteri for the space of a minute, which occasioned no degree of pain, except what might have been produced by the introduction of the finger.

6th.—The nitrate of silver again applied as before.

9th.—The discharge has diminished, but the pains not having abated, eight leeches were ordered to be applied to the right groin.

12th.—The nitrate of silver again applied.

18th.—The discharge is lessened considerably; and the patient now expresses a belief that she shall soon be restored to health, having previously imagined her case to be hopeless. The nitrate of silver again applied.

27th.—The pain is relieved; general health is improved, and she sleeps well at night. The nitrate of silver applied in the usual manner. It is necessary to observe, that she has taken the hyoscyamus at night (one drachm of the tincture), and the bowels have been regulated by aperients. The following tonic has been prescribed:—

R. Infus. Rosæ ʒ viiss.

Sulph. Quininæ ʒi.

Elix. Vitriol ʒi. M. fiat mist.
sumantur cochlearia duo amplater in die.

August 8th.—The discharge is scarcely perceivable. The nitrate of silver applied as before.

25th.—The patient is perfectly well, having neither vaginal discharge nor local pains.

II. A poor woman, residing in Gardener's row, Westminster, about forty years of age, having several times aborted, had been subject to excessive vaginal discharge for the last eighteen months, with shooting pains through the pelvic region and about the coccyx, and excessive itching of the pudendum. The digestive function was greatly disturbed,

and the system exhibited evident proofs of a highly disordered state of the general health. She had taken for a long period different preparations of bark, steel, &c., and had used various injections, with little or no benefit. Blood had also been extracted locally, by means of leeches. Upon making an examination per vaginam, the cervix uteri was found in the usual irritable and painful state, the margin of the os uteri being perfectly free from induration.

June 12th.—The sponge, as before recommended, was introduced, being well saturated with the solution of nitrate of silver, in the proportion of three grains to the ounce.

16th.—Applied as before.

19th.—The leucorrhœal discharge is thinner, and less in quantity. The patient was directed to introduce the sponge daily in the same manner.

30th.—Has regularly complied with the directions given, and says she is quite well.

August 2d.—Has had no return of the vaginal discharge, and her appearance is much improved. As a matter of course, attention has been paid to the state of the bowels, and the general health.

A case of still greater severity has recently fallen under my notice, which resisted for a very long period all the means which had been tried by several eminent practitioners. At length the iodine was administered, under the influence of which, together with the application of the nitrate of silver, the disease gradually yielded, and the patient is now in perfect health.

I cannot conclude this paper without remarking that there is

nothing more empirical than to hold up a particular remedy as a specific in the cure of disease, or to expect it invariably to exert its curative influence upon the function or structure of an organ, under all the diversified circumstances of morbid action. Let it not be imagined that I place such implicit confidence upon the nitrate of silver, as to expect it to eradicate, as if by magic, all such diseases as those to which I have adverted: at the same time I confidently believe that, if it be judiciously applied where the vaginal discharge has its origin, or is kept up by inflammation of the cervix uteri or vagina, or by the irritable uterus, and when general principles have not been neglected, there is no remedy so likely to afford such immediate and permanent relief.—*London Med. and Phys. Journal.*

II.

TOOTHACH,—TARTAR.

In a late work on the Anatomy, Physiology, and Diseases of the Teeth, by Thomas Bell, F.R.S. F.L.S., &c., we find the following remarks on the treatment of that extremely painful affection, the toothach. Mr. Bell is well known as a Lecturer on the teeth at Guy's Hospital, London.

Of the few local applications which are found useful in this malady, the following, he says, are perhaps the most efficacious:—

- R. Aluminis ʒi.
Spir. Æther. Nitrici f ʒ ss. Misce.
- R. Acid. Muriat. f ʒ ss.
Aquæ distillatæ f ʒ ij. Misce.
- R. Argenti Nitrat. gr. i.
Aquæ distillatæ f ʒ i. Misce.

A small bit of lint, wetted with either of these liquids, may be frequently introduced into the cavity, which should be carefully dried previous to each application.

It is however only by treating this affection, as nearly as the circumstances will admit, upon the same principles as inflammation in other parts, that any relief can, in general, be rationally expected. In those attacks, therefore, in which the inflammation is considerable, and there is any particular reason for preserving the tooth, leeches should be freely and repeatedly applied to the gum, the bleeding being encouraged by repeatedly holding warm water in the mouth. After the inflammation and pain are thus reduced, should the nerve be only in a small part exposed, the means already mentioned for diminishing its sensibility may be had recourse to. But the hope of relief which these remedies may, from occasional success, hold out, is in most instances completely fallacious, and the extraction of the tooth can alone be depended upon.

Respecting the operation of cutting, or rather breaking off the decayed teeth, which has recently obtained among some highly respectable dentists, Mr. Bell says:—

It is an operation irrational in its principle, often useless in its immediate effects, and in its consequences most pernicious. It has always appeared to me to place the operator in a dilemma of evils. The object, I presume, is to cut through, or, more properly, to break off the tooth so low as to remove the whole of the crown, including the cavity which contains the pulp or mem-

brane. If this object be effected, the consequence is that the dead roots remain in the alveoli; and these, if not immediately productive of pain, may yet be expected to occasion much future suffering as extraneous irritating bodies. Every one knows what is the usual result of the existence of dead roots in the jaw, when they have been left either by accident in an attempt at extraction, or by the gradual decay of the crown; and it is surely too much to adopt as an useful operation, that which every one deprecates as an accidental occurrence.

If, on the other hand,—as indeed it frequently happens,—the object aimed at be not fulfilled, the case is placed in a situation incomparably worse than before, the nerve being still more exposed, and the hope of the ready and easy extraction taken away by the loss of that part of the tooth which would have afforded a solid support for the instrument.

Tartar, accumulating on the teeth, is doubtless the cause of much disease in these useful instruments.—On this subject Mr. Bell remarks that—

The constant use of a tooth-brush will, in many cases, be sufficient to keep the teeth free from tartar. The brush should not be very hard, as it will not only be more difficult to clean the interstices between the teeth,—the part in which the tartar is most likely to be deposited,—but, by its friction, will occasion the gradual absorption of the gum, and the exposure of the necks of the teeth. The hair of the brush should be firm and elastic, and not too closely set. The teeth should

be thoroughly brushed in every part, at least night and morning, and the mouth always rinsed after each meal. In those constitutions in which there is a particular tendency to form tartar, it will be necessary to have recourse to some simple tooth-powder, such as prepared chalk, or any other substance equally simple and soft; it may, in some cases, be desirable to combine with it a small proportion of the bone of the cuttle-fish very finely powdered, and, if the gums are spongy and lax in their texture, a little alum, powdered myrrh, or bark, may be added with advantage. Many of the tooth-powders which are offered for sale, with the promise of rendering the teeth beautifully white, perform for a time all that is promised, at the expense of permanent and irremediable injury to the teeth; for they often contain a quantity of tartaric or other acid, which effects a gradual decomposition of the enamel. The use of acids to the teeth cannot be too strongly deprecated. Even where it is necessary to administer acid medicine, it is of considerable consequence that it should be taken through a glass tube, to prevent it from acting upon the enamel of the teeth. For want of this simple precaution, the teeth are very often irremediably injured by the use of this class of remedies.

The tartar is to be removed by means of instruments adapted for the purpose, and commonly known by the name of scaling instruments. They are of several forms, accommodated to the different situations from which the tartar is to be removed, and should be highly tempered, and the edges kept sharp and hard. It is of

consequence that every particle of it should be taken away, not only from the external and internal surface of the teeth, but also between them: for if it be suffered to remain in any part, it forms a nucleus, around which a further accumulation will be immediately deposited. When the tartar exists in considerable quantities, and especially if the teeth are at all loosened, it is proper to remove it at different times, with an interval of some days, that the teeth may recover from the effects of the first operation before the second is performed; and in order that they may receive as much benefit as possible from this plan, the tartar which is formed around the necks of the teeth, and which has been the cause of the loss of the gum, and the consequent loosening of the teeth, should be first removed, which will allow of the gum being partially restored, and the teeth rendered, in some measure, firmer, and capable of bearing, without injury, the subsequent operation. In the mean time, this object will be much assisted by the frequent use of some astringent lotion, according to either of the following formulæ:—

- R. *Aluminis* ℥ iss.
Tinct. Myrrhæ f ℥ iij.
Mist. Camphoræ f ℥ vss. *Misce.*
R. *Vini Rubri Lusitan.*
Mist. Camphoræ āā f ℥ ii. *Misce.*
R. *Infusi Rosæ* f ℥ ii.
Decoct. Cinchonæ f ℥ iv. *Misce.*

III.

RESTORATION OF A GREAT PORTION OF
 THE CHEEK BY OPERATION.

A CHILD, nine years of age, was affected with gangrenous inflammation, which destroyed the soft parts constituting the lower half

of the right cheek, and extending from the symphysis to the angle of the lower jaw. The breach of surface was 1 1-2 inch in diameter in every direction. It left but a few lines of the commissure of the lips, and anteriorly was blended with the opening of the mouth. Backwards, it terminated a third of an inch from the anterior border of the masseter; beneath, it nearly reached the basis of the jaw. In the centre of the opening was seen the tongue, which had formed preternatural adhesions by which its movements were impeded, and mastication and deglutition rendered difficult. Another inconvenience, still more formidable, was the constant escape of the saliva. M. Dupuytren tried, about two months ago, to destroy the adhesions of the tongue, but his efforts have been nearly unavailing, as it has always united itself again to the edges of the perforation. About the middle of August, he directed his attention to the removal of the gap by which the saliva escaped. His plan was to borrow a flap of skin from the neck, to twist it, and apply it to the opening, having first cut the edges, so as to afford a raw surface. M. Serres, a young surgeon, of Montpellier, who saw the patient, suggested a proceeding analogous to that adopted for hare-lip. To this, M. Dupuytren objected that the cicatrix thus formed would be kept constantly on the stretch, and that this would cause irritation, if not disorganization. At the same time, he acknowledged the risk of the flap sloughing, and that, even if it united well, it would still be without the buccinator muscle.

On the 30th of August, M.

Dupuytren performed the following operation:—He traced a flap on the lateral and upper part of the neck, anterior to the sternomastoideus; and having cut the edges of the breach in the cheek, he dissected the flap with care, avoiding to wound the external jugular vein; then twisted it on its pedicle, and fixed it by five points of suture. The wound in the neck was immediately united by means of three needles: the operation was long and painful. One or two small arteries were tied, and the patient replaced in bed, without any dressings having been applied. The first night was passed without accident; the child had some hours sleep.

Sept. 2d.—Moderate fever. The flap is alive; some points of suppuration on its edges.

During the night of the 2-3d, some delirium. Inflammation more intense. The flap beginning to separate from the lower part, in consequence of the suture tearing through the lip, it was retained by straps. Next night, delirium more severe; the flap separated at another point, and the opening extending between the two presented a vertical separation about an inch long. The fever now ran high, and the suppuration became fetid. The posterior and upper part of the flap appeared to live, and to have contracted from adhesions. The external edge seemed to be dead. All the sutures were now removed, and the parts supported by means of straps.

5th.—The symptoms abated; some points of suppuration continue on the edge of the flap, but the success of the operation is secure, with the exception of the separation above mentioned, which

will admit of remedy by the common process for hare-lip.

22d.—The consolidation of the parts being complete, the edges of the aperture which remained were pared and brought together with four twisted sutures. After this the case went on well, and the only remaining evil is the adhesions of the tongue. These, M. Dupuytren means, if possible, to destroy.—*La Lancette*.

IV.

APOPLEXY OF THE EYE.

APOPLEXIES have prodigiously increased since the time of Laennec;—thus we have apoplexy of the lungs, of the liver, of the skin, &c; and to these we are now, it seems, to add apoplexy of the eye.—Louisa Martin, aged 45, ceased to menstruate during three months, without inconvenience. She had suffered some injury of the eyes, in early life, from smallpox, and had always had weak sight. To these symptoms had lately been added some appearance of incipient cataract, and within the last twenty days she had been affected with an acute and permanent pain in the right side of the head, with throbbing. Besides this, however, there was no change in the habi-

tual state of her eyes till the night of the 28-9th of August, when she experienced a sharp pricking in the right eye, giving the sensation of a foreign body, which she endeavored to get rid of by rubbing the part. In the morning she found that the sight of that eye was lost. She applied fomentations of rose water, and afterwards cold spirits and water, without avail. On the 6th of September she was admitted at La Charité. The ball of the eye was slightly tumefied; the vessels of the conjunctiva injected; the cornea of the affected side more prominent than the other, and perceptibly softer; behind it was seen an effusion of blood, occupying the lower part of the anterior chamber, changing its place with the movements of the head, and rising to a level with the edge of the pupil. The headach and pricking continued but slightly. The pulse was natural, but there were night sweats.

As this patient exhibited, at the same time, signs of gastric disturbance, an emetic was ordered on the 7th; which was the only treatment adopted till the 10th, when an astringent wash was prescribed; but, as yet, the blood effused has not been re-absorbed.—*Ib*.

SKETCHES OF PERIODICAL LITERATURE.

TESTS OF INFANT LIFE.

THERE is probably no subject within the range of medical jurisprudence which has been more agitated, than that of the tests by which the extra-uterine life of the infant is to be

determined from post mortem examination. The following considerations on this topic are abridged from an interesting article in the London Medical and Physical Journal.

Of the great changes which take place in the functions of the animal

economy in passing from the fetal to the vital state, there are some which being accompanied or followed by organic changes, leave a greater or less degree of evidence by which they can be recognized. These regard the functions of respiration, of circulation, and of digestion. The tests of extra-uterine life may therefore be considered under this threefold division.

The effects of respiration are produced partly on the lungs, and partly on the cavity in which they are contained. The change in the thorax regards its size and form; that in the lungs regards their color and consistence, their absolute and specific weight, and their size and situation.

1. The diameter of the thorax in both directions is increased after this function has commenced. An enlargement also takes place in this cavity from above downward, in consequence of the decrease of the concavity of the diaphragm.

2. In fetuses which have never breathed, the lungs are for the most part of a dark red color, which is more remarkable posteriorly on account of the subsidence of the blood. In those whose lungs have been artificially inflated, the color anteriorly is paler. Where some effort has been made at respiration, the general color is the same, but a few spots of a cinnabar-red color are discernible in certain portions of the pulmonary tissue. Where respiration has continued for a short time, the general color is paler red, and the spots are more numerous. Where this function has been perfectly established, the pale red color predominates, with

numerous spots and patches of the cinnabar-red color, and with a darker hue in the posterior part, in which the blood has settled.

3. The density of the lungs is very greatly altered by the establishment of this function. In the fetus which has never breathed, the lungs are firm and compact, like the liver; no crepitation takes place on cutting into them, neither do they emit air when subjected to pressure under water. Where artificial inflation has been employed, or respiration has been imperfectly established, the upper lobe of the right lung will be found to crepitate, and will yield air on pressure. Where respiration has been fully established, these phenomena will occur in every portion of the lungs. In this case innumerable air cells will be found in each part which is examined; distinct crepitation will occur on dissection; and upon pressure under the surface of water, numerous air bubbles, mixed with froth, will rise to the surface.

4. The absolute weight of the lungs is greater after respiration has occurred, and the circulation through these organs established. In order, however, to render this test available, the weight of the lungs must be taken in connection with some circumstance which indicates the magnitude of the fetus. The weight of the whole body most obviously suggests itself as the standard; but this in fact varies much more than that of the lungs; and a more convenient and accurate denominator is furnished by the length in inches. A table, founded on this principle, and exhibiting the weights corresponding to non-

respiration, imperfect and perfect breathing, the length being a given number of inches, has been prepared by Mr. Berndt.

5. As regards specific gravity, it is established, that according as respiration has or has not been present, the lungs will swim or sink in water. When respiration has been perfect, they are sufficiently light to float the heart. The fallacy arising from the occurrence of putrefaction, and the consequent evolution of gases, must here be guarded against.

6. The size of the lungs is the last criterion to be considered in this connection. Previous to respiration, these organs cover the posterior part of the chest, and half the arch of the diaphragm, extending so as merely to touch the pericardium. Their extent increases as the function is established; and when breathing has been perfect, they occupy the sides of the cavity, embrace the pericardium, and cover the whole arch of the diaphragm.

The second great function from which is obtained a test of the respiration is, as has been stated, the circulation of the blood. The most obvious organic change produced from this cause, takes place in the ductus arteriosus. This tube, which is open in the fetus with a diameter equal to that of a goose-quill, gradually contracts after birth, and in from two to three weeks is usually obliterated.

The last function to be mentioned is the digestion, and the structural changes connected with it, occurring in the liver and ductus arantii. The liver lessens in magnitude after birth, but not uniformly. The ductus

arantii contracts gradually, and becomes imperforate about the sixth day.

The following summary of the grounds on which the respiration may be presumed to have been perfectly established, is well calculated to assist the memory of the practitioner.

It may be concluded that the child has lived for a certain period after birth, and has breathed perfectly,—

1. When the transverse diameter of the thorax is from three to four and a half inches; the direct from three to three and a half; and the level of the arching of the diaphragm is between the sixth and seventh ribs.

2. When the color of the lungs is generally pale, with numerous cinnabar-red spots, stripes and edges; and dark red on their posterior surface, on account of the subsidence of the blood.

3. When innumerable cells, distended with air, and collected into insular groups, are plainly visible on the surface; and when the substance of the lungs is everywhere expanded and spongy, crepitating audibly when cut, and yielding air-bubbles and froth, under the surface of water.

4. When the absolute weight of the lungs, as compared with the length of the body, is manifestly and considerably increased.

5. When the lungs even in connection with the heart,—each lobe separately, and each portion of it when divided,—float under the strongest pressure, and are considerably lighter than water.

6. When the lungs quite fill the lateral parts of the thoracic cavity, their anterior edges covering the side of the pericardium, and their under surface the whole arch of the

diaphragm; when their edges are everywhere rounded, and the ligulate elongations of the right middle and left upper lobes are shorter and obtuse.

7. When the length of the arterial canal is contracted to some lines, its thickness to that of a crow-quill, while the thickness of the two pulmonary arteries is equal to that of a goose-quill.

8. When the stomach occupies a completely transverse position, and is either freed from the albuminous matters which it contains in a fetal state, or presents traces of milk, and other extraneous matters; when the bowels are in part or altogether freed from meconium, and, instead of it, contain yellowish feces; and when the urinary bladder is empty.

The table of Prof. Berndt, above alluded to, is as follows:—

1. Where the length is from 15 to 18 inches		
The weight of the lungs in still-born Males is	- - -	3 viijss.
In Females	- - -	vij.
After imperfect respiration, in Males	- - -	xij.
In Females	- - -	xij.
After perfect respiration, in Males	- - -	xv.
In Females	- - -	xiv.
2. Where the length is from 18 to 20 inches.		
Weight of lungs in stillborn Males	- - -	3 ix.
In Females	- - -	vijss.
After imperfect respiration, in Males	- - -	xijss.
In Females	- - -	xij.
After perfect respiration, in Males	- - -	xvi.
In Females	- - -	xivss.
2. Where the length is from 20 to 22 inches.		
Weight in stillborn Males	- - -	3 ixss.
In Females	- - -	ix.
After imperfect respiration, in Males	- - -	xiv.
In Females	- - -	xijss.
After perfect respiration, in Males	- - -	xx.
In Females	- - -	xv.

GUNSHOT WOUND.

A SINGULAR case of this kind is related in one of the late numbers of the Medical Gazette. A man was wounded, by the bursting of a gun, nearly at the point of insertion of the pectoral muscle in the left arm, and a fragment of the lock was left in the wound. This fact was suspected by the surgeon who first saw him, but the foreign body could not be felt on examination, and so slight was the uneasiness experienced from its presence, that the patient was unwilling to believe that it had entered at all. What uneasiness was experienced, however, was referred to the angle of the sixth rib and its vicinity. There was very little bleeding from the wound, but considerable tumefaction over the upper parts of the deltoid and biceps muscles. From about the fourth day the wound became clean, suppuration advanced, and the healing process went on favorably. At the end of a fortnight from the period of the accident, he left London for the country, apparently in good health. During the following week he continued tolerably well, and pursued his usual avocations, complaining only of pain in the side, below the left scapula, and of oppressed breathing, so that he could not respire with comfort unless his chest was supported by a broad belt. On the twenty-second day, after more than usual exertion, the above symptoms became aggravated, so as to induce him to call in a surgeon, and subsequently a physician, who resorted to the usual means for arresting inflammation,—but in vain.

Death took place just a month from the period of the accident.

On examination, the external wound was found not entirely healed, and admitted the end of a probe to the depth of half an inch. On exposing the lateral part of the chest, the only trace of disease which could be discovered was an irregularity of the surface of the sixth rib, not visibly communicating with the external wound. This rib proved to be fractured, and its broken ends, although in apposition, still ununited. In the cavity of the chest, were firm adhesions of the left lobe to the pleura costalis, and on the same side were found nearly three pints of opaque serous fluid, mixed with purulent matter, and containing a fragment of a gunlock, two and a quarter inches in length, which penetrated the lung obliquely about one inch and three-fourths. The rough extremity of this fragment protruded from the lung, and seemed during respiration to have rubbed against the ribs, which exhibited an ulcerated surface. It was situated so near the heart, that in its passage to the lung it had grazed the pericardium, the surface of which was suffused with blood. The substance of the lung, even where it had been penetrated by the foreign body, exhibited no mark of disease. At what period, and in what manner, the body found admittance into the chest; how the avenue through which it passed could be so entirely obliterated, and how it could have remained in contact with the lungs and the pleura without creating more irritation, are inquiries of considerable interest.

NON-MERCURIAL TREATMENT OF SYPHILIS.

THE practice of treating venereal cases without mercury, seems to have its advocates among enlightened and judicious practitioners abroad, as well as in this country. Dr. Desruelles, of the military hospital at Val de Grace, published, about a year since, a statement of the result of his experience in that establishment, founded upon minutes of more than fourteen hundred cases, which is well deserving of attention. Dr. D.'s conclusions are as follows:—1. That the tendency of different tissues to be affected by venereal disease, is in proportion to the number of blood-vessels and nerves with which they are respectively furnished; in other words, to their general susceptibility. The parts most liable to be thus affected, are therefore the mucous surfaces; next to these, the skin; and next, the glandular apparatus. The fibrous parts are placed next in the order of susceptibility, and the bones last. 2. That whatever medical treatment be adopted in these cases, a close adherence to vegetable diet and general antiphlogistic regimen, is highly important. 3. That on a careful comparison of the mercurial and anti-mercurial treatment, whether accompanied or not with a reference to the last direction, the former claims a decided preference. This result is established by a table, in which is stated the number of days required for the cure of cases under the different modes of treatment referred to. The proportionate duration of the cases treated with and without attention to regimen,

other circumstances being equal, was expressed by the numbers 33 and 55, giving a difference of 22 days in favor of the former. That of the cases treated without mercury, and with it, other circumstances equal, was 50 and 56. That of those where both these favorable circumstances were combined, to those where both were wanting, was 30 to 55, or as 6

to 11. Opportunities of so extensive and accurate a comparison of opposite modes of treating the same disease, are not very frequent; and indeed cannot be so. In the present instance the experiment seems to have involved no injustice to the patients themselves; and the results obtained are of considerable value.

BOSTON, TUESDAY, DECEMBER 22, 1829.

SOME inconveniences and erroneous impressions having resulted from an idea that this Journal is under the direction of the Professors in the School of Anatomy in this city, we would here repeat a notice we have already sent to several newspapers, that none of these Professors, nor any Medical Officer of the Hospital, has any control whatever over its pages.

SIAMESE BOYS.

THESE twins had not at the last date reached London.—The last London Medical Gazette contains Dr. Warren's account of them, which had been sent out to some gentlemen in that city. After giving the above-mentioned account entire, the Editors of the Gazette add:—

“There can be no doubt, as it appears to us, but that these individuals might be separated by a very simple operation, and almost with the certainty of giving to each the advantage of a separate existence.”

HERMAPHRODISM.

AN individual exhibiting this unfortunate irregularity of structure was admitted into Charity ward of Guy's

Hospital, Sept. 30th, under the care of Dr. Bright. She was then suffering under a severe form of fever, which rendered her constantly delirious, and in a few days proved fatal.

On her admission,* and more especially when, in order to apply a blister to her head, it was exposed and shaven, every one was struck with the coarse and masculine expression of her countenance: this, and her somewhat square and muscular figure, were all the observations relating to her sex that were made during life; but the post-mortem inspection disclosed the following appearances:—

A body analogous to the penis was observed immediately beneath the pubic arch; not free or pendant, but bound down towards the perineum; its length was about 2 1-2 inches, and it terminated in a somewhat bulbous extremity, a little like the glans, but without the usual delicacy of cutaneous organization, without any perforation for the urethra, and without a prepuce. On each side of this body there was a considerable fulness of the integuments, at first view resembling the female labia, but in reality analogous to the male scrotum, as, like it, they contained

* Speaking of her as a *patient*, we adhere to the sex then assumed. She was admitted as Mary Cannon, æt. 55 or 60.

each a small testis. This separation, into its two halves, of the scrotum, depended on the penis being bound down in the median line, as previously described. The testes were in size like those of a boy 6 or 8 years old, and were connected with vasa deferentia, which were found pervious, and considerably enlarged towards their termination. The vesiculæ seminales were very small; the prostate gland also was remarkably small, and was covered on its sides by a pair of peculiar muscles, passing from the rectum to the neck of the bladder. The urethra terminated in the perineum, about one inch from the end of the supposed penis, and half an inch further there was a blind opening, which fancy might call the rudiment of a vagina, but which was probably nothing more than an enlarged lacuna. The tunica vaginalis was continued some distance up the cord, but at the ring was quite closed. There was a very minute trace of the cremaster muscle. The pelvic viscera had no female character whatever, and the formation of the pelvis itself approached to the male rather than to the female standard. The mammæ were considerably developed, but would have been thought small for a healthy female. The lips and chin were clothed with a few scattered, irregular, curling hairs, not more than are often seen on aged females. The outline of the figure, in its muscular development, squareness and largeness of limbs, &c., was decidedly more male than female. The cerebellum was natural in structure, and if it differed at all from the usual development, was rather small, but this was by no means distinct. No other peculiarities, either diseased or congenital, were observed in any part of the body.

It appears that in the former part of her life, this hybrid had assumed the dress and habits of a man; at one time working in a brick-yard, at another period acting as a groom;

then as a milkman; and afterwards she kept a green-grocer's shop. Her habits and manners were rude and bold, sometimes indicating a degree of derangement; more than once she engaged with success in pugilistic encounters; and it is said manifested still less equivocal male propensities. For the last seven or eight years she has appeared as a female, calling herself Mary Cannon; and, it is odd enough, that she first sustained her new sex at a public house, called "The World turned upside down," where she engaged herself as "maid of all work." She was not, however, fully received by her female fellow-servants as one of them; suspicion hung about her, and care was always taken to provide for her a separate bed.—*Lon. Med. Gaz.*

Extraction of Cataract by means of an Incision through the upper Part of the Cornea.—This method, according to Graefe, offers numerous advantages over those more usually adopted. The consequences of the wound are less severe, and the sight is more perfectly relieved, because the lower part of the cornea remains untouched, and preserves its natural clearness and convexity. In eighteen individuals operated upon by the superior section, seventeen recovered their vision; in one only the cornea on one side became opaque, and this in consequence of a gouty inflammation which frequently returned.—*Bul. des Sc. Med.*

Lachrymal Calculus.—A middle-aged woman experienced pain, during two years, on the left side of the nose, with frequent fits of sneezing, and other symptoms of catarrh. Afterwards, a dryness of the nostril came on, with swelling and complete obstruction on the left side of the nose. This was followed by the sensation of a moveable body in the nose, and, soon after, she passed a concretion of some size from the nostril. It was nine lines in length,

and five in breadth; its color was a brownish grey, and its structure very compact. Being cut across with a saw, its centre was found to consist of a cherry-stone, around which, concentric layers of different colors were ranged,—green, brown and white: the patient was unable to call to mind any circumstance connected with the introduction of the foreign body into the nose.—*Ib.*

Application of a Concentrated Solution of Nitrate of Silver to the Eye.—This method has proved so useful in atonic and obstinate ophthalmia, with copious discharge, that M. Graefe thinks it his duty to direct the attention of practitioners to it. The method adopted is to insinuate a drop of the solution, with a hair pencil, between the eyelids.—*Ib.*

In this country, the above method is by no means unknown.

Extirpation of the Rectum.—M. Lisfranc, in two cases, removed three inches of the lower part of the rectum. The patients have done well. One was operated upon five, and the other two weeks ago.—*Archives Générales.*

Bone found in the Heart.—Dr. Barbier, of Amiens, presented to the Royal Academy of Medicine a very slender osseous body, an inch and a half long, and pointed at its two extremities, which he had extracted,

after death, from the right ventricle of the heart of a man, sixty-two years of age. This bone had pierced the ventricle in three places, and had commenced to pierce it in three others. The heart had probably pierced itself in its contractions, as the bone was situated transversely in the ventricle.—*Arch. Gén.*

Fetus affected with Fungous Hæmatodes.—Dr. Tonnele delivered a woman of a child, which had upon its right parietal bone an enormous fungous hæmatodes. The base of this tumor originated in the osseous tissue, and perforated it like a sieve; the dura mater was healthy.—*Journal des Progres.*

Study of Anatomy.—An address to the community on the necessity of legalizing the study of anatomy, has just been published by the Anatomical Committee of the Massachusetts Medical Society. This address, or some further account of it, will be presented to our readers in a future number.

Lithotripsy.—This new and important operation is engaging the attention of the profession abroad. An account of its merits and demerits, so far as experience has thus far developed them, is in preparation, and will shortly occupy a few of our columns.

WEEKLY REPORT OF DEATHS IN BOSTON, ENDING DECEMBER 12.

Date.	Sex.	Age.	Disease.	Date.	Sex.	Age.	Disease.
Dec. 5.	F.	72 yrs	apoplexy	9.	F.	37 yrs	hooping cough
	F.	3	lung fever	M.	3 mo	lung fever	
	F.	74	old age	10.	M.	7 yrs	bilious colic
	M.	19	drowned		M.	42	consumption
6.	M.	2 d		F.	24	do.	
	M.	10 mo	measles	M.	53	rheumatic fever	
	M.	3 yrs	croup	11.	F.	17	
F.	25	consumption	F.		15		
7.	F.	4 mo	measles		M.	20	
	F.	27 yrs	intemperance	M.	72		
	M.	3 mo	measles	M.	34	consumption	
8.	F.	10 d	convulsions	12.	F.	44	typhous fever
	M.	3 mo	canker in the bowels	Males, 13—Females, 12. Total, 25.			

ADVERTISEMENTS.

NEW MEDICAL BOOKS.

JUST published, and for sale, by **CARTER & HENDEE**,—Malaria; an Essay on the Production and Propagation of this Poison. By **JOHN McCULLOCH**, M.D. F.R.S., &c. &c.

An Essay on the Diseases of the Internal Ear. By **I. A. SAISSY**, M.D. Translated from the French, by **NATHAN R. SMITH**, M.D., Professor of Surgery in the University of Maryland; with a Supplement on Diseases of the External Ear, by the Translator.

Observations on the Utility and Administration of Purgative Medicines, in several Diseases. By **JAMES HAMILTON**, M.D., Fellow of the Royal College of Physicians, &c. &c. From the Fifth Edinburgh Edition.

A Treatise on Pathological Anatomy. By **WILLIAM E. HORNER**, M.D., Adjunct Professor of Anatomy in the University of Pennsylvania, Surgeon at the Infirmary of the Philadelphia Almshouse, Member of the American Philosophical Society, &c.

Elements of Operative Surgery. Translated from the French of **A. TAVERNIER**, Doctor of Medicine of the Faculty of Paris, &c., with copious Notes and Additions. By **S. D. GROSS**, M.D.

Dec. 22.

MEMORIA MEDICA.

THIS day published by **CARTER & HENDEE**, corner of Washington and School Streets, *Memoria Medica*,—a Medical Common-place Book,—with an alphabetical Index of the most common terms occurring in practice. Carefully selected and arranged by a Fellow of the Massachusetts Medical Society.

From Dr. James Jackson, Professor of the Theory and Practice of Medicine in Harvard University.

Gentlemen,—I have examined the “*Memoria Medica*” which you sent to me. I think the plan of it very excellent, and that it will be found highly useful to practitioners and students of medicine. I have never believed that a voluminous common-place book can be very beneficial to any man, unless he means to become an author. But on the other hand, every one will find an advantage in keeping a common-place book in which he may notice the detached facts which

come under his notice, and which are likely soon to be lost from his memory. The book you have prepared will be found well adapted for this purpose by medical men, and will be more likely to be used by those who procure it than a common blank book, because all the labor of arrangement is saved.

I am, gentlemen, your obedient servant,
JAMES JACKSON.

From Dr. Walter Channing, Professor of Obstetrics and Medical Jurisprudence in Harvard University.

I have examined the Medical Common-place Book which was left with your note this evening, and with pleasure offer you my thanks for the publication of so useful a volume. Every practitioner of medicine will agree with the remarks in the preface on the inconveniences and absolute loss of what is very useful, which result from depending solely on the memory. Not unfrequently it happens that some particular prescription is peculiarly suited to an individual. Some time passes, and an occasion again arises in which we believe that the same medicine might be equally beneficial; what it was, however, has wholly escaped us; and though something else may be equally useful, still some regret may be felt, at least by the patient, that what has been found beneficial cannot again be at once resorted to. Some object to an artificial method of preserving, for such and other uses, what may be safely trusted to the memory, if that faculty be faithfully cultivated. I am willing to admit that there is force in this objection; but it is a simple question of fact only we have to consider. If it be true that there is much lost to the individual, and certainly much more to the profession, by trusting entirely to the memory, the occasional use of the Common-place Book for the preservation of what is truly valuable, has all the recommendation it needs. For such purposes, viz., for the registering of cases the most rare, and the frequent, if important, epidemics, prescriptions, &c., your *Memoria Medica* promises to be very useful; and for these it well deserves to be recommended to physicians. Students attending hospital practice will find it very valuable. Its tables of names are very full, and under references very easy. I cannot but hope it will get into general use.

Yours, &c.,
W. CHANNING.
Dec. 8.

Published weekly, by **JOHN COTTON**, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

I.

DISCOVERY OF A NEW SPECIES OF
INGUINAL HERNIA.

SUCH is the heading of a case, such the burthen of many preliminary observations from the reporter, in the *Journal Hebdomadaire*. Our readers no doubt will stare at the announcement, after all the laborious dissections and labored descriptions that already conspire to bother the brains of our young aspirants to collegiate diplomas. But so it is, and it only remains to narrate the case, that is thus destined to swell the present dread array of minutæ in the history of hernia.

The subject, to our honor be it spoken, was an English groom, æt. 27, admitted into hospital on the 1st of June, with an oblong tumor, the size of a couple of fists, extending from the left inguinal ring to the bottom of the scrotum. The skin was red and tense; pressure was painful, and exasperated a fit of colic, which distressed the patient; constipation; vomiting of bilious matter; small and frequent pulse; cold moist skin. He had been subject for five years to a hernial tumor in the groin, which would seem to have never entirely returned, and for which he wore no truss. On the 31st of May, after violent exertion, he experienced sharp pain in the tumor, which soon became hard, enlarged,

and painful to the touch, and colic and nausea quickly succeeded. Between the first occurrence of these symptoms and his admission, attempts at reduction had been made without success.

The warm bath twice repeated, bleedings from the arm, and two tobacco enemata, were prescribed, but no amendment was found on the 2d, and the operation was performed. The sac contained an enormous mass of omentum, with a loop of intestine six or eight inches in length at its posterior part. The omentum was sound, the intestine of port wine color, but elastic, firm, and covered with lymph. The stricture was divided directly upwards, but on trying to reduce the gut, it returned as if by a rebound, and this part of the operation was only concluded after tedious, difficult, and painful efforts. What was now to be done with the omentum? excise it, or leave it where it was? M. Blandin determined on the latter; and after a proper dressing, an enema, and a bleeding, the business was at length completed.

No stool, however, succeeded (a *primâ facie* proof that a stricture remained), and on the 3d we find the patient worse in every respect. The omentum now presented blackish-brown patches, and the belly was the seat of pain. A castor oil enema, thirty leeches to the abdomen, and emollient fomen-

tations, were tried in vain, for the patient continued to sink, and died that afternoon.

Dissection, on the morning of the 5th.—Peritoneal inflammation, with sero-albuminous effusion into the abdomen;—almost the whole floating portion of the omentum in the sac; and the transverse arch of the colon dragged down, and held in contact with the abdominal parietes in the groin. On opening the inguinal canal from above, and drawing out the omentum, the intestine that had been thought to be returned, was found lying in the canal itself, and occupying a *cul-de-sac*, situated at its upper and internal part, and “formed by the hernial sac depressed on this side.” In endeavoring to account for this appearance, it was quickly perceived that the protruded parts had passed out by a laceration (*érraillement*) of the fascia transversalis, situated about two lines behind and above the internal ring, or superior orifice of the inguinal passage; that having passed through this laceration, they had then become lodged in the canal, and had extended both downwards to the scrotum, and upwards to the internal ring, producing, by this double course, a double depression or *cul-de-sac* in their peritoneal envelope. This disposition of the hernia explained the difficulty of reduction, as the gut, during these efforts, instead of passing back through the slit in the fascia, was thrust up into the summit of the inguinal passage. It also seems to us that the laceration itself, through which the rupture took place, could not have been divided to any extent, if at all, or the parts would still have been returned, though probably not with such ease as under ordinary circumstances.

It is evident that the above was only a species of *direct* hernia, after all; not occurring, as usually happens, in the weak part opposite the outer ring, or in some other portion of the abdominal parietes, where nature or accident opens the way, but *into* the inguinal canal. Of course, there is no reason why this description of hernia, always an anomalous occurrence at the best, should not take place here as well as elsewhere; but still we are not aware of any authentic or specific case of the kind, except the present.—*Medico-Chirurg. Review.*

II.

CURIOUS CASE OF ASCENDING PARALYSIS; WITH THE APPEARANCES ON DISSECTION.

CHARLES L., 35 years of age, robust, and in the military profession for fourteen years, during which he had served in the Russian and Spanish campaigns, and consequently been exposed to great fatigues and vicissitudes of climate. In June, 1826, he first perceived that his legs readily bent under him, and that he could not easily raise himself up from the sitting posture. In other respects he had no complaint. In about a fortnight after this, he began to feel numbness in his feet, which gradually ascended towards the knee. But while the surface thus lost its sensibility, the muscles beneath became the seat of acute pain, which was much exasperated by pressure. He had been a month confined to bed in this state, with nearly loss of all power in the lower extremities, when he perceived a numbness invade his hands. The progress was exactly similar to that in the inferior members; and he

was seen by the narrator on the 22d of September, of the same year. He was now completely paralytic, excepting the tongue, the face and the neck. These last became gradually affected. He had never complained of pain in his head, nor of any part of the spine; nor did the most rigid examination detect any physical lesion in this last organ. His general health was good,—his intellects perfect. He attributed his disease to rheumatism, contracted during his bivouacs in Spain. He made water voluntarily, and had a daily evacuation from the bowels. He slept and ate well. The skin was nearly of natural temperature, but quite insensible to pinching or pricking. Any pressure of the muscles, on the other hand, gave him great pain, and caused him to cry out.

Frictions of lytta and alcohol were assiduously employed along the spine, ammoniated liniments were applied to the limbs, and cinchona, with wine, was liberally exhibited internally. In the course of a fortnight, the sensibility of the skin began to return, and that of the muscles to diminish. The power of the muscles also gradually returned, but inversely to the way in which it had been lost,—namely, from above downwards. He was never able, however, to raise himself up on his feet. This amelioration continued but for a very short time, and he was soon as bad as ever. Blisters along the spine were added to the former measures. On the 3d of November, he became suddenly incommoded in his breathing; his pulse quickened; his countenance became anxious; he had cough: the intercostal muscles seemed scarce-

ly to move. In this state he lingered till the 7th of the same month, when he expired without any struggle.

Dissection.—The spinal canal was opened throughout its whole extent. There was very little blood in the venous sinuses. The dura mater in its natural state. The pia mater was sprinkled with calcareous depositions in the lumbar region, and was finely injected. The roots of the lumbar and sacral nerves, as also the great sciatic, were injected with black blood. The other nerves were very minutely examined, but nothing particular was observed. The spinal marrow was rather firmer than natural, and the same might be said of the medulla oblongata and brain. The lungs were filled with tuberculous matters, and there were some small abscesses. The heart was empty and flaccid. The whole of the abdominal viscera were sound. The muscles presented no appearance different from those of a person in health, except being more pale and flaccid.

The foregoing case will show with what a thick veil the functions and diseases of the nervous system are covered. What was the nature of the malady? Was it inflammatory,—or was it the reverse?—*Clinique.*

III.

PROLAPSUS ANI TREATED AFTER THE MANNER OF MR. HEY.

By Dr. McFARLANE.

THE subject of the following case was 54 years of age. On every attempt to evacuate the bowels, the

gut descended about two inches, and the patient experienced much pain and tenesmus. At other times, a prolapsus was induced by an erect posture; and a recumbent position and gentle pressure were always necessary to produce reduction. Frequent hemorrhage from the part, and the constant irritation, had considerably impaired his general health. Under these circumstances, Dr. McF. goes on to say:—

On examining the anus after the gut was replaced, the surrounding integuments were found extremely relaxed. There existed such an unnatural looseness in the attachment of the skin around the anus, to its corresponding cellular membrane, that it could be easily drawn out with the fingers, in the form of one or more large flaps. Having succeeded in two similar cases, which came under my care in the Royal Infirmary, during the summer of 1826, in completely curing the disease, by cutting off the loose integuments, as recommended by the late Mr. Hey,* I determined to try it in this case. The skin was drawn as far out as possible into broad flaps, and cut off with the scissors in a circular direction, until all the superfluous integument was removed, including a portion of the livid and tuberculated fold of mucous membrane which was projected from within the sphincter. The pain was trifling, and only a few drops of blood were lost. A soft compress and T bandage were applied, and he was strictly confined to bed. For a few days, a par-

tial procidentia took place, on every attempt to go to stool. He had a good deal of pain and inflammation around the anus, attended with complete retention of urine, which required the frequent introduction of the catheter. In ten days after the operation, he was able to walk about, and void his stools, without any return of the disease, and in three weeks he was perfectly cured. Pressure was continued to the part for some time longer,—occasional doses of castor oil were prescribed, and he was enjoined to avoid straining at stool.

There will generally be found in obstinate and long-continued forms of this disease, a great relaxation in the connexion of the rectum, at its lower part, with the surrounding textures. This circumstance, although it may not be the original cause, is sufficient, in many cases, to account for the continuance of the displacement in chronic and inveterate cases, although I believe it is generally accompanied by a diminished power of the sphincter. If the rectum, in consequence of being much irritated, as in various bowel complaints, ultimately becomes relaxed, the tenesmus, which is an invariable attendant, may so overcome the sphincter, as to give rise to a procidentia. But when, as in the case now detailed, the erect position is sufficient to cause a descent of the gut, we have grounds for believing, that besides the relaxed state of the rectum, there exists a want of power in the sphincter muscle, which part, along with the levator ani, is mainly instrumental in maintaining the rectum in its natural situation. In the cases de-

* "Practical Observations in Surgery, 2d edit., p. 444."

tailed by Mr. Hey, there existed, in combination with relaxation of the integuments, one or more livid tubercles at the verge of the anus, which were also removed. He expected, from this operation, that inflammation of the surrounding cellular texture would be excited, the attachments of the rectum consolidated, and the power of the sphincter improved. In a majority of cases, the disease will be found to yield (although the cure is often tedious and protracted) to the local applications and internal remedies usually employed. Should it continue, however, as sometimes happens, after the exciting cause has been removed, we will occasionally find that the loose state of the skin around the anus, and the relaxed attachments of the rectum, at its termination, become the primary causes of the continuance of the disease. It is, I conceive, in such circumstances, that this simple operation may be beneficially adopted.

IV.

FUNGUS HÆMATODES IN THE FÆTUS.

IN the *Journal de Progrès*, tome XIV., a notice of an instance of this kind is inserted by a gentleman who signs himself Tonnelé, D. C. Tubercles, it is well known, have been found in the fœtus in utero, but we certainly are not aware that any of the genuine malignant growths have been discovered, or recorded to have been discovered, at so early a stage of human existence.

On the 9th of December, 1827, M. Tonnelé was summoned to assist two of his confrères in con-

ducting to its termination a protracted labor, in which the back of the child presented. On our author's arrival, he found that the feet had with difficulty been brought into the vagina, that the uterus was in a state of complete inactivity, and that the waters had been discharged a long time previously. By the joint exertions of all engaged, the whole of the child, except the head, was delivered, but the uterus could not be prevailed on to contract, and the final extraction was only accomplished at last by means of the blunt hook introduced into the mouth of the fœtus, after the forceps had failed. The child was hydrocephalic, but what excited most attention was an enormous tumor of fungus hæmatodes, attached to the right parietal bone, and forming a kind of double head. The base or origin of this medullary tumor appeared to be seated in the osseous tissue of the cranium, which it perforated like a sieve; the dura mater was sound. The serum contained in the cranium might be estimated at about a pint, and the cerebral substance was soft, and macerated in appearance.

The mother of the child was thirty years of age; the father, eighty, but stouter and stronger than many men at sixty. Neither of the parents had ever labored under any cancerous affection. We are satisfied, from the description, that the above was really a case of fungus hæmatodes, as we have witnessed several such tumors in adults, and in every case they had their origin in the cranial bones, more especially the di-

plœ. As we before observed, we are not aware that medullary sarcoma has hitherto been discovered in the human infant prior to its entrance into "this piping world."—*Med. Chir. Rev.*

SKETCHES OF PERIODICAL LITERATURE.

TRANSFERRED DISEASES.

It is a remark of Dr. Good, that the practitioner who should undertake to trace out the sympathies which the various organs of the body have with each other, would find his time well employed, and his labor rewarded; and there is certainly nothing more curious in medical records, than the accounts of the transfer of disease from one organ or set of organs to another. A case illustrating this part of pathology is recorded in one of the late English periodicals. The patient, a female, aged 15 years, irregular in menstruation, and otherwise unhealthy, was admitted into the Winchester County Hospital, with cataract of both eyes, which had formed in the very short period of twenty days. Alterative and tonic treatment was commenced, and at the end of three weeks the opacity had so far diminished, that she was able to discern objects placed between the eye and the light of a window. At this time she was discovered to have increased urinary secretions, and the usual symptoms of diabetes. This continued, with scarce any abatement, for a week, during which time she passed from thirteen to sixteen pints of urine daily. The cataracts had now totally disappeared, so that she was able to use her needle. The diabetes

now began to diminish, and at the end of a fortnight more the quantity of urine was again natural.

The patient now left the hospital, apparently suffering from debility only. Almost immediately after her departure, the obscurity of vision returned, and at the end of a week she became entirely blind. To this again succeeded diabetes, and again the sight improved until it became as perfect as ever. The quantity of urine continued to increase, until it reached a daily average of twenty pints, when the patient became exhausted by the disease, and rapidly sunk. Death took place about four weeks after the recurrence of the diabetes. No examination was made.

CONSTIPATION.

In ordinary cases requiring intestinal evacuation, there are various substances which offer themselves to the medical practitioner, among which he can make choice according to his experience of their convenience or utility, and any of which will effect the object desired. But in cases of severe and protracted constipation, in which any farther delay will be attended with great suffering and hazard to the patient, it becomes an exceedingly important question what remedy shall be selected, to what extent it shall be given, and how long it shall be persevered in before

it is decided to be incapable of fulfilling the object. Where such cases have occurred, therefore, and have been relieved, it is very desirable particularly to record the means which were found insufficient, and also those which proved eventually successful.

In a case which lately occurred in England, in the Bath Hospital, the patient was a female, 24 years of age. It appeared that a tendency to costiveness had long existed in this patient, but had been controlled by aperients without difficulty, till within a year; during which time the action of the bowels had been very irregular, intervals of eight or ten days sometimes occurring between the evacuations, and much less influenced by medicine than before. At the period of her admission into the hospital, she had had no stool for thirteen weeks. Her diet had been bread and milk, to an amount not exceeding eight or ten ounces daily. During this time she had taken calomel, jalap, salts, gamboge, and aloes, in different combinations. Elaterium and ol. croton had also been given. The latter article had been carried to the extent of four minims, and then omitted, as it produced great pain. The following prescription was ordered:—

R. Ext. Col. Co. gr. ʒ.
Ol. Croton. gtt. 1-4. M.

This was given every four hours, with magnes. sulph. ʒi., and frequent injections of soap and water. At the end of *seven days*, no operation having occurred, the ol. croton was exchanged for subm. hyd. gr. i., and the pills and mixture ordered

every four hours. On the 12th day of the disease, one stool was obtained. Eight days afterward the mouth became affected, and the calomel was omitted. No stool. Ordered a small bleeding, and pulv. jalap, com. ʒi.—ʒss. ter die. Enemata to be continued. At the end of eight days more, another motion was obtained, which, like the preceding, was scybalous. The following was then ordered:—

R. Ext. Col. Co. gr. x.
Ol. Croton. gtt. ss.
Ext. Hyosc. gr. iij. M.

To be taken thrice daily, with sulph. magnes. ʒi. In the course of the succeeding month, four scybalous stools were obtained, and one which was pulpy and of some consistence. The cathartic was altered to the following:—

R. Ext. Col. Co. gr. ix.
Gambogiæ gr. i.
Ol. Croton. gtt. ss. M.

to take thrice daily, with sulph. magnes. u. a. This direction was continued, with little variation, for six weeks more, during which time she had ten motions, some of them wholly scybalous, and some of natural character. Another month passed under nearly similar treatment, the discharges becoming more frequent, and of better character. During the following six months, the longest interval between the dejections was one of three weeks, and the bowels could generally be made to act under the use of moderate stimuli.

DEPLETION IN INFLAMMATORY
DISEASE.

DR. MARSHALL HALL, in a late work on Sanguineous Depletion, urges the

necessity of adopting some standard by which to regulate the amount of blood to be drawn in various cases of disease. Dr. H. observes that the amount of sanguineous depletion which can be borne without producing syncope, varies very greatly in different cases. In pleuritis, for instance, a patient will bear the loss of from twenty to thirty ounces of blood; while the same individual, when laboring under pneumonia, or affected with simple fever, will faint after the abstraction of one third the amount. Dr. H. thinks it unsafe, under any circumstances, to bleed to syncope in a horizontal posture. The plan which he recommends as a general one, is to place the patient in a chair, or upright in bed, and bleed in that position until syncope is induced. There will then be little danger of this state being protracted to an

alarming extent; since it will be sufficient for the patient to be placed with the head low, in order to secure a return of animation.

The above direction is a convenient one in a practical view, and may doubtless be applied to a considerable proportion of the cases which require this remedy. A change in the character of the pulse, which is often laid down as a criterion for determining the point alluded to, is a very fallacious guide. It often happens that neither the frequency nor the force of the pulse is materially affected, until the approach of syncope. Occasionally, where bleeding is employed for the relief of pain, the cessation of this may afford a sufficient reason for its discontinuance; but, in the majority of cases, the rule laid down by Dr. H. will be found the most useful.

BOSTON, TUESDAY, DECEMBER 22, 1829.

PHYSICAL EFFECTS OF HABITS OF INTOXICATION.

AMONG the various means by which men in all ages and countries have strove to degrade and debase their own natures, none probably has been more generally adopted, or more effectual, than that of intoxication with spirituous liquors. Other degrading habits are limited by their own nature, and by the rules of society, which oblige them to be practised, if at all, in utter secrecy, or by the direct operation of human enactment. Drunkenness stalks abroad in the face of society, meets us in the social circle and in the open street, and

proceeds unchecked by human laws, unless it urge to the commission of acts which on other grounds are regarded as criminal. We do not look for it to other times or to distant nations. We have it constantly with us, polluting our high-ways with its noisome presence, and offending our sight at almost every step. That so glaring an evil should have attracted the notice of the divine and the moralist, is not surprising; we wonder not that they have launched their anathemas against it from the pulpit and the press: but we may feel some degree of surprise that so little interest in this subject has been

manifested by the physiologist and the physician ; that these should not, by investigating its causes and devising means for its cure, have coöperated more earnestly with the former, and lent their aid toward the destruction of the common enemy. We hope that this reproach on the medical faculty will soon cease to exist, and that, by the labors of the wise and good in this profession, something may ere long be effected toward the accomplishment of so desirable an object.

Drunkenness may be considered under the following heads, viz :—1. Its causes.—2. The phenomena by which its presence is indicated.—3. Its immediate and remote effects on the system.—4. Its prevention and cure.—The following remarks will regard principally the first and last of these topics, as it is from the consideration and due understanding of these that we are to expect the most important practical results.

That a taste for spirituous liquors is acquired, and not natural, may be inferred from the aversion which infants and young children usually testify against them ; and with many, perhaps the majority of persons, the taste of *pure* wine or spirit continues in after life to be more or less disagreeable. An exception to this remark is to be found in the sweet wines, particularly those containing carbonic acid, and in cordials ; in which the taste of the spirit is disguised by the saccharine ingredient. A fondness for wine, however, may be acquired at a very early period ; and the questionable practice of indulging young children in the use of

it is certainly too general. In this way, one of the barriers to intemperance is early removed ; the habit of using this stimulus commences as it were with the cradle, and the progress of time naturally serves to confirm it.

A more effectual method, however, of overcoming this inherent aversion to liquor, is adopted with mistaken kindness by the inconsiderate and ignorant. It is not an uncommon practice, among the lower orders of the Irish, to treat their children with small quantities of their own favorite beverage ; and lest their inexperienced appetites should revolt at the draught, care is taken to add sufficient sugar to disguise its real taste ; and thus the fondness for this article, which was implanted for the wisest purposes, is made a lure to induce them to receive what their very instinct pronounces to be a poison.

Those who escape the dangers of childhood are reserved for other and greater perils in youth. The temptation comes to the higher classes through the medium of convivial meetings, in which indulgence in drinking is at once the cause and the consequence of social feeling. Even those who dislike, cannot refuse the potation ; and what was at first taken under the influence of excitement, comes soon to be resorted to as a means of recalling a similar elevation. Fortunately, the rules of society attach a stigma to the occurrence of absolute drunkenness, even at convivial meetings, and he who would preserve the respect of his acquaintance, must even in ebbie-

ty keep within certain limits. But this check, though a strong one, is not always sufficient; and he who has learned to enjoy drinking for its own sake, may, when shame or necessity compel him to restrain his appetite in the presence of others, indemnify himself for this privation in the solitude of his own apartment, where he can practise, without control, the fatal lessons he has received in scenes of social gaiety.

But if the progress from moderate to excessive indulgence is thus easily made by the refined sensualist, it is far more easy in another portion of society, in whom the restraint is less, while the temptation is immeasurably greater. The laborer finds in ardent spirits a temporary defence against his worst enemies, cold and hunger. When fatigued by labor, they restore his strength; when without employment, they serve to banish the tedium of absolute idleness. A certain degree of indulgence in spirit becomes, therefore, to the laboring class, almost a matter of necessity; drinking is an affair of daily occurrence, and the gradual increase of the potation leads on to confirmed and inveterate drunkenness.

Another cause of intemperance, common to all classes, may be found in the depression of spirits consequent on misfortune. The loss of friends or of wealth, the disappointment of long-cherished hopes, drive many unfortunate persons to indulgence in ardent spirit as a means of drowning sorrow. This class of drunkards is surely the most to be pitied.

The *prevention* of drunkenness is

evidently to be sought for in the removal of those causes which have been mentioned as leading to it. The practice of giving liquor to children is strongly to be reprobated; they should on no account be indulged in the use of it, even in the most moderate degree; since the very aversion which the taste of the article, when unsophisticated, inspires, may be the means of saving many from the miseries incident to its use; —to remove it, therefore, by this early initiation into the practice, is scarcely less than madness. For the rest, that species of drunkenness which is the consequence of social indulgence can only be prevented by avoiding scenes of dissipation: and in those who are betrayed into it by the habits of manual labor, which seem to demand such a support, a conviction must if possible be created, that no actual increase of corporeal vigor can be obtained by such means; that their potations, instead of strengthening, actually weaken them; that, while they produce an excitement of the brain which impels them to put forth more than the usual amount of muscular force, they waste this force in a far greater degree than they call it into exercise. To the depressed and unfortunate, the means of preventing this habit are also open; they consist in a due regulation of the mind, in resisting the influence of despondence, and in seeking new channels of industry and exertion.

The remaining topic, and by far the most interesting which presents itself in connection with this subject, is that of arresting this vice in its

progress,—of curing, in other words, the disease of drunkenness. Those which have been proposed for this purpose may be arranged in two general classes, namely, the physical and the moral; and it has been, perhaps, by adopting one of these classes of remedies to the exclusion of the other, that both have so often proved unavailing.

Before considering, however, the advantage to be derived from their combination, an important question presents itself. How far is it safe, supposing it can be effected, to put a sudden check to a course of intemperance, which has continued for a considerable time? Does not the system at last become so habituated to the indulgence, that it cannot be given up without danger to life?—If so, after what period does this state of the system occur, and by what symptoms is it recognised?

We have said that this question was an important one. It seems peculiarly so when we consider, that in many cases of confirmed drunkenness, almost the only hope of cure is presented by the chance of giving the system some sudden shock, by which the habit may at once be broken up; and if this course is attended with imminent danger to life, the physician or friend will be compelled, in such case, to leave the individual to his fate, since, of however little value his life may be under such circumstances, he cannot be justified in taking it from him. What then is the amount of evidence by which such a state of things, at any assigned period of the drunkard's progress, is made out?

The ground which is taken by the advisers of moderate measures, in the cases alluded to, seems to be this;—that there are certain states of the system, induced by the continued action of morbid agents, which cause the sudden cessation of these actions to be attended with danger. Thus it is said that persons accustomed to the noisome atmosphere of a dungeon, have borne with difficulty a sudden transfer to a purer medium; and that those who have become climated in an unhealthy country, contract diseases on removing to other regions. From these and similar facts it is argued, that however morbid may be the actions of the system which result from intemperance, the constitution becomes at length inured to these actions, and they cannot suddenly be interrupted without imminent hazard.

This argument, although specious, will not, perhaps, on examination, be found altogether conclusive; for, although the malaria of a prison and the atmosphere of an unhealthy climate are in general noxious agents, it will not be contended that they are so in the instances cited. Instead of acting as poisons, they have, by the supposition, become necessary to the health. If it were necessary to seek, in the influence of atmosphere, an example analogous to that of intemperance, we should select a better one, perhaps, in the instance of intermittents from marsh miasma. The case of a person suffering from tertian or quartan ague, is not very different from that of the periodical drunkard, who permits an interval of three or four days to

elapse between his potations; and drunkards of this sort are not exceedingly rare. Yet we should much question the judgment of that practitioner who should caution the patient with intermittent against changing his situation, lest the attacks of ague should suddenly cease, and thus his system be deprived of its accustomed revolutions. If indeed our judgment on this subject is to be formed from analogy, perhaps a better one may be found in the influence of some other morbid poisons, the habitual actions of which on the system are the necessary condition of certain kinds of occupation, or from peculiar circumstances have been found common to a large number of persons. Numbers of workmen, as is well known, are constantly employed in separating quicksilver from its ores, and the consequence of a constant contact with this substance is the ruin of their health; but we never hear of their suffering from being removed from these influences, though a circumstance not likely, if true, to have escaped observation. Individuals habitually using wines adulterated with lead may be supposed to become at length accustomed to their influence; yet we apprehend little caution would be thought necessary in directing such persons to abandon so perilous a habit. Painters become, in a certain sense, habituated to the same metal; yet we should hardly think of giving such advice to one who was recovering from colica pictonum, as would render probable the return of the disease, lest the too sudden abandonment of the system by such a

companion should prove an injurious change. Is it urged that in these cases the organic and not the nervous system is concerned; we might still adduce more appropriate instances. Those engaged in manipulations in which narcotic substances are employed, are known to be unfavorably affected by their influence. But we doubt whether a change of occupation, in such persons, has ever been found to produce those fatal effects which might, on this theory, be expected from it, and we are certainly inclined to believe the contrary.

We may perhaps pursue this inquiry more profitably, however, by considering the peculiar symptoms of that stage of drunkenness to which, if to any, the argument is applicable. It is acknowledged on all hands, that so long as the indulgence in liquor is but occasional, so long as it cannot be called a habit, the danger from its omission is too trifling to be regarded. On the other hand, it is conceded that when, from long-continued intemperance, structural changes have been produced, such as occur in the liver and other viscera, the stimulant must be discontinued at all hazards. The state between these,—that in which intoxication is confirmed into a habit, but without having as yet produced its worst effects on the constitution,—is the critical period. At this period the drunkard experiences his periodical cravings for his dram,—that inward gnawing which cannot be borne, and which must be relieved, and can be relieved only by renewing the inebriating draught. If this were indeed the only condition of escape from

the suffering of this state, the condition of the drunkard would be truly deplorable; since the inevitable effect of drinking would thus become its necessary cause. But this is certainly not the case; for the most inveterate drinker will often allow this state to subside, as it will at length of its own accord, or relieve it by other means, and will wait till the balance of his system is restored and his strength renewed, before he ventures to repeat the indulgence. That a certain craving sensation is the immediate consequence of a fit of intemperance, is in the great proportion of cases undoubtedly true; but to confound this with the morbid appetite which induced the indulgence, is, we apprehend, a serious error. The drunkard, in repeating his draught, is not always impelled to it by a necessity arising from the reaction which succeeds his last potation: this reaction brings with it repentance and loathing; and often it is not till these have passed away, that the desire for liquor returns,—a desire which his resolution is not able to withstand.

Admitting, then, what cannot be denied, that the drunkard who is used to periodical libations will, at the return of certain periods, feel an almost irresistible longing for his usual gratification, it by no means follows that the resistance of this longing, even to the entire omission of the stimulus, will be followed by any dangerous consequence; on the contrary, both reason and experience teach that if successfully resisted in one instance, the temptation will recur each time with less power, and

at length entirely cease. That no ill consequences follow the omission in these cases, is confessedly not proved, and is perhaps incapable of proof; but the cases where such have been supposed to occur are very few, and by no means sufficiently decisive to warrant the inference that such omission is attended with serious danger.

But defective as the supposition alluded to is in point of argument, it is still in accordance with a common prejudice; and if the drunkard could be made to give up his potations by degrees, the end in view would be equally obtained, and perhaps with less suffering on his part than if they were at once to be abandoned. But it is in the practical application of the theory that the main difficulty lies. Many ingenious expedients are indeed recorded by which the victim of intoxication has been induced to abridge, from day to day, the quantity of his liquor. But, for the most part, such expedients always have, and, from the nature of things, always must prove futile. The drunkard cannot renounce his habits by degrees. He cannot day after day repeat the labor of self-denial, which is as essentially necessary to a reduction, as to a total omission of his draught. Nor would he find, we imagine, in the diminished quantity, a charm to dissipate completely that uneasy sensation from which so much danger is dreaded. This sensation is a feeling of pain, and unless enough be taken to stupify it, will not be effectually relieved. There will still remain a desire for more; and this, if resisted ten times and then yielded

to once, will undo in a moment the work of so much time and labor.

It is then alike the dictate of reason and of experience, that the drunkard should stop short in his career, at whatever point of his downward course he may have arrived, and at once forsake the habit which is hurrying him to ruin. The effort to do this will of course result principally from his own resolution; but no inconsiderable aid for this purpose can be afforded him by his friend or medical adviser. *He* will set before him, in strong language, the tremendous consequences of the course he is pursuing; the loss of health, of reputation, of domestic comfort, of everything which makes life valuable, and in fine of life itself. This indeed is all which, until of late, it seems to have been thought possible to do for the drunkard, and when these failed, he was to be left to his fate. Recently, however, another indication for the cure of intemperance has been suggested, which has been acted on with considerable success, viz., that of inspiring a disgust for the liquor, by administering it in union with some article disgusting in taste, or disagreeable and painful in its effects, and especially with such as possess an emetic property. On this principle certain popular compounds have been formed, containing antimony, or some other emetic, as their principal ingredient, combined with some article capable of communicating to the whole a distinct and peculiar flavor. A certain quantity of this compound being added to the favorite liquor, causes it to produce

vomiting and nausea; the recollection of which being associated with the spirit, is intended to inspire the drunkard with a lasting aversion for the latter. Whether the circumstance of sapidity in the article employed would favor this effect, might well be doubted; since the peculiar taste, against which the disgust is inspired, is not that of the liquor itself, but of something distinct from it, and would therefore seem less likely to produce the desired effect. In practice, however, sapid articles have obtained the preference.

With respect to the probability of a cure from this mode of treatment, we seem scarce able as yet to form a decisive judgment. In many instances its success has been unequivocal and entire; the individuals having contracted so complete a disgust for spirit, as never to have tasted it afterward. In a greater number this effect has been temporary, lasting for months or weeks only, while in some, little or no effect has been produced. The conclusion which may be gathered from the reports of the most intelligent persons who have made trial of this method, seems to be this;—that where the moral powers are strong, where the individual has been capable of reflection and possessed of some decision of character, these have stood him in stead against the diminished temptation; so that, though the mere animal disgust would ere long be effaced, time will in the mean time have been afforded to the patient to experience the advantage of regular habits, and for a moral energy to be awakened adequate to prevent him from incur-

ring a second time the danger he has once escaped,—while on the other hand, in the man of a feeble mind, and without force of character, the temptation will gradually regain all its original power, and the habit re-assume its pristine dominion.

VACCINE MATTER.

THE French Academy of Medical Science approve of a method of preserving this substance for transportation, by enclosing a quill, prepared in the usual manner and dipped in it, in another quill of similar shape and size, both having been cut so as to retain at their largest end a portion of solid substance, sufficient to exclude the air. In this way it is said the matter may be preserved a long time, if taken as early as the *fifth* or *sixth* day, before it has lost its aqueous character. If taken later, it is said to have more tendency to decomposition. We have often seen this mode adopted as a convenient one for transporting matter; but where preservation for a considerable time is required, the old method of enclosing the fresh virus between two plates of glass seems to us preferable. Whichever mode is adopted, an external covering is requisite as a preservative from light.

Variolaria.—A very valuable addition is now making to the materia

medica by the foreign chemists, though we believe that it has not yet found its way to England. It consists in the use of *variolaria* as a substitute for quinine. This species of lichen grows in abundance on the bark of the beech tree in mountainous districts; and, from experiments, we believe, first tried by M. Cassebeer, it is proved to have the same febrifuge qualities as the Peruvian bark.—*English Paper*.

Transfusion.—The unfortunate man who yesterday underwent the operation of having blood transfused into his veins by Mr. Green, at St. Thomas's Hospital, as the only means left to restore his life, sank under exhaustion, and died yesterday afternoon at three o'clock.—The last successful case of transfusion of blood was performed upon a lady at Walworth by Dr. Blundell, on the 7th of December, 1828.—*Ib*.

The Siamese Brothers.—These twins arrived in London, in good health, on the 20th of November. An account of them, drawn apparently from that of Dr. Warren, has been presented to the French Academy by Dr. Niles, of Paris,—formerly of this city. A report on the subject has been delivered by M. Geoffroy St. Hilaire, but the substance of this latter we have not yet learnt.—These twins are represented, in an English Journal, as *a native American!*

WEEKLY REPORT OF DEATHS IN BOSTON, ENDING DECEMBER 19.

Date.	Sex.	Age	Disease.	Date.	Sex.	Age	Disease.
Dec. 10.	F.	17 yrs	rheumatic fever	14.	M.	10 mo	lung fever
11.	F.	14 mo	measles	M.	54 yrs		brain fever
	F.	37 yrs	inflammation of bladder	15.	M.	12 mo	unknown
	M.	29	consumption	16.	M.	4 yrs	worms
	M.	12 mo	infantile	M.	4		disease of the head
	M.	34 yrs	consumption	17.	F.	79	old age
12.	F.	44	typhous fever		F.	10	unknown
	M.	15 mo	measles	M.	26		accidental
	M.	7	lung fever	M.	50		disease of the heart
	F.	33 yrs	consumption	M.	30		accidental
	M.	3 1-2	croup	F.	18 mo		dropsy in the head
	F.	30	old age	18.	F.	15	do.
13.	M.	68	consumption	19.	M.	35 yrs	intemperance
	F.	57	unknown				

Males, 16—Females, 11. Total, 27.

ADVERTISEMENTS.

MEDICAL SCHOOL OF MAINE.

THE MEDICAL LECTURES at BOWDOIN COLLEGE will commence on TUESDAY, February 23, 1830. Theory and Practice of Physic, by JOHN DELAMATTER, M.D.

Anatomy and Surgery, by J. D. WELLS, M.D.

Midwifery, by JAMES MCKEEN, M.D.

Chemistry and Materia Medica, by P. CLEAVELAND, M.D.

The ANATOMICAL CABINET is extensive, and very valuable.

The LIBRARY, already one of the best Medical Libraries in the United States, continues to be every year enriched by New Works, both foreign and domestic.

Every person becoming a member of this Institution, is required to present satisfactory evidence that he possesses a good moral character.

The amount of fees for admission to all the Lectures is \$50. Graduating fee, including diploma, \$10. There is no matriculating fee. The Lectures continue three months.

Degrees are conferred at the close of the Lecture term in May, and at the following Commencement of the College in September. A systematic course of instruction, embracing Recitations in all the branches of Medical Science, Demonstrations, and Lectures, will be given by the Professors, during the interval between the annual courses of Lectures.

Boarding may be obtained in the Commons Hall at a very reasonable price.

Brunswick, Dec. 4, 1829.

Dec. 15.—4teop.

NEW MEDICAL BOOKS.

JUST published, and for sale, by CARTER & HENDEE,—Malaria; an Essay on the Production and Propagation of this Poison. By JOHN McCULLOCH, M.D. F.R.S., &c. &c.

An Essay on the Diseases of the Internal Ear. By I. A. SAISSY, M.D. Translated from the French, by NATHAN R. SMITH, M.D., Professor of Surgery in the University of Maryland; with a Supplement on Diseases of the External Ear, by the Translator.

Observations on the Utility and Administration of Purgative Medicines, in several Diseases. By JAMES HAMILTON, M.D., Fellow of the Royal College of Phy-

sicians, &c. &c. From the Fifth Edinburgh Edition.

A Treatise on Pathological Anatomy. By WILLIAM E. HORNER, M.D., Adjunct Professor of Anatomy in the University of Pennsylvania, Surgeon at the Infirmary of the Philadelphia Almshouse, Member of the American Philosophical Society, &c.

Elements of Operative Surgery. Translated from the French of A. TAVERNIER, Doctor of Medicine of the Faculty of Paris, &c., with copious Notes and Additions. By S. D. GROSS, M.D.

A Treatise on the Nature, Cause and Treatment of Contagious Typhus. From the German of J. VAL DE HILDENBRAND, Imperial and Royal Counsellor, Professor of the Practice of Medicine in the University of Vienna, &c. &c. By S. D. GROSS, M.D.

An Essay on the Morbid Sensibility of the Stomach and Bowels. By JAMES JOHNSON, M.D.

Examinations in Anatomy, Physiology, Practice of Physic, Surgery, Chemistry, Materia Medica, and Pharmacy. For the Use of Students. By ROBERT HOOPER, M.D.

Dec. 22.

MORBID ANATOMY.

CARTER & HENDEE have just received,—The Morbid Anatomy of the Stomach, Bowels and Liver; illustrated by a Series of Plates from Drawings after Nature, with explanatory letter press, and a Summary of the Symptoms of the Acute and Chronic Affections of the above-named Organs. By JOHN ARMSTRONG, M.D.

The above work will be completed in six numbers, at \$6,00 each. Three numbers are already published. Subscriptions received by C. & H.

Oct. 6.

2am3m

MEMOIR OF DR. HOLYOKE.

JUST published, and for sale by CARTER & HENDEE,—A Memoir of EDWARD A. HOLYOKE, M.D. LL.D., prepared in compliance with a vote of the Essex South District Medical Society.

ATREATISE on the Scrofulous Disease, by C. G. HUFELAND, Physician to the King of Prussia, &c., translated from the French of M. Bousquet, by Charles D. Meigs, M.D., is just received and for sale by CARTER & HENDEE.

Sept. 8.

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

I.

MODERN MEDICAL ETHICS ;

Or State Maxims in Medicine.
By PHILO-ETHICUS, *Artium*
Magister, &c.

(CHAPTER THE FIRST.)

MEDICAL ETHICS (in the modern sense) must be considered the most important branch of our professional studies, because it involves the *science* of life (a knowledge of human nature) and the *art* of turning that knowledge to the greatest possible advantage. Now it is very remarkable that, although this noble science of life, this useful *art*, has been cultivated with great success during the last twenty years, and is now brought to the highest degree of perfection, not a line has been written on the subject, or any code of instructions put on record, for the benefit of the *rising* or the *falling* generation! It appears to be what lawyers call the *LEX NON SCRIPTA* ;—it is perfectly well understood by adepts ; but hitherto it has been thought incapable of taking a tangible shape, even under the creative power of the press. We believe this is partly true ; for much of the noble art is, like the *tact* or even the skill of the physician, incommunicable by words. But still we hope to show that there are fundamental maxims in medical ethics which will prove useful text-books for those who are de-

sirous of making progress in the art. Some one has said, “*ars tota in observationibus*”—that is, medical practice consists entirely in the treatment of single cases. So in medical ethics, the whole consists of insulated maxims founded on observation. These maxims require no particular arrangement—at least we shall give them none—but we will set them down as they occur to our recollection, and solicit the assistance of our friends in augmenting the list from time to time. We shall commence with the medical man’s initiation into *practice*. With the previous education, classical or professional, we have nothing to do. There are different opinions respecting the necessity of either ; and we shall not attempt to unloose the Gordian knot.

CHAPTER I.

MAXIM I.

Set up your carriage. Without this symbol you cannot *get into* practice—without it, you could not *get through* practice—and without it, you should not *go out* of practice. To *get into* practice, let your carriage be elegant, your liveries splendid, your horses very fast goers. If they run over half a dozen hapless pedestrians annually, and your coachman is punished by the magistrates, all the better. Even an occasional *deodand* will be a *God-send* in the way of repu-

tation. To *get through* practice, you may slacken your pace, reduce the breadth of the embroidery on your liveries, paint your carriage but once in three years, and exchange your blood horses for common jobs. To *get out* of practice, it is not essentially necessary to put down your carriage. There are many other auxiliaries, which it would be useless to mention. The progress is somewhat analogous to that of parturition,—it is wonderful what NATURE and TIME will do in this way!

You should never be seen lolling about in your carriage, “spying farlies” out of the windows. Always appear to be making notes of your appointments; and ever and anon call out to the coachman to quicken his pace. Be sure to have an inkstand pinned in front of the carriage, and keep the seat strewned with letters from your patients.

MAX. II.

Dress and Address.—Great attention should be paid to these, while *getting into* practice. When your reputation is firmly established, your dress may be slovenly even to malpropreté; and your *address* may be uncourteous even to rudeness, with considerable advantage. Strange as it may appear, it is yet a certain fact, that it is nearly as difficult to throw off as to acquire a well-earned fame in medicine. On the other hand, fame without a solid foundation, is like a ship without ballast,—liable to be upset by the first squall.

MAX. III.

Search the journals for a long catalogue of desperate cases, which you are to get carefully by heart, making them all terminate favorably under your own superintendence. With a minute retail and

detail of these, you are to entertain each of your patients during three-fourths of the time which you devote to the daily visit. You are also to relate the same histories to every individual with whom you come in contact, professional or non-professional, so long as they have patience to listen to, or credulity to believe them. This maxim ranks next in respectability, and perhaps success, to the ingenious *patent one* of Dr. Eady.

MAX. IV.

Never appear at the Opera, theatre, public assembly, private party, or medical society, without a well-arranged plan of being called out,—in other words, of being “particularly wanted,” to attend some person in great danger. If any noted personage can be prevailed upon to lend his or her name, as the *appellant* on such occasions, the patronage will be invaluable. The moment the call is made, you are to bustle forth, otherwise the advantage of a personal recognition may be lost.

MAX. V.

Hospitals and Infirmeries. There is now some discrepancy of opinion respecting the policy of connecting yourself with a public institution. If you are *very clever*, you will hardly want such an auxiliary;—if *very much the reverse*, you may stand a chance of some unpleasant exposures. In all cases it is very proper to present yourself as a candidate, taking care to procure a long list of testimonials for the printed circular and for the public advertisement.* If defeated, you

* There is not the slightest necessity even to announce your intention to canvass for an appointment to an hospital or dispensary, when any vacancy occurs. You have only to say that you will, *on a future occasion*, present yourself as a can-

have "made yourself favorably known to the public," and are entered on the list for every future contest. If successful, a wide theatre for your talents and ingenuity is opened. As a matter of course, you become a public lecturer; and a necessary consequence is, a niche in the TEMPLE OF FAME, i. e., the head of the first column in every morning paper. In this extended metropolis, it is essential that every facility should be given to students, who wish to attend your lectures; and therefore the *particulars* are to be learnt, not only at the school where you teach, but at all the medical booksellers' shops, and especially at your *own residence*, which is to be carefully pointed out in the newspapers. But besides these announcements, you are frequently to advertise your lectures on a new and specific plan. Not only are all the *diseases* on which you descant to be minutely enumerated in the advertisement, but the principal *symptoms* of these diseases are to figure in the columns of the Times, Herald, and other fashionable papers. These are your golden advertisements.*

You are also to publish, through every possible channel, a monthly or quarterly numerical view of your public practice, according to a peculiar plan of registry of your own. The following specimen will afford you some idea of the plan.

Of 1000 patients treated at _____, during the month of _____, nine hundred were completely cured; 75 were greatly

relieved; 15 absented themselves; 9 were discharged incurable; and 1 died.

relieved; 15 absented themselves; 9 were discharged incurable; and 1 died.

In visiting out-patients of the hospital or dispensary, you should always leave your carriage or cabriolet at the door of the best house in the neighborhood of the patient. This will well reward you for the little additional walk.

MAX. VI.

You must, by all means, make a collection of diseased structures, by begging all morbid parts that your friends may meet with. It is not of the slightest importance that you should be acquainted with the histories of the cases. These specimens of *diseases*, or "BOTTLE IMPS," you are to keep ranged in the room where you see your patients, or in a neighboring apartment; and you should take care to show them to all your patients, telling them that these were the only cases which you failed to cure in your extensive practice, and that they are now bottled up for the benefit of the living, as they enable you to detect diseases with unerring certainty. This is a measure of the very first importance.

MAX. VII.

Write a book; or rather get some literary hack to write one for you, and dedicate it at once to the general reader. Medical men have neither time to read, nor money to buy the tentative essays of their contemporaries;—address yourself, therefore, boldly to the whims, prejudices, fears and foibles of the public. In your book, there is no occasion to investigate principles, but only to display the superiority of your own practice. Let your work therefore be studied with desperate cases, all terminating favorably, after the first

didate. This is an excellent and legitimate advertisement.

* It is not necessary, nor is it at all expected, that lectures should be actually delivered by those who keep them constantly advertised. That is quite a separate concern.

men in the profession had failed. Give no other names or places of residence except the Duke of A—, the Marquess of B—, the Earl of C—, and so on; and never descend lower than an M.P. Interlard the cases with extracts of letters from your patients, describing their complaints, and the great efficacy of your medicines. Dedicate your work to some fashionable physician or surgeon, from whom you will be sure to receive a complimentary letter that will be very serviceable on many occasions afterwards.

Supposing (which is not very likely to be the case) that you have made any useful discovery in medicine or surgery,—you are not to be such a simpleton as to reveal it openly to your professional brethren, who would instantly take advantage of it, without thanking you for your candor. No. You are to manage this point with great care and caution. A complete concealment of the remedy would subject you to the imputation of quackery; but you may throw such obscurity about the preparation, the dose, the administration, &c., of the medicine, while at the same time you dilate so amply on its miraculous efficacy, as to draw to yourself the whole practice of the remedy. If it be a piece of surgery, as straightening a crooked spine, widening a narrow channel, removing a troublesome excrescence, or, in short, performing any operation, then you are to show that a peculiar manual dexterity, which cannot be described in words, has given you a facility and success quite worthy the attention of the public.

MAX. VIII.

If you are dubious of success, become a violent sectarian or po-

litician. You will then be sure of employment among one party. Half a loaf is better than no bread.

MAX. IX.

The Grand Secret.—The keystone maxim on which all the great principles of medical ethics rest, has not yet been stated. It is to occupy a great portion of your nightly studies and daily avocations. You should not move a step without it. It is to the medical practitioner what the compass is to the mariner,—what the pillar of light was to the wandering Israelites. It consists in the constant habit or practice of *extolling yourself, and depreciating your neighbor*. This is, fortunately, not only the most useful maxim, but it is that which is most easily put in execution, and has the widest field for its application. No day in the week, nor hour in the day, can pass without presenting you with abundant opportunities for working this grand engine of advancement. It has this advantage, too, that it may be practised, by way of amusement, at those periods when you have no other kind of practice on hand. All your friends can assist you in this way, without opening their purses; and a gossiping female, with a long and nimble tongue, may go far to make your fortune.

It is of great importance, however, that you should acquire adroitness and tact in the exercise of this leading maxim. Gross self-flattery may draw on you ridicule; and open defamation of your neighbor might draw on you the harpies of the law. Thus, suppose you are called in to a dangerous case, where another practitioner has been before you.

You are not to say, in the presence of competent witnesses, that your predecessor had murdered, or poisoned, or ruined the patient. For doing so, £500, with costs, were paid not a thousand years ago. If you have a particle of expression in your countenance, you may, by looks, and gestures, and tones, and monosyllables, effectually harrow up the feelings of the parents or friends, and convince them that the life of the patient has been endangered or lost by the practice hitherto pursued.

“Sunt verba et voces quibus hunc, vexare, dolorem.”*

The less danger there is in the case, the more decidedly must you make it appear that there is *now* scarcely a chance of recovery; but nevertheless you will make one effort to save life. A cure performed under such desperate circumstances, will greatly spread your own fame, while it fulfils the other part of the grand maxim, by depreciating your neighbor.

In all cases, without exception, where you are separately applied to as the secondary or ternary

* The writer of this article is now attending the wife of a tradesman, who had been under the care of a respectable practitioner in Southwark, and who recommended his patient to go into the country for a few weeks, giving her, at the same time, some prescriptions for her use. She went to a village fourteen miles from town; but not getting better, she sent for a practitioner of the place, and showed him the prescriptions of the other gentleman. He did not mince the matter, but exclaimed at once, that she might just as well have been swallowing arsenic all the time, as the medicines she had been taking! She believed it,—came back to town soon afterwards,—and discarded her former medical attendant without his knowing why or wherefore! Nothing is more common than this practice.

consultant, you are to express your regret that you had not seen the case before it had gone thus far. By this expression you do not entirely violate the truth, and even if it comes to the ears of the former consultants, you may defend the expression, as one used by the very first authorities in the profession.

In consultations, and especially in this metropolis, it is necessary to be a little cautious how you express or insinuate disapprobation of your brethren;—and *lions* from the country often get themselves into difficulty in this way, when first settling in London. Still, although it may not be prudent to assume any superiority on your own part, or inferiority on the part of your colleagues, you are never to lose sight of the principle, but to manœuvre so that the patient or friends may *infer* that superiority which you dare not openly *claim*. This may be done in a thousand ways, by a man of ingenuity. Thus, suppose you are called in when an acute inflammation has been subdued, or all but subdued, by active measures, and yet where pain, irritability, or other unpleasant feelings remain: you are strongly to insist on an anodyne, which could not have been safely prescribed before. The consequence will be a tranquil night, blessings on the new doctor and his prescription, and as a necessary corollary, a reflection on the previous treatment.

Suppose, on the other hand, some acute or subacute inflammatory action arises in the course of a chronic and obscure complaint, and you are called in at this juncture: you are immediately to recommend moderate deple-

tion (the measure, in fact, which was about to be employed by the previous attendants); the consequence of which will be, a temporary amelioration of symptoms, and a conviction, on the part of the patient and friends, that this depletive measure ought to have been long before employed. If the chronic disease, on which the acute or subacute supervened, be of a necessarily fatal nature, you are to give pretty strong hopes to the family of recovery, especially if the prior attendants had expressed their doubts on this point. The falsification of your hopes by the final event, is not of the slightest consequence. You will have injured your colleagues, meantime, in the opinion of the friends (for the last opinion is always considered the best), and you will have plenty of time to modify your prognosis afterwards; and, as the fatal catastrophe approaches, to fling the blame on your neighbors, by insinuating that, had more active measures been early employed, the event would have been different. This is a first-rate maxim, and is one of great power when artfully executed.

If an opinion has been given by your colleague or colleagues as to the nature or seat of the disease, you are always to give an opinion somewhat different, and take care that the parents or friends of the patient know it. If no dissection takes place, you are triumphant, because you can maintain positively that you were right, and that the others were wrong. If a *post-mortem* examination is permitted, you must still show your skill and dexterity by making the pathology correspond with the diagnosis. Nothing is more easy than this, to a man of

parts and *pretensions*. Suppose, for example, that a man dies after you had pronounced that the disease was inflammation of the brain. When the scull-cap is removed, you are to knead the brain with your fingers, in the same way that a baker kneads dough in a trough, under the pretence that you are feeling for abscesses. On prosecuting the dissection, you will find some portions of brain softened down by the above process. These you are to scrape off on your scalpel, and triumphantly show them round as portions of *suppurated brain*. It is of no consequence that there should be no injection of vessels, or other marks of inflammation: these have all disappeared before death, leaving the purulent matter to prove the correctness of your diagnosis. In short, there is no part of the body in which a fertile imagination and a good modicum of effrontery may not easily make out traces of disease for the purpose in question. And having once found or formed these, you are to declare that it is quite unnecessary to seek for causes in any other places, when they are so evident in the place predicted before death. If a further dissection be insisted on, and more morbid anatomy turns up, you are to ridicule the idea of the latter having anything to do with the disease. All other morbid appearances than those which suit your purpose, are to be voted occurrences in the agonies of death.—*Med. Chir. Review.*

II.

DIVISIONS OF SMALLPOX.

THE Medical Gazette has begun again to give us histories of the pro-

ceedings of the London Medical Societies. The following dispute on Smallpox may not be without interest to our readers.

DR. GREGORY stated, that, relying on what he had read and had been taught in lectures, he had entered into practice with the impression that the severity of smallpox was, in the great majority of cases, in the direct ratio of the number of pustules; but that he had soon found other circumstances of more importance than the one alluded to, and had ultimately been led to arrange the different varieties of smallpox under the five following heads:—

1. What he called the *superficial* form of the disease—in which the eruption, whether copious or scanty, was fully developed on the skin with a well-marked scarlet areola round the pock, and with little or no affection of the fauces or air passages. This form always does well, however copious the crop of pustules may be.

2. The *cellular* form, in which the variolous action extends from the skin into the subjacent cellular texture, and in which the glands about the throat, axilla, and groin, become implicated. This extension of the disease is apt to show itself at a late period, giving rise to boils, abscesses, and other mischiefs, which greatly retard convalescence, and occasionally prove fatal. He had known a patient die from an abscess forming under each scapula.

3. The *laryngeal* form, in which the variolous action extends to the mucous membrane of the fauces, larynx, and trachea, interfering essentially with the function of respiration, impeding

the oxygenation of the blood, and being, in consequence, attended with a peculiar claret color of the pustules. The other mucous membranes, as those of the alimentary canal, bladder, vagina, &c., are incapable of taking on the variolous action; but in the larynx it sometimes runs so high as to produce sloughing—a specimen of which the Doctor exhibited. Even the eye, which so frequently suffers from smallpox, Dr. Gregory affirms to do so from common inflammation only; the pustule on the cornea not appearing till the eruption is on the decline, and therefore not being a primary or essential feature of the disease. This form of smallpox is very fatal; the eighth and ninth days being those of danger.

4. Some persons, especially those liable to cerebral affections, die at an earlier period—generally *within* the first eight days. These cases are ushered in by fierce delirium, succeeded by symptoms of effusion into the brain. Corresponding appearances present themselves on examination after death. To this variety the Doctor gives the name of *nervous* smallpox; and he believes it to depend not on inflammation, but on a specific or *variolous* action. That it is not, strictly speaking, inflammation, is rendered probable by the fact of the blood, when drawn at this time, not exhibiting the buffy coat, and by the little benefit derived from bloodletting.

5. The last variety is regarded as depending on the *dissolution* of the blood—marked by petechiæ, passive hemorrhages, &c. From this, Dr. Gregory never saw any patient recover who was not guarded by previous vaccination.

Rather an animated debate fol-

lowed, the general result of which was, that most of those who had seen anything of smallpox, recognized the divisions proposed by Dr. Gregory as correct, and leading to useful practical consequences: still they were not admitted as distinct *species*, nor as having their seat in essentially distinct tissues—or, at least, when any besides the skin and mucous membranes were affected at all, such affections were held to be only common inflammation.

III.

CASE OF THE CURE OF OPEN CANCER,
BY THE EXHIBITION OF THE CHLORIDE OF SODA.

By THOMAS BUCHANAN, C.M.

SIR,—I shall feel obliged by the insertion in your valuable Journal of the following history of a case of open cancer, cured by (what I presume to be) a new mode of treatment, after other modes had failed.

Jane Spencer, æt. 53, of Burton-Pidsey, in Holdernets, was under my care, about two years ago, for cancer of the right mamma. She had been several years affected with this dangerous and insidious disease, and had applied to various practitioners, in particular to the late Dr. Alderson, who advised extirpation as the only means of saving her life. When she applied to me, the right breast was ulcerated to the extent of about two inches in diameter, including part of the nipple, and extending towards the axilla, with darting pains in the breast, thorax, and armpit. As the patient was determined against any operation, I applied the tincture of iodine over the whole of

the breast, and dressed the wound with the ung. resin. comp. The ulcer healed gradually, but slowly; the pains diminished speedily; and in four days from the first application she was entirely freed from suffering. The parts, when healed, remained considerably indurated, but showed no loss of substance. This woman was one of those patients mentioned in my late work.*

In this state the breast continued nearly twelve months, when, in the beginning of June, 1829, the whole of the indurated parts were thrown off, leaving a foul fetid ulcer of upwards of two inches and a half in diameter, which speedily discharged a quantity of thin, bloody, fetid sanies. All her former symptoms of darting pains in the breast, thorax, axilla, and abdomen, returned with redoubled violence.

The patient continued to have the ulcer dressed with such ointments as she could procure, until it became so nauseous, from the fetid smell of the discharge, as to affect not only her own health, but that of her son, who dressed the wound. In this state she came to Hull, and applied to me, alleging “that as she had found benefit formerly, she felt assured that I could do her good this time also.” Having, prior to this period, frequently used a weak solution of the chloride of soda as a gargle in ulcerations of the mouth and throat, as well as in foul ulcers, I was induced, from these circumstances, to apply this powerful medicine in the case before me, and of the following strength:—

* Essay on the Treatment of Diseased Joints, and the Non-union of Fracture, &c.

R. Liq. Chor. Sodæ ʒvi.
Aquæ Distill. ʒviii. M. ft. Lotio.

I dipped a pledget of lint into this lotion, and applied it to the diseased portion of the breast, with directions to keep the parts constantly moist with it; and also to take two tablespoonsful of the solution three times a day.

The following day the discharge was changed to the color and consistence of cream, totally divested of its fetid disagreeable smell. The ulcer healed rapidly; the whole of it was soon covered with healthy skin; forming, however, a considerable depression, occasioned by the loss of substance, as if part of the mamma had been dug out. The cure was completed by the latter part of June, 1829, being little more than ten or twelve days from the time of the first application of the solution of the chloride, and with only six bottles of the above, which were used indiscriminately as mixture and lotion. The patient was employed in the harvest following, and as she expressed it, "wrought in better health and spirits than she had done for these last twenty years."

It may perhaps be asked, that as I lay claim to originality in the mode of treatment, why was this case not published prior to that of Mr. Fielding, of this place? To this I beg leave to reply, that I wished to ascertain whether or not the cure would be permanent; and also to collate a few similar cases before publication, and thereby, if possible, obviate any unfavorable impressions which your late critique on my work might create, where it was remarked—"Mr. Buchanan undoubtedly merits commendation for the zeal he has displayed in

his trials of the medicine (iodine), however divided opinion may be on the results. For our part, we believe the author has been led away by that leaning in its favor, which all men must feel in pursuing a particular inquiry."*

Bearing in mind these circumstances, I therefore abstained from publication on this subject, and waited patiently the result of time, that great test of human discovery, in order to remove any shadow of doubt as to the permanency of the cure. But learning, through the medium of the Gazette (No. 92, p. 430), the very excellent cure of an open cancer by Mr. Fielding, I then certainly thought it my duty to lay before you the history of the case.

Enclosed is a note received from my friend Dr. Chalmers, one of the Physicians to the Hull Infirmary, after his examination of the patient, expressing his opinion of the cure. Your insertion of the history of this case in your Journal, will much oblige, Sir, &c.—*Med. Gaz.*

IV.

FRACTURE OF THE VERTEBRAL COLUMN
—SYMPTOMS OF COMPRESSION OF
THE CORD—COMPLETE RECOVERY.

EXAMPLES of complete recovery after fracture of the vertebral column are rare; we therefore give insertion to the following, which has very recently occurred in the Hotel Dieu, Paris.

L. Jean-Marie, a mason, aged 28, of sanguineous temperament and robust frame, was admitted at the above hospital Sept. 3d. On the 27th of August he fell

* *Medico-Chirurgical Journal*, Dec., 1828.

from the second floor of a house, and fractured his back at the site of the tenth dorsal vertebra: the existence of fracture was ascertained by M. Berard: the patient had been bled four times during six days, by a medical man who was called immediately after the accident. At the moment of the fall he became insensible, but this state soon passed away, and it was not till the second day that signs of compression were evinced by paralysis of the left inferior extremity, at which time symptoms of inflammation had come on. On his arrival at the Hotel Dieu, he was bled again.

Sept. 4th.—At the visit to-day the fracture of the vertebral column was manifested by a considerable projection of the last dorsal vertebra, which formed a curve of three inches, the convexity of which was towards the right, and, of course, the concavity to the left. No attempt was made to verify the existence of fracture, by producing crepitus, as it was feared by so doing the fragments might be thrown into a less favorable position. The left leg was without sense or motion; the right retained its functions, as did the bladder and rectum. The patient was placed in a position as nearly horizontal as possible, the loins being supported on a hollow pillow. A sheet was folded like a cravat, and passing

across his chest, was fixed to the bars of the bed, so as to retain him in the recumbent posture. During the night (4-5th) he had delirium, with febrile reaction. He was bled to the extent of three palets, and twenty-five leeches were applied in the course of the jugulars.

5th.—The patient calmer, notwithstanding which, a strait waistcoat, which had been put on the preceding night, was retained. He was cupped on each side of the spinal column, at the seat of injury.

7th.—The cerebral symptoms gone, but the paralysis of the left lower extremity continues. Cupping repeated as before.

From this time gradual improvement took place, but the patient was rigorously prevented from moving, and no examination of the fracture ventured upon. By degrees, the sensibility and power of motion returned in the paralytic limb: by the end of September the former was nearly restored, but the latter came more slowly.

Oct. 14th.—The sensibility and power of motion are now nearly the same on the left side as the other: the projection of the vertebræ, though still perceptible, is much less than before. He has not yet been allowed to move from his bed, but his recovery is regarded as secure.—*La Clinique*.

SKETCHES OF PERIODICAL LITERATURE.

ULCERATION OF THE STOMACH.

A REMARKABLE case of this sort is mentioned in the Midland Medical Reporter, which occurred under the

following circumstances:—The patient, a man 50 years of age, had been always healthy until within eight months of the time when he

applied for advice. During this period he had been contracting the habit of drinking considerable quantities of liquor, to which he had previously been wholly unaccustomed. He had lost his appetite, and relished nothing but beer; had no pain, but an uneasy sensation in the stomach, and frequent vomiting. On subsequently noticing the case, it appeared that this vomiting generally occurred from two to three hours after taking food; the matter thrown up was dark-colored, and very offensive. This state of things continued for four or five weeks, when the bowels, which had all along been moved by enemata, became very much constipated, and mechanical means were resorted to for relieving the overloaded rectum. When this object was effected, a remarkable change took place in the symptoms; the uneasiness at the stomach was relieved, and the vomiting ceased. The bowels were afterwards kept open with *ol. ricini*, and the vomiting did not recur; but in the meantime the strength gradually failed, and death occurred nine weeks from the commencement of the treatment.

On examination, the pyloric orifice of the stomach was found very much contracted in size, the substance of the organ in its vicinity thickened, and the mucous membrane ulcerated. The duodenum, for several inches, was in like manner ulcerated and thickened. The substance surrounding the orifice was hard and scirrhus; but above and below, the stomach and intestine were reduced to a pulpy mass, so fragile as to yield to the slightest

force. The colon and rectum were found very much thickened in their coats, and the calibre so much contracted as in many cases to afford scarce a passage for the rectum bougie. The other intestines appeared healthy.

The circumstance most worthy of remark in this case, was the error into which the practitioner might be led under such circumstances, when the vomiting was relieved by the evacuation of the rectum, of supposing the disease in the stomach to be only sympathetic, or at least secondary to that which existed below. The true state of the case was anticipated in a great measure by the medical attendants, but there was certainly room for a mistaken prognosis, which would have been followed by unpleasant consequences.

POISONING.

Two cases which lately occurred in Worcester, Eng., presented symptoms somewhat different from those which are usually induced by the articles taken.—A child, five years of age, had swallowed, as was supposed, a small quantity of sulphuric acid. Being seen immediately after, a quantity of magnesia and lime water was administered, and vomiting provoked by irritating the fauces. This process produced resistance and crying on the part of the child, but after it was over, no farther pain was complained of, and he shortly fell asleep. The state of the mouth and throat, however, gave sufficient reason to suppose that some of the poison had been swallowed; and the medicines were ordered to be continued. Four hours

afterward, he was found asleep, with heavy and sonorous respiration. In the interval he had vomited once. Pressure was made on the stomach, but it could not be ascertained that the slightest tenderness existed there; neither was there any tension or fullness of the abdomen. Six hours after this he died; and on examination, a large portion of the mucous membrane of the stomach was found to be entirely destroyed.

In the other case, a woman swallowed about half an ounce of arsenic in gruel, for the purpose of self-destruction, which she completely effected. Death took place in about four hours. On examination, there was no decided erosion of the ventricular coats, though the internal surface was highly vascular, and appeared to have been greatly inflamed.

LACERATIONS OF THE PERINEUM.

DR. DIEFFENBACH, of Berlin, has suggested a new, and, as it would seem, an improved method of treating these lacerations, when they occur in the worst form; that is to say, so extensive as to produce a communication between the rectum and vagina, and render the patient incapable of retaining the feces. In this state of things, Dr. D. leaves the parts untouched for several weeks, until the patient has recovered from the exhaustion caused by the labor, and has gained sufficient strength to retain for a considerable time a uniform position. The bowels are then perfectly evacuated by cathartics and injections, and afterwards opiates are given to a sufficient extent to secure constipation for eight days.

The first step of the operation is to cut away the indurated edges of the laceration, so that the two surfaces which are to be united may perfectly correspond. The wound is then to be brought together, at the central part, by a strong knotted suture, introduced in such a manner as to pass through the loose cellular texture at the bottom of the wound; two small needles, with twisted sutures, are to be introduced through the lips of the wound, on the vaginal side of the principal suture; the little slit in the rectum itself to be united by two small twisted sutures, introduced with small stitching needles; and lastly, two twisted sutures to be passed through the wound, between the rectum and central suture. The ligatures and ends of the needles must be cut away as close as possible.

All this, however, forms but a part of the operation. The remainder, which is original with Dr. D., consists in making two incisions,—one on each side of the wound,—of equal length, and each slightly concave towards it. The object of this is to take off all tension of the parts which would tend to separate the sides of the principal wound, and to enable them to remain in perfect contact, notwithstanding those movements on the part of the patient which must necessarily be made while the process of union is going on. Bandages, pessaries, sponges, and other mechanical means usually resorted to for keeping the parts in apposition, are by this mode of operating rendered wholly unnecessary.

The treatment consists in the employment of cold poultices, thorough

ablution of the parts, and low diet. On the fourth or fifth day, saturnine lotions are substituted for the poultices, and charpie applied to any surfaces which are suppurating. The lateral incisions require no particular treatment, as they are covered at first by the poultices, and may afterwards be dressed with charpie till they heal up.

In a case operated on in this manner, which is described by Dr. D., every part adhered firmly at the end of eight days, except a small fissure in the rectum, which healed by granulation before the end of the fourth week. The patient, who had been reduced to great misery by the unceasing involuntary discharges of flatus and feces, was thus restored, within a month, to a state of perfect health.

GASTRIC IRRITATION FROM PREGNANCY.

OF all the constitutional affections produced by the pregnant state, none perhaps produces greater distress than the obstinate vomiting which so frequently accompanies its early stage. A case is mentioned in a late journal which resisted the suc-

cessive use of effervescing mixtures, cathartics, enemata, calomel, laudanum in various combinations, venesection, local bleeding, blisters, and finally hydrocyanic acid, all which were administered in the space of eight days. The acid produced a cessation of the vomiting for three hours, after which it returned with equal violence as before. The disease appeared at last to subside spontaneously, the stomach having reconciled itself to the new state of things in the system. The pregnancy went on well, and the patient, in due time, was delivered of a healthy child.

ANGINA PECTORIS.

THE most common view which is taken of the proximate cause of this disease, is that which attributes it to ossification of the great vessels of the heart. In a case lately reported in a foreign periodical, the heart was found, on dissection, to be healthy, but the liver was extensively diseased. Such are the uncertainties of medical science. If all diagnoses of diseases could be subjected to this test of after-examination, we might hope for a material improvement in this important department.

BOSTON, TUESDAY, JANUARY 5, 1830.

NEW WORK.

AMONG the medical productions recently from the English press, is a work in three parts, by MICHAEL WARD, M.D. S.R.C.S.L., *late Surgeon to the Manchester Infirmary*, &c. The sum total of the contents

of this work is, that burns and scalds may be cured by common wheat flour. If the reader were to peruse the whole of Dr. Ward's learned production, he would get just as much information as is contained in these few words,—and, we may add, no more. The same fact he has been

apprised of for many months, through our own pages and those of every medical Journal, and almost every newspaper in this country and Great Britain. In speaking of this work, the English reviewer very pointedly remarks :—

“In typography, it is the most curious intermixture of Roman, capitals, and Italics, we have ever witnessed ; and in medicine, the most felicitous blending of cases, comments, correspondence, notes, corrections, and commendations, that can possibly be imagined,—a model of scientific arrangement, and monument of professional ingenuity. There is literally nothing new in it, and yet, *mira-
bile dictu*, that nothing is divided into three parts.”

PHTHISIS PULMONALIS.

A CIRCUMSTANCE attending this disease, which has perhaps attracted less notice than its importance deserved, is the inflammatory process which occurs previous to its fatal termination in the mucous membrane of the alimentary canal. The occurrence of aphthæ within the mouth and throat, in the last stage of phthisis, is a familiar fact ; but the extension of the morbid action to the stomach and intestines is not generally alluded to as a probable occurrence in this stage, by those who have treated of the disease. A circumstance which might lead us to suspect this to be the case, is the frequent occurrence of severe and obstinate diarrhœa at this period. In the examination after death of phthisical patients, a diseased state of the intestines is very frequently noticed. We have had our own attention called to this fact very recently, by wit-

nessing the post obit appearances in a female patient who died with diseased lungs, and in whom the organs were found tuberculous. The intestines exhibited a succession of ulcerated passages, of considerable size, through nearly their whole extent. Yet the symptoms during life were referred wholly to the lungs ; and there were no more than the usual reasons for supposing that any disease existed elsewhere. This point of pathology deserves, we think, a fuller investigation than it has yet received.

There is still another fact which is seldom, we believe never, noticed in standard works on consumption, and which might be considered in connection with that to which we have alluded. Even in the early stages of this complaint, a paroxysm of coughing is often induced by taking food, and continues till the food is rejected. Where this has occurred, we have never known a recovery to take place ; so that when, in conjunction with the usual symptoms, this has been observed, it appears to us more decisive of the fate of the patient than any one circumstance so early in the history of the disease.

CATARRHAL COUGH.

THE consequence of taking many of the advertised Essences, Elixirs, &c., containing alcohol, opium, and a stimulating essential oil or gum, in producing inflammation of the pleura and lungs, and general fever, have proved so serious, that at this period of the year we consider it our duty to caution our readers against such dangerous articles, and to recommend to them the composition of the in-

spissated white juice of the garden lettuce, extract of liquorice, gum arabic, tolu, &c., first introduced into practice by Professor Duncan, under the name of Lettuce Lozenges; which, by promoting expectoration and perspiration, allaying irritation in the internal membrane of the windpipe, and abating fever, speedily remove both the cause and effects, and which, at the same time, under any circumstances or condition of the system, are incapable of doing mischief. In all the elixirs, essences, tinctures, &c., advertised as infallible remedies for cough,—and we believe we have analyzed nearly all of them,—we have detected opium, combined with an aromatic, and alcohol. The opium allays the irritation in the windpipe, but by checking expectoration and disturbing the nervous system, they occasion congestion of the vessels of the lungs, &c., excite fever, and thereby often convert a simple case of catarrh either into pleurisy, inflammation of the lungs, or inflammatory fever. Trusting to the false promises of the unprincipled proprietors of certain cough-drops, elixirs, &c., many thousands have continued their use till disease has taken place in the lungs, which lays the foundation of fatal consumption.

Gazette of Health.

Incipient White Swelling.—Mr. Bayle has published a case of “Incipient White Swelling,” in which the tincture of iodine, administered in the dose of twenty drops twice a day, in a wineglassful of water; and

the application of a liniment composed chiefly of a solution of iodine, as the following, succeeded in effecting a cure:—

Take of Barbadoes Tar, two drachms;
Iodine, twenty grains;
Oil of Almonds, two oz. Mix.

To be gently rubbed over the affected joint every night and morning, or three times a day.—*Ib.*

Retention of Urine.—Mr. Wakley relates a case of retention of urine which lately occurred in St. Bartholomew's Hospital, under the care of Mr. Earle. The patient had suffered very much from stricture of the urethra for about twelve months, which continued gradually to advance till he was only able to evacuate the bladder by drops. During his confinement in the Hospital, a complete retention took place, and the bladder becoming enormously distended, with symptoms of inflammation, Mr. Earle made several efforts to introduce a catheter; but finding it impracticable, he punctured the bladder *above the pubis*, when about three pints of thick unhealthy urine escaped. He soon became much easier. The next day he was considerably better, after which the pain &c. continued gradually to decrease, and the urine to pass freely through the catheter.—*Ib.*

Variola.—The smallpox is prevailing at Quebec, and the varioloid disease, it is said, is not an uncommon occurrence.

WEEKLY REPORT OF DEATHS IN BOSTON, ENDING DECEMBER 26.

Date.	Sex.	Age	Disease.	Date.	Sex.	Age.	Disease.
Dec. 20.	F.	18 mo	hooping cough		M.	50 yrs	unknown
	F.	2 yrs	burn		M.	11 mo	lung fever
21.	M.	23	suicide	24.	F.	18	measles
	M.	29	consumption		M.	23 yrs	dropsy on the brain
	M.	18 mo	unknown		F.	80	old age
22.	F.	4 yrs	croup	25.	F.	57	liver complaint
23.	M.	21	consumption	26.	M.	9 mo	dropsy in the head
	M.	26	nervous fever				Males, 9.—Females, 6. Total, 15.

ADVERTISEMENTS.

NEW MEDICAL BOOKS.

JUST published, and for sale, by CARTER & HENDEE,—Malaria; an Essay on the Production and Propagation of this Poison. By JOHN McCULLOCH, M.D. F.R.S., &c. &c.

An Essay on the Diseases of the Internal Ear. By I. A. SAISSY, M.D. Translated from the French, by NATHAN R. SMITH, M.D., Professor of Surgery in the University of Maryland; with a Supplement on Diseases of the External Ear, by the Translator.

Observations on the Utility and Administration of Purgative Medicines, in several Diseases. By JAMES HAMILTON, M. D., Fellow of the Royal College of Physicians, &c. &c. From the Fifth Edinburgh Edition.

A Treatise on Pathological Anatomy. By WILLIAM E. HORNER, M.D., Adjunct Professor of Anatomy in the University of Pennsylvania, Surgeon at the Infirmary of the Philadelphia Almshouse, Member of the American Philosophical Society, &c.

Elements of Operative Surgery. Translated from the French of A. TAVERNIER, Doctor of Medicine of the Faculty of Paris, &c., with copious Notes and Additions. By S. D. GROSS, M.D.

MEMORIA MEDICA.

THIS day published by CARTER & HENDEE, corner of Washington and School Streets, Memoria Medica,—a Medical Common-place Book,—with an alphabetical Index of the most common terms occurring in practice. Carefully selected and arranged by a Fellow of the Massachusetts Medical Society.

From Dr. James Jackson, Professor of the Theory and Practice of Medicine in Harvard University.

Gentlemen,—I have examined the "Memoria Medica" which you sent to me. I think the plan of it very excellent, and that it will be found highly useful to practitioners and students of medicine. I have never believed that a voluminous common-place book can be very beneficial to any man, unless he means to become an author. But on the other hand, every one will find an advantage in keeping a common-place book in which he may notice the detached facts which

come under his notice, and which are likely soon to be lost from his memory. The book you have prepared will be found well adapted for this purpose by medical men, and will be more likely to be used by those who procure it than a common blank book, because all the labor of arrangement is saved.

I am, gentlemen, your obedient servant,
JAMES JACKSON.

From Dr. Walter Channing, Professor of Obstetrics and Medical Jurisprudence in Harvard University.

I have examined the Medical Common-place Book which was left with your note this evening, and with pleasure offer you my thanks for the publication of so useful a volume. Every practitioner of medicine will agree with the remarks in the preface on the inconveniences and absolute loss of what is very useful, which result from depending solely on the memory. Not unfrequently it happens that some particular prescription is peculiarly suited to an individual. Some time passes, and an occasion again arises in which we believe that the same medicine might be equally beneficial; what it was, however, has wholly escaped us; and though something else may be equally useful, still some regret may be felt, at least by the patient, that what has been found beneficial cannot again be at once resorted to. Some object to an artificial method of preserving, for such and other uses, what may be safely trusted to the memory, if that faculty be faithfully cultivated. I am willing to admit that there is force in this objection; but it is a simple question of fact only we have to consider. If it be true that there is much lost to the individual, and certainly much more to the profession, by trusting entirely to the memory, the occasional use of the Common-place Book for the preservation of what is truly valuable, has all the recommendation it needs. For such purposes, viz., for the registering of cases the most rare, and the frequent, if important, epidemics, prescriptions, &c., your *Memoria Medica* promises to be very useful; and for these it well deserves to be recommended to physicians. Students attending hospital practice will find it very valuable. Its tables of names are very full, and under references very easy. I cannot but hope it will get into general use.

Yours, &c.,
W. CHANNING.
Dec. 8.

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

I.

CATARACTS ALTERNATING WITH
DIABETES.

[This paper furnishes us an example of that alternation of different organs in morbid affection, the precise pathology of which is so little understood by the profession.]

THE following is a very singular case, and one that would be met with incredulity, were it not guaranteed, as it is, by the name of the Surgeon and of the Hospital.

Eliza Broomfield, æt. 15, remarkably tall and thin, was admitted into the Winchester County Hospital with cataract in either eye. The pupils were dilated to their utmost, and the crystalline lens was evidently so augmented in bulk as to protrude through the pupillary opening; its color was uniformly milky; the cornea unusually glassy; the vision so completely lost that the patient could only distinguish most imperfectly light from darkness. Independent of the cataracts, there were dyspnoea, cough, and loss of appetite.

The cataracts had appeared simultaneously fourteen months previous to her admission, and had been completely formed in the surprisingly short period of twenty days. The menses had appeared at the age of eleven, and flowed with regularity till her thirteenth

year, when they disappeared. From having been healthy and robust, she now became very debilitated, increased most astonishingly in stature, and subsequently was attacked with profuse nocturnal perspirations. When twelve months had elapsed, an evident amendment took place, but it proved to be temporary only, and very shortly afterwards the girl began to complain of uneasiness about the head, with vertigo, confusion, and obscurity of vision.

R. Infus. gent. c. ʒi.

Spt. Æth. Nit. ʒss.

Tr. Camph. c. ʒss. ter die sumend.

Pil. Hyd. gr. ij. omni nocte sumend.

These medicines were continued for upwards of a fortnight, with considerable benefit; and on the 20th of February we find that, though the cough was nearly gone, the dyspnoea and appetite were worse. The dilatation of the pupils, bulging, and milky whiteness of each lens were diminished, and the patient could readily detect any substance interposed between her and the light of a window. The medicines were repeated, with the addition of an aperient. On the 24th she could discern the flame of a candle at some little distance, but it was now discovered that the urine was too abundant.

“ Feb. 28th.—The quantity of

urine passed for the last four days has averaged sixteen pints daily. Its color of a greenish yellow, and its taste strongly mellitic. Pulse 65, and feeble; appetite natural; dyspnoea not diminished; the emaciation very considerable; tongue morbidly clean; skin dry and scurfy. The cataracts are rapidly disappearing. Ordered to subsist exclusively on animal food, and to substitute the following medicines for those which the patient has been taking:—

R. Sulph zinci, ʒss.

Ext. cinchonæ, ʒ iss. ft. pil. xxiv.
sumat. ij. ter die c. haust. sequent.

R. Tinct. opii, gtt. vi.

Decoct. cinchon. ʒi.
Conf. aromat. ʒi. ft. haustus.

“March 3d.—Urine passed the two last days, thirteen pints and a half; pulse 72: the cataracts have totally disappeared, and the patient's visual powers perfect, being enabled to employ her needle with perfect ease. Continue medicines and diet.

“9th.—Urine has decreased to nine pints;—pulse 94;—the dyspnoea has very much abated, and there is a decided amendment in the patient's strength. Continue.

“14th.—Urine eight pints; pulse 88.

“18th.—Urine seven pints; pulse 96.

“25th.—Urine two pints, and natural in respect to color and taste; pulse 80. The sole complaint appears to be extreme debility. The patient having regained her sight, and having been relieved of her diabetic symptoms, she became anxious to return home to her friends. She was accordingly

discharged, with an injunction to come back to the Hospital, should any of her former symptoms recur.

“May 10th.—Intense interest, as might naturally be expected, was excited with respect to the probable issue of this extraordinary case, which did not in the least subside after the departure of the patient from the house. Frequent opportunity was, fortunately, afforded of inquiry concerning her, from a relative who resided in an adjoining house, and who visited the Hospital once a fortnight as an out-patient. From this person the following report was obtained, and has subsequently been confirmed by the testimony of the mother of the patient.

“From her narrative, it appears, that almost immediately (about four days) after the young woman had returned home, she began to experience a relapse of uneasiness about the head, accompanied with great obscurity of vision, which increased with such rapidity, that, before a week had elapsed, she was in a state of utter darkness. To this pitiable condition succeeded her diabetic symptoms, but in a more aggravated form than in her previous attack, together with rapid emaciation, and overpowering debility. The quantity of urine evacuated for several days prior to her decease, averaged at twenty pints per diem; but, with the accession of these symptoms, there was a complete restoration of the natural functions of the eye, which she retained most perfectly to the last moments of her existence. Her death took place four weeks after the return of the diabetes. There had been no post-mortem examination.”—*Med. Chir. Rev.*

II.

DROPSICAL EFFUSION.

[The following article is one of several cases recently laid before the public, which lead to the conclusion that dropsical effusion is more often the effect of disease in the kidney than usually suspected. It should remind us to hold the probability of such cause always in view, in the examination of hydropic patients.]

FRANCIS MAGEE, aged 57, a weaver, at the time of his admission into the infirmary, on the 5th of August, 1828, had been affected for three weeks with considerable œdema, and some swelling and firmness of the belly. He had also occasional vomiting in the morning, and dull pain on pressure in the pit of the stomach, and along the margin of the ribs on the right side. He had likewise frequent cough, with difficult expectoration of tough opaque mucus, and considerable difficulty of breathing. The chest sounded loudly everywhere, on percussion; and both acts of respiration, but particularly expiration, were prolonged, inspiration being also indistinct, expiration distinct, sonorous and sibilant. The pulsation of the heart could not be felt with the hand, when he lay on the left side; and with the stethoscope, both sound and impulse were feeble. The pulse too was feeble, and only 52 in the minute. The tongue was furred, and the breath fetid; the bowels required the frequent use of laxatives; the urine was of natural quantity, but exceedingly pale, being of the lightest possible straw color, and depositing a moderate quantity of white flakes, when heated.

His pectoral complaints were of eight years standing, and began

subsequently to the healing of an old ulcer on the leg, which had been occasionally healed, though only for a few weeks at a time, during twelve years previous to its final cicatrization. About a year before his admission into the hospital, his breathing got worse, so as to annoy him when at work. About that time he had also a comatose attack, which lasted a day, and was removed by blood-letting. After that, his urine had been always pale, but natural in quantity. For two months before he entered the hospital, he had pain in the loins, difficulty in passing urine, and frequent attacks of vomiting.

He was ordered ten drops of tincture of digitalis, thrice a day, in an ounce of infusion of cassia, and likewise a mercurial pill every evening. Laxatives were also given from time to time. On the third day of this treatment, the urine was 104 ounces, and had a specific gravity of 1007.9. The œdema was lessened; and the action of the heart, both to the hand and to the stethoscope, was natural, though rather feeble. On the 11th of August the œdema was gone, the ascites nearly so; but his breathing was as laborious as ever, and he complained of pain round the whole lower margin of the chest, particularly in the loins, where pressure made the pain shoot towards the stomach. The digitalis was discontinued, and a squill mixture ordered in its place.

From this time the urine began to decrease in quantity, till on the 16th it was only 40 ounces daily. Its specific gravity was 1008.4; it was as colorless as ever, coagulated more abundantly when heated, and contained very little urea. There was no return of

the dropsical swellings, but his difficulty of breathing and cough were not in the least relieved. Next day the breathing was worse. He also became affected with headach, drowsiness, contracted pupil, some livor of the face, and tremors of the hands. The pulse was 60 and full, and the tongue brown on the centre. Fourteen ounces of blood were therefore taken from the arm, with some relief to the dyspnœa; and the blood was very buffy in one cup. The squill was now abandoned, and the digitalis resumed. On the 18th, the symptoms connected with the affection of the head were rather increased, and he was feeble and much exhausted. The urine was only fifteen ounces. A brisk laxative and a purgative enema were ordered, leeches were applied to the temples, and subsequently a blister to the head; but without any advantage. His stupor and tremors got gradually worse and worse; he complained of tenderness over the whole belly: the urine on the 19th was only twelve ounces; on the 20th, twelve ounces were withdrawn by the catheter. On the morning of the 21st, he died.

The whole quantity of urine passed during the last thirty-six hours of his life was two ounces. This had precisely the same external qualities as the urine previously passed, but had rather a higher specific gravity, namely, 1009.5.

Inspection.—There was very little œdema of the limbs. The face was not livid, and the scalp was free of blood. The sinuses of the dura mater contained only a moderate quantity of blood; the

arachnoid and pia mater, as well as the substance of the whole brain, were remarkably destitute of blood, and blanched. There was not above half a drachm of fluid in each lateral ventricle, and half an ounce in the base of the skull. Even in the base of the brain the vessels were unusually empty of blood. The cortical matter of the brain appeared less in thickness than natural. In the middle of the left *thalamus*, half an inch behind the anterior commissure, there was a cavity which would have held a cherry-stone; it was crossed by filaments of cellular tissue, walled in by a thin partition of condensed cerebral substance, but not surrounded by redness or softening.

The pericardium and base of the left lung adhered to the pleura of the ribs by very old adhesions; and four ounces of clear serum were contained in the pleural sac of that side, but none in the pericardium. The posterior part of the lower lobe was very œdematous. The walls of the left ventricle of the heart were somewhat thickened, and its cavity contracted. The aorta was slightly and uniformly enlarged at the arch, and its whole inner membrane thickened, hard and wrinkled,—the valves being also involved in this change of structure. On the surface of the right lung there were many old adhesions to the ribs; and in its substance a great deal of œdematous infiltration. The fore part of both lungs was grey, strongly crepitant when handled, and slightly emphysematous,—the whole air-cells being somewhat enlarged. The nature of their structure in the posterior part could not be

ascertained, on account of their state of infiltration. The greater bronchial tubes were filled with mucus. The blood was everywhere black and fluid.

The stomach and intestines were healthy. The spleen was of a pale reddish-brown, firm, and composed of little radiated masses,—not unlike the mineral Wavellite in appearance. The liver was somewhat larger than usual, but in structure perfectly healthy. The kidneys were both much diseased; the right was rather less than natural, externally rough with small irregular modules, and of a pale greyish-brown color,—internally of a pale greyish-yellow tint. The *tubuli uriniferi* were much nearer the surface than in the healthy kidney, greatly diminished in size, and pushed as it were outwardly, by a deposit around the pelvis of greyish-yellow, indistinctly granular matter; into which also the whole cortical substance was converted, so as to have lost its usual fibrous appearance. Even the fibres of the *tubuli* were unusually pale, and the yellow matter was deposited among them. The pelvis of the kidney was small, the ureter pervious. The left kidney was much diminished in size, flattened and flabby. Its cortical substance was in the same state as that of the right kidney, but rather darker, and with a few distinct tubercles; and some grains were softened. The tubular portion was of a dark brownish-red color, and not fibrous at all; and it contained several small watery cells, apparently the remains of the infundibula. The ureter was pervious. The capsular fat of both kidneys was indurated, and the tunica

propria thickened and adhering.

Analysis of the Blood.—About an ounce of blood was collected from the vena cava, by an incision in the loins, great care being taken to keep it clean and pure. It was black, fluid, and nearly free of the odor of putrefaction. It was heated in a vapor bath, at a temperature a little under 212°, and rapidly stirred as soon as it began to coagulate. A thick, brownish-red, granular mass, being thus formed, a little distilled water was added; and after agitation, the whole was filtered. A cherry-red fluid passed through, which, at 212° deg., deposited more brown flakes, and became wine-yellow in color. This was evaporated nearly to dryness in the vapor bath, at a temperature beneath 212° deg., during which a fetid odor was exhaled, exactly the same as that of the patient's breath during life. Just before the fluid began to acquire a syrupy consistence, a drop of it was treated with nitric acid, which rendered it opaque, and caused considerable coagulation; but crystals were not formed. The syrupy extract, when acted on by boiling alcohol, gave a pale wine-yellow solution, which was evaporated in a small glass vessel till it began to thicken. This extract had the same fetor.

On the addition of a few drops of nitric acid, the same odor was exhaled from it as from extract of urine, when similarly treated; and immediately fine, greyish-red, flaky crystals, of a pearly lustre, were formed in abundance, so as to thicken the whole mass. These were evidently scales of nitrate of urea.—*Lond. Med. Gaz.*

III.

DIFFICULTY OF SWALLOWING FROM
DISLOCATION OR DIASTASIS OF THE
CORNUA OF THE OS HYOIDES.

SAUVAGES, in his nosology, has given the name of the dysphagia of Valsalva to the difficulty of swallowing arising from this cause, which was first described by the latter author. Since his time, Borsieri and Molinelli have recorded several cases of the affection in question, sometimes occasioned by external violence, sometimes from swallowing large morsels of food. Dr. Gio. Bat. Magna has recently published a similar case in the *Annali Universali di Medicina*, of Milan, for November and December, 1828, of which we shall make a short abstract.

A man of sixty, extremely meagre and flabby, whilst endeavoring to swallow a large piece of the tendon of beef, thought he felt it stick in his throat, and made many attempts to get it down, without being even able to swallow his saliva. Each unsuccessful effort was accompanied with a peculiar noise of air gurgling up the œsophagus, but respiration and the power of speech were free. Nothing could be seen or felt about the pharynx or neck, and a bougie passed readily down the œsophagus, without encountering any obstacle or procuring any relief. The painful spot being precisely the region of the os hyoides, and no foreign body being lodged there, Signor Magna imagined that dislocation, or rather diastasis, of the appendices of the os hyoides itself, might be the cause of all the symptoms. He accordingly passed down, behind the base of the tongue, the fore and middle fingers of the right hand, and moved the

os hyoides in the manner recommended by Valsalva and Sauvages, whilst the left hand was applied on the bone behind. Immediately the uneasy sensations experienced by the patient in the spot disappeared, and he was able to swallow water with ease.

Two years afterwards, a similar accident happened from taking a large mouthful of hard cold boullie, and was remedied by similar means. *Med. Chir. Rev.*

IV.

Communicated for the Boston Medical and Surgical Journal.

Some Account of Affections of the Face, considered in Relation to the Appearance of a new Disease of this Part, designated, by Dr. Jackson, Gangrænopsis.

By R. A. MERRIMAN, M.D.

THREE cases of Gangrænopsis have come under my observation within the last three years.

CASE 1st.—The first was a little girl about ten years old, who had taken, in the course of ten days, four cathartic doses of calomel, repeated once in two or three days. She was so unfortunate as to fall into the hands of two of the fraternity without consultation, which is always a misfortune to the patient, because it is impossible for one to know the doings of the other very accurately. When I first saw her, the swelling and soreness of the mouth were called canker. The swelling of the parts about the mouth progressed uninterruptedly to gangrene and sphacelation of both lips, and the greater part of the right cheek, before her death, and left such a hideous spectacle in the countenance of the child, as made it de-

sirable she might not survive. Our wishes were realized.

CASE 2d.—The second case was a man about fifty years old, who followed the coasting business from this place to Boston. He thought the complaint was caused by shaving off a pimple, and taking cold. This patient had taken no mercury. When I first saw him, he had been under the care of Dr. — a short time. The face had very much the appearance of that of the little girl, excepting it was more confined to one side of the lips and one cheek. The disorder progressed to sloughing and separation of a portion of the cheek to the bigness of a dollar, near the angle of the mouth. The wound healed readily, leaving a large contracted scar.—This was the only fortunate case of the three. The treatment was similar to the others, principally local, the fermenting poultice, charcoal, and the steams of vinegar. The system did not appear to suffer very materially.

CASE 3d.—The third case was that of a servant girl, about whom there could not much be known. She was about sixteen years old, and it was supposed, by those immediately acquainted with her, that she had taken something for the purpose of interrupting a supposed pregnancy. On account of the swelling of the organs of speech, she could not speak intelligibly when I first saw her, about five days before her death. The swelling was great, had been rapid, and continued rapidly to increase and extend; at my first visit, it was confined to the lips, mouth and left cheek. The whole neck above and some below

the clavicles at last was affected. Whether this patient had or had not taken any preparation of mercury, I could not ascertain. Gangrene had commenced a day or two before her death.—No remedies had any apparent effect in this case; she appeared to die from suffocation.

These cases occurred in the same neighborhood, within 150 yards of each other, in three successive years. The first case, the little girl, was connected with a poor family; the other two had all the comforts of health and sickness.

Since writing the above, two other cases have come to my knowledge. One, a girl about eighteen years old, who lived out of town, and was not seen by my friend Dr. Flagg, till three days before her death. This was very much such a case as my third,—the family suspecting that she had taken some means to procure abortion. The other was one to whom much mercury had been given, and pursued for a considerable time, in small doses, and even after profuse ptyalism had been established. This patient was a sea-faring man, about forty years old. His mouth and face swelled; he could not distinctly articulate for several months; his teeth fell out; and portions of his lower jaw, including the sockets of the teeth, came out. At the end of nine months he died, either of the original, or instituted disease.

In the year 1813, typhous fever prevailed in the part of the country where I then was practising. I recollect that in two protracted cases where mercury had been given in small doses for

a number of weeks, the cheeks were affected, as I supposed, with the medicine. In one, a small perforation, near the angle of the mouth, about the bigness of a dime, sphacelated and separated, without any swelling or inflammation; and this happened some time before the patient, a young lad, died.—The other case was a lady between fifty and sixty, who had swelling and inflammation in the neighborhood of the parotid gland. A large portion of the cheek sphacelated, and left an opening the bigness of a dollar, through which her food and drink flowed for some time. This patient recovered, and the wound healed, contracting the cheek and drawing her mouth on one side.

Other instances of sudden and unusual swellings about the mouth and face have occasionally arisen, which have subsided without making a lasting impression on our memories. A case happened in this town three years ago, where the tongue of a child eight or ten years old swelled beyond the boundaries of the mouth, and so continued for ten days, accompanied with much dropping of saliva. This case was unattended with much disturbance of the system.

When I first saw Dr. Jackson's account of "Gangrænopsis" in the Medical Recorder, I felt as though there might be some doubt about the specific character of the disease in most of the cases which he enumerated,—that they might have been the legitimate effects of mercury: a doubt which Dr. Jackson has more than hinted. It cannot be disguised, that the action of this most powerful weapon against disease, produces

sometimes very disastrous effects. It has fallen to my lot to witness these effects too frequently; and it must be confessed that we are all sometimes surprised at the sudden and accumulated effects of this medicine: but, of the severe cases related in this paper, in one certainly, the second case, no mercury had been taken. This was a very severe, but successful case;—and it is most probable that in two others, the third and fifth, none had been taken. In Dr. Jackson's cases, the most of them had taken mercury. Dr. Webber, in the Journal of Science, has not even appeared to suspect that mercury may have been the cause of the complaints. Only two of his cases appear to have been very severe. In these, one was established on his first visit, and amended under the use of mercury; in the other, mercury had been given. In the other two it is likely, agreeably to his custom, calomel had been given.

In Dr. Brown's case mercury was given, though several weeks previous to the appearance of the swelling. I have never observed anything like a mesial line marked in this disease, though most of the swelling has been on one side, but not confined to it. In the first case here related, the little girl, the sphacelation included all the lips and one cheek. The disorder has not been confined to children.

I have thought that these affections may be accounted for without considering them *sui generis*, or, that a new disease is making its appearance. The face and parts about it are peculiarly liable to sudden swellings and inflammation. These swellings are not only sudden, but very great,

so as entirely to obliterate the distinguishing features of the individual. The tongue is liable to these sudden swellings; carious and diseased teeth produce them; the whole face is frequently so swelled from exposures to vegetable poisons, as they are called, and the stings of poisonous insects, that the features of the individual are not recognizable. These swellings most generally go off by resolution. This peculiar diathesis probably is more susceptible in children than in more mature life. This aptitude to inflammation and swelling may be brought into action by various exciting causes; such as carious teeth, vegetable and animal poisons, and, as in one of the cases above related, by shaving off a pimple in taking off the beard, and by mercury.

In the first case related in this paper, we were satisfied that the gangrenous erosion was caused by the operation of mercury. The case was supposed to be one of debility or atrophy, where worms had become troublesome. Cathartic doses of calomel were directed once in two days, and observed till four doses were taken: the patient then was visited by Dr. —, without any knowledge of medicine having been prescribed previously, or taken; calomel was again prescribed, and upwards of one hundred lumbrici were discharged from the bowels a few days previous to the child's death. In this case, the patient evidently took a double portion of mercury. I would here too remark, that the lips both of old and young are subject to eruptions, but more particularly in young; and they may be more liable to the specific action of mercury in

young subjects than older, and more perhaps than other parts of the face.

Marblehead, Jan. 1, 1830.

V.

Communicated for the Boston Medical and Surgical Journal.

ANEURISM OF THE TEMPORAL ARTERY SPONTANEOUSLY RELIEVED.

By EBENEZER STONE, M.D.

In the spring of 1827, while visiting a lady sick of a lung fever, she showed me a tumor upon the scalp, near the foramen in the parietal bone, which, on examination, proved to be an aneurism of the temporal artery, of the size of a walnut. It pulsated strongly, as did the different branches of the temporal artery, which were enlarged and tortuous, spreading over the whole side of the forehead. She informed me that the tumor took place while she was sick, some time before, of a fever attended with severe headach.

It remained stationary till the summer of 1828, when it enlarged and became more troublesome, interrupting sleep by the throbbing pain. Pressure was now tried, with temporary relief. The distress, however, occasioned by the aneurism was so great, that an operation was proposed and consented to. But, in the mean time, she was seized with pneumonia, attended with a violent cough, which produced great pain in the tumor. Inflammation took place, so that the side of the head was much swollen, and the eye became œdematous. But, on the subsidence of the inflammation, we were surprised to find that the varicose arteries had disappeared, and that the tumor

had lessened one half in size, and become quite firm. I have examined it often of late, and have been constantly informed that it gave no uneasiness. The arteries in the neighborhood are neither

enlarged, nor do they discover any undue action. There is still a small firm tumor, in which, by pressure, you may discover deep-seated pulsation.

Walpole, Jan. 1, 1830.

SKETCHES OF PERIODICAL LITERATURE.

ULCERATION OF THE STOMACH.

WE mentioned, in a late number, a case of recent occurrence, in which death followed the taking of a large quantity of arsenic, but no trace of erosion was found in the gastric coats. A question of considerable interest in connection with this subject is, how far the existence of such erosion, or of ulceration in this organ, is to be taken as a proof of poison in suspected cases. That ulceration and even perforation of the stomach may happen from disease, is by no means a new discovery; but we believe the frequency of its occurrence would scarcely have been suspected, had not the investigations of some late pathologists particularly directed the attention of the public to the subject. It appears from these researches, that perforation of the stomach is often found in connection with, and as the sequel of, cancerous ulceration of the organ. These cases are usually of long continuance, and in their progress towards a fatal termination, produce various degrees of irritation in the part. In another class of cases, the disease has commenced in common inflammation, either of the mucous coat of the stomach on the one hand, or of the neighboring portion of pe-

ritoneum on the other. In many of the cases of this class, the disease of the stomach has been complicated with peritonitis; and this has particularly been noticed in women who have died of the disease after childbirth. In other cases, no inflammation could be discovered in the abdomen, and in some, even the part around the perforation appeared healthy.

The principal circumstances of difference, which distinguish the action of caustic poisons on the stomach from that of the causes above alluded to, are the following:—When perforation has been produced by poison, the edges of the opening are usually thickened, or at least of the same thickness as the rest of the organ; when, on the contrary, this has resulted from inflammation, the internal tunics are usually found to have yielded to a greater extent than the serous membrane, and the edges are thin. In the former case, the form of the opening is very irregular; in the latter, much less so. The color of the edge, from nitric acid, is usually yellow; and from the sulphuric, black. The state of the mouth, fauces, and œsophagus, when corrosive poison has been swallowed, also furnishes an important indica-

tion. The parts of the stomach in the vicinity of the perforation are also usually inflamed; but this circumstance, as we have seen, cannot be depended on.

It is however to be considered, that the cases in which the physician is called on to decide as to the proofs of poison, always involve the character, and usually the life of survivors; and however useful the above indications may be, as furnishing just ground of suspicion and farther examination, he would probably hesitate to assert, from the appearance of any or all of them, that poison was certainly the cause of death. The only safe ground on which to rest this conclusion, is the actual detection of the poisonous substance; and fortunately, in the majority of cases, this detection may be effected by chemical agents. Convictions may indeed take place where this species of proof cannot, from the circumstances, be obtained; but this will of course require the aid of other evidence, for the accuracy of which the medical man, as such, is not responsible.

OPHTHALMIA OF INFANTS.

WE quoted, in one of our late numbers, an opinion expressed in a foreign journal, that this disease was frequently connected with, and probably owing to, a morbid uterovaginal secretion in the parent. We see that a similar view of the subject is adopted by Dr. McKenzie, of the Glasgow Eye Infirmary. In his view, it is by no means necessary to the communication of disease from the parent, that it should be venereal

in its character. In a very large proportion of the cases in which the ophthalmia occurs, such an origin cannot be suspected. In many of these, however, a leucorrhœal discharge is known to exist; and it may fairly be presumed, that this is its true origin in the majority of all the cases which occur. Ophthalmia, indeed, is not the necessary consequence of this state of things, and may almost certainly be prevented by seasonable ablution, and a due regulation of heat and light. Where, however, the eye has been inoculated with morbid matter, and subsequently neglected for half an hour or more, exposed in the interval to a strong light, or to a draught of air, the disease can scarce fail to follow. That this species of neglect too often occurs through the carelessness of nurses, we are well aware; and the attention of the obstetric practitioner cannot be too often or too forcibly called to its inevitable consequences.

If the first production of this malady is thus often chargeable to the neglect of the nurse, its subsequent treatment implies, sometimes at least, a want of care and reflection on the part of the practitioner. It is an idea sometimes expressed and often entertained, that the diseases of infants are not to be benefited by any active treatment; and that where the restorative processes are to occur at all, they occur spontaneously. To a very considerable extent, this is undoubtedly true. Nature is mindful of the wants of her children, and most of those in regard to whom the resources of art are most limited. It is true that infants recover from

disease with very little interference from art, and with the exhibition of the simplest medicinal agents; but this fact neither offers any argument for neglect, nor for the omission of any remedy which is clearly indicated by the circumstances of a particular case. Above all, where disease occurs in an organ like the eye, which is open to inspection, every stage in its progress ought to be carefully noticed; and where, for want of this attention, as has sometimes happened, extensive deep ulceration has been permitted to take place unchecked, the attendant is justly chargeable with the violation of a sacred duty, and is without excuse.

In his views of the treatment of this disease, Dr. McKenzie does not materially differ from the author we have already quoted. The best collyrium for washing away the purulent discharge, according to him, is a solution of a grain of murias hydrargyri in eight ounces of water. This is to be applied not only to the eye itself, but to the internal surfaces of the lids, which must be separated from each other and everted, so that these surfaces may be exposed. If, from the thickness of the conjunctiva, the lids are disposed to remain everted, they must be carefully replaced. This application may be made with a bit of sponge, or, what is still better if performed by the surgeon, may be injected with a syringe. Beside this, however, it is necessary, except in the mildest cases, to employ a solution of nitr. arg. four grains, or of sulphate of

copper six grains to the ounce. This is to be applied to the surface of the eye with a camel's hair pencil, once or twice in the day. If the eyelids are disposed to become adherent during sleep, they must at night be illined with the ung. prec. rubri. In some mild cases, the last application alone has effected a cure. The other topical remedies proposed by Dr. McK. are, scarification of the lids and of the eye itself, leeches to the temples, and vesication behind the ear. Those of a more general nature are the oleum ricini as a cathartic, and calomel as an alterative, in tedious cases.

The extensive experience which Mr. McKenzie has had as an ophthalmic surgeon, renders his opinion on this subject an important authority, and one from which we would not, on light grounds, venture to dissent. By most practitioners, however, the treatment will probably be thought more active than in ordinary cases is necessary or useful. The astringent injection which is recommended is very much more powerful than that which has been employed by other surgeons. That usually prescribed by Mr. Ware in similar cases, contained one grain of blue vitriol to the ounce of water, and this was diluted before using. Great judgment and caution are requisite in regulating the strength of applications to so delicate a part as the eye. We have seen, in our own practice, a case of ulcerated cornea precisely similar to those in which Mr. Guthrie employs his ung. nit. arg., but which, after resisting these

severe measures, improved and recovered rapidly under the use of a very weak solution of sulph. zinc.

The paper of Mr. McKenzie to which we have referred, will be found in the Glasgow Journal for November.

BOSTON, TUESDAY, JANUARY 12, 1830.

MODE OF APPLYING LEECHES.

A HUNGRY animal seldom needs much persuasion to lay hold on the food set before him. The leech, particularly the American leech, seems to form an exception to this rule. Numerous have been the means adopted by different persons to persuade this animal to quaff his favorite nectar. Cream has been spread over the part to be bitten; as if to inform him that the milk of his engorgement was beneath. Raw beef has been rubbed upon it, to remind him of the *déllice* in waiting, or else to deceive him into the belief that his food was very near at hand, and thus encourage him to commence operations. When these means have failed, as if he had not spirit or power enough to penetrate the thin membrane which encases the human fabric, the work has been begun for him with the point of a lancet. But with all these baits and allurements at command, we know of few tasks so tiresome and so trying to the patience, as that of applying American leeches in the winter season. It deserves to be ranked among the miseries of life.—With great pleasure, therefore, we hail the discovery of a method *said to be* immediately effectual in accomplishing this desirable end. The author of this discovery has been led to it by a course

the most natural imaginable. Confiding in the soundness of the principle, that “a bird which can sing and wont sing, must be *made* to sing,” he dismisses at once all persuaders, and takes to the second course; and having found that this animal has as great an aversion to brass, as some young lads, who possess a large share of it, have to a certain vegetable production, he holds up this rod over him, with immediate effect.

This metallic composition, drawn into wire, is woven into a basket about the shape of an old-fashioned wire mouse-trap, and about the size of a new-fashioned wineglass. Into this machine the leeches are placed, and the open mouth of the basket is then applied to the skin which is to be punctured. The animals, instead of attaching themselves to the brass wire, as they generally do to a glass vessel, shun it most sedulously, and, driven from every other side of their cage, they rest on the skin, and eagerly commence the acts of puncturing and suction.

If this mode is found to be really as efficacious as it is represented to be by the discoverer, it will be the means of preventing a vast deal of impatience and petulance, as well as of enabling us to adopt an effectual method of relieving irritation, without the annoyance to the sick which is so apt to modify and often coun-

teract the effect of the application. The use of the common native leech, however, seems likely to be almost superseded, in this vicinity at least, by those imported from Germany and France. These latter attach much more readily than the natives, and draw a larger quantity, and leave an outlet for a much greater discharge. They will not however always bite without delay or inconvenience.

The usual mode in which these curious animals are sent here, is to pack them in boxes nearly filled with argillaceous earth. It has been usual, on their arrival here, to transfer them from this substance to vases of water; but it is now the practice with many of our druggists to let them remain without disturbance; and the success of this plan, though far from uniform, is said to be at least equal to that of the other. If indeed this substance be the best that can be adopted for their preservation during a voyage, we see no reason why it should not answer equally well for the purpose of keeping them while on shore. The peculiar susceptibilities of the leech to injury from external causes, seems yet to require much explanation; and one who should make himself fully acquainted with their habits, might render this knowledge very useful to himself and the community.

The utility of leeches in countries where they can be always obtained and depended on, is exceedingly great; whereas in this country, from their uncertainty and the trouble attending their application, they have been at times almost abandoned as a medical agent. In France, great attention is paid to the breed of leech-

es. We see in a recent journal that a considerable importation had been made from Senegal, and that experiments were making in the Parisian hospitals to determine their value as compared with the native leech. Could the foreign animal be preserved and multiplied in this country, it would form an important addition to our medical resources.

MEDICAL INQUIRER.

WE have received the first No. of a new monthly Journal, entitled *The New York Medical Inquirer*. The motto of this periodical is,—

“Let mystery be stripped of all pretence,
And practice be combined with common
sense.”

A motto sufficiently indicative, if we may judge from the specimen before us, of the character and spirit of the work. It is designed for general circulation. The success of the *Philadelphia Journal of Health* has given an impulse to works of this description; and we understand that a Journal of like character is to be published in this city. If generally read and acted on, the salutary precepts usually diffused in such works are calculated to lessen the amount of human suffering. One in each of our great cities might certainly be supported.

VACCINATION.

THE following is decidedly the most efficacious mode which has ever been adopted to secure a general vaccination among the poor. The *Bury and Norwich Post*, an English newspaper, states that,—

“Information having been given

that this dangerous and infectious disease is very prevalent in various parts of this city, public notice has been issued, by order of a court of mayoralty, recommending to the inhabitants immediately to have recourse to vaccination, and stating that the poor inhabitants may receive from the Corporation of Guardians a reward of two shillings and sixpence for each person who may be vaccinated."

THE MEMBRANA TYMPANI.

IT has been long observed, that in the act of attentive listening the mouth is partially opened, which is believed to increase the power of hearing, and facilitate the transmission of feeble sounds to the internal ear through the Eustachian tubes. I believe the alteration in the form of the external auditory passage, which is produced by the opening of the mouth, has been overlooked; but, if I mistake not, it is to this cause any increased facility of hearing, by such act, may be attributed. By placing the finger in the ear, and opening the mouth, the change in the form of the auditory passage is immediately observed, by the withdrawal of the articulating process of the lower jaw from within its axis, and thus enabling the sonorous undulations to impinge more directly upon the membrana tympani—*Lon. Med. Gazette.*

Removal of the Arm, Scapula and Clavicle.—An account is given, in a London Journal, of a sailor, in

whom all these parts were totally and successfully amputated by Dr. Ralph Cuming; formerly Surgeon to the Naval Hospital at Antigua. The cause of the operation was a severe gunshot wound.

Decomposition of Corrosive Sublimate by Vegetable Bodies.—According to the experiments of M. Fabian, the mucilage of quince seed (semence de coing), and that of salop, decomposes corrosive sublimate the instant it is mixed with its solution; but the decoction of marsh-mallow does not produce the same effect, and the extract of liquorice only partially.—*Phil. J. of Pharm.*

Preparation of Hartshorn Jelly.—The following process is due to M. Ferrez:—Four ounces of rasped hartshorn are to be steeped in eight ounces of water, acidulated with sixty grains of muriatic acid for ten minutes, and then washed carefully in two or three waters. It is then to be boiled with fresh water for half an hour, pressed through a cloth, and the liquid filtered whilst hot. This fluid is the jelly, which, being qualified by sugar or other ingredients, and boiled slightly, gives, upon cooling, a perfectly clear and good jelly for the table.—*Jour. de Phar.*

United Twins separated.—M. Mayor states, in the *Journal de Geneve* for July 30, 1829, that two girls, united like the Siamese Brothers, were separated by an operation, and both of them lived.

WEEKLY REPORT OF DEATHS IN BOSTON, ENDING DECEMBER 31.

Date.	Sex.	Age.	Disease.	Date.	Sex.	Age.	Disease.
Dec. 26.	F.	28 yrs	consumption	F.	2 1-2 y		measles
28.	F.	9	unknown	M.	26		unknown
29.	F.	27	bilious fever	M.	35		brain fever
	M.	72	complaint of the stomach	M.	80		old age
	M.	3	mortification	F.	35		consumption
	M.	64	intemperance	M.	13		epilepsy
	M.	5	lung fever	31.	M.	49	dropsy in the head
30.	F.	16 mo	hooping cough		M.	20 mo	worms
Males, 10,—Females, 6.				Total, 16.			

ADVERTISEMENTS.

NEW MEDICAL BOOKS.

JUST published, and for sale, by **CARTER & HENDEE**,—Malaria; an Essay on the Production and Propagation of this Poison. By **JOHN McCULLOCH**, M.D. F.R.S., &c. &c.

An Essay on the Diseases of the Internal Ear. By **I. A. SAISSY**, M.D. Translated from the French, by **NATHAN R. SMITH**, M.D., Professor of Surgery in the University of Maryland; with a Supplement on Diseases of the External Ear, by the Translator.

Observations on the Utility and Administration of Purgative Medicines, in several Diseases. By **JAMES HAMILTON**, M.D., Fellow of the Royal College of Physicians, &c. &c. From the Fifth Edinburgh Edition.

A Treatise on Pathological Anatomy. By **WILLIAM E. HORNER**, M.D., Adjunct Professor of Anatomy in the University of Pennsylvania, Surgeon at the Infirmary of the Philadelphia Almshouse, Member of the American Philosophical Society, &c.

Elements of Operative Surgery. Translated from the French of **A. TAVERNIER**, Doctor of Medicine of the Faculty of Paris, &c., with copious Notes and Additions. By **S. D. GROSS**, M.D.

A Treatise on the Nature, Cause and Treatment of Contagious Typhus. From the German of **J. VAL DE HILDENBRAND**, Imperial and Royal Counsellor, Professor of the Practice of Medicine in the University of Vienna, &c. &c. By **S. D. GROSS**, M.D.

An Essay on the Morbid Sensibility of the Stomach and Bowels. By **JAMES JOHNSON**, M.D.

Examinations in Anatomy, Physiology, Practice of Physic, Surgery, Chemistry, Materia Medica, and Pharmacy. For the Use of Students. By **ROBERT HOOPER**, M.D. Dec. 22.

MEDICAL SCHOOL OF MAINE.

THE MEDICAL LECTURES at **BOWDOIN COLLEGE** will commence on **TUESDAY**, February 23, 1830. Theory and Practice of Physic, by **JOHN DELAMATTER**, M.D. Anatomy and Surgery, by **J. D. WELLS**, M.D. Midwifery, by **JAMES McKEEN**, M.D.

Chemistry and Materia Medica, by **P. CLEAVELAND**, M.D.

The **ANATOMICAL CABINET** is extensive, and very valuable.

The **LIBRARY**, already one of the best Medical Libraries in the United States, continues to be every year enriched by New Works, both foreign and domestic.

Every person becoming a member of this Institution, is required to present satisfactory evidence that he possesses a good moral character.

The amount of fees for admission to all the Lectures is \$50. Graduating fee, including diploma, \$10. There is no matriculating fee. The Lectures continue three months.

Degrees are conferred at the close of the Lecture term in May, and at the following Commencement of the College in September. A systematic course of instruction, embracing Recitations in all the branches of Medical Science, Demonstrations, and Lectures, will be given by the Professors, during the interval between the annual courses of Lectures.

Boarding may be obtained in the Commons Hall at a very reasonable price.

Brunswick, Dec. 4, 1829.

MORBID ANATOMY.

CARTER & HENDEE have just received,—The Morbid Anatomy of the Stomach, Bowels and Liver; illustrated by a Series of Plates from Drawings after Nature, with explanatory letter press, and a Summary of the Symptoms of the Acute and Chronic Affections of the above-named Organs. By **JOHN ARMSTRONG**, M.D.

The above work will be completed in six numbers, at \$6,00 each. Three numbers are already published. Subscriptions received by **C. & H.**

Oct. 6.

2am3m

MEMOIR OF DR. HOLYOKE.

JUST published, and for sale by **CARTER & HENDEE**,—A Memoir of **EDWARD A. HOLYOKE**, M.D. LL.D., prepared in compliance with a vote of the Essex South District Medical Society.

A TREATISE on the Scrofulous Disease, by **C. G. HUFELAND**, Physician to the King of Prussia, &c., translated from the French of **M. Bousquet**, by **Charles D. Meigs**, M.D., is just received and for sale by **CARTER & HENDEE**.

Sept. 8.

Published weekly, by **JOHN COTTON**, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

I.

NEW INTESTINAL WORM.

At the sitting of the Academy of Sciences, of the 11th of October, M. G. Cuvier read a paper on the new kind of Intestina, or parasite worm. In introducing the subject, the celebrated naturalist observed that among the intestinal, or parasite worms, a certain number have, on the under side, or at the hinder extremity of the body, several organs in the form of air-holes, more or less like those which are observable on the arms of a polypus, or at the lower extremity of the body of a leech. From the number of these organs, some naturalists have derived the names given to the animals which possess them; but, taking these holes for mouths, they have composed such names of the number, and of the word *stoma*, calling them respectively distoma, hexastoma, polystoma. M. Cuvier himself having seven and twenty years ago discovered, in the Mediterranean, a species of this family having three holes, conformed to the custom already established, and called it "Tristoma." It is now, however, well ascertained, that these organs do not serve to suck up nouriture any more than the organs of the same form possessed by the polypus and leech; the animal only makes use of them to fix it-

self, and it is not difficult, with a little attention, to find the real mouth, which is single, and very different from the other apertures.

M. Cuvier allowed, therefore, that the terms *dystoma*, *tristoma*, &c., are, in fact, inappropriate; and said that nothing but the inconvenience which the study of natural history is subjected to by the change of names, reconciles him to adopt them in preference to those of hexacotyles, &c., proposed by M. Blainville, and which express with more exactness the particular organization which they are intended to signify. However that might be, the animal presented to the Academy, said M. Cuvier, belonged to the genus of which he had just spoken, but it was infinitely more polystomatic, or more polycotylous, than any which had been ever before described. It was, besides, he said, the giant of Polycotyles. The greater number of these animals are little; many are microscopic; the species of which he presented one was four, five or six inches long. It had more than a hundred apertures, and if, in giving it a name, the analogy of the species most approaching to it in character were to be observed, it ought to be called hecatostoma, or hecatoncotyle.

In addition to the singularity of its organization, is that of the situation which it chooses, or rather

which nature has assigned it, for its residence. It lives in the abdominal cavity, or even in the solid flesh of the polypus, of the only being which surpasses it in the number of holes with which it is furnished. The worm so existing as a parasite to the polypus, resembles in such a degree an arm of the polypus as to be completely deceptive. Of the two polypi to which the attention of the Paris Academy was called, one of them had the *hecatoncotyle* attached to one of its arms, which it almost devoured, and which it so effectually appeared to replace, that at the first glance it would be taken for that arm itself. M. Cuvier stated that naturalists owe the discovery of this worm to the minute observations of M. Laurillard, keeper of the cabinet of anatomy, in the Museum of Natural History, who, having been sent to Nice to make collections of fish of the Mediterranean, had applied himself at the same time to observe and collect the other productions of that sea, so rich in curiosities, and yet so little known. He found this kind of worm in the sort of polypus called, by Lamarke, *poulpe granuleux*, but had not been able to discover it in the common polypus, or any other of the family. Of the five individuals of the species of the *hecatoncotyle* which had fallen into the hands of M. Laurillard, three were found in the same polypus, the head sticking to some point of the inside, and the tail parts extending into the abdominal cavity. A fourth was found in another polypus, but in a position similar to that of the former three. The fifth, as it has been before observed, was attached to an arm

of the polypus, which it had converted into a sort of bag, into which it had thrust its head, the rest of the body remaining at liberty and without. M. Cuvier concluded that the *hecatoncotyle* was, properly speaking, only a semi-intestinal, or rather semi-exterior parasite. It is detached with ease from the animal on which it lives, and on that being done, it takes to swimming, if it be in water, whether salt or fresh: if otherwise, it climbs any solid substance, without appearing to suffer much by this change in its situation; it attaches itself firmly, by means of its suckers, to the fingers or any other body.

In giving the anatomical description of the animal, M. Cuvier represented its form to be lengthy and somewhat prismatic, the upper side being round, and the under side flat. Its usual length is four or five inches. It is broader and especially deeper towards the head than towards the other extremity: at the former the width is between four and five lines, and the depth six or seven. These dimensions gradually diminishing, are reduced at the tail to less than a line in width, and about two lines in depth. The holes are situated on the upper side, and amount to fifty-two pair. M. Cuvier, after entering into other anatomical details, added to his description of this extraordinary animal the expression of a hope, that now that the attention of naturalists had been called to it, the inquiries of persons whose local circumstances afforded the opportunity of making the necessary examinations, would lead to a perfect knowledge of its nature and history.—*Le Globe*.

II.

NEW ORGANIC ALKALIES DISCOVERED
IN CINCHONA BARK.

WE derive the following interesting article from the *Journal des Progrès*, Vol. III., for 1829. Dr. Serturmer, chemist of Hamelm, remarked, during the prevalence of an epidemic intermittent fever in 1828, that the quinia was far from being a certain specific against this disease, even when given in doses of six or eight grains, conjoined with acids. It stopped the paroxysm, but not in a permanent manner; for there were many relapses, which made it necessary to resort to the bark in substance, which, administered in large doses, in conjunction with acids, rendered the relapses much less frequent. Dr. Serturmer likewise ascertained, what has been observed by other practitioners, that quinia cannot be substituted for cinchona, as a tonic. He was therefore induced to undertake new analytical researches on the different kinds of cinchona bark, with the view of ascertaining the cause of this difference. The details of his experiments he reserves for future publication, communicating at present his principal results, which are as follows:—

The precipitates obtained by treating the acidulous extracts of cinchona bark by alkalies, comprise, besides quinia and cinchona, certain additional organic alkalies, which may be considered as modifications of the former.

These new organic alkalies, and especially the principal one, which Dr. S. calls *chinioidia* (*chinioidine*), are intimately united with a subacid resinous substance, which, if not hurtful, is at least not beneficial, and which is very

difficult to separate. Its separation can be effected completely, only by the vegeto-animal charcoal, which is obtained in the preparation of safranic acid, discovered by M. Liebig. After having dissolved in strong sulphuric acid (diluted with three or four times its weight of water) the impure alkaline substance, which remains after the sulphate of quinia has been separated by crystallization, the solution is to be decolorized by means of a mixture of the vegeto-animal charcoal above mentioned, with ordinary animal charcoal. But, before conducting this decoloration, it is best to treat the solution with alcohol, in order to separate the earthy salts.

The new alkali exists in the cinchona barks, associated with quinia and cinchona.

Properties of Chinioidia.—It resembles the other alkalies of the cinchona bark, in its insolubility in water, its color and taste. But it is distinguished from them by its activity, and its greater capacity of saturation. Its alkaline reaction, and its intimate combination with an extractive matter, which is probably an acid, are characters not less striking. Its salts, when freed from extractive, are affected by heat and liquids, after the manner of balsams; being viscid and fusible like the latter, although they contain frequently, to all appearance, their acids in a dry state. As a medicine, *chinioidia* is one of the most precious agents of the *materia medica*. It is not merely a better febrifuge than quinia, and even than the bark in substance, but it possesses many other therapeutic properties, which, admitting that they exist in the bark itself, are not to be found in quinia.

It was prescribed by Serturmer [in saline combination?] in the dose of two grains three times a day, with the direction to swallow a little vinegar after each dose, with the view of saturating the gastric juice, which is sometimes alkaline in fevers, and which, by acting on the salt, sets free the chinioidia, and thereby renders the medicine inert, in consequence of the insolubility of the new alkali when uncombined. In all the cases treated by the new remedy, the fever was cut short without relapse; and in every instance the concomitant symptoms, such as the paleness of face, loss of appetite, œdema of the legs, &c., disappeared in a shorter time than is usually the case. The medicine failed only in a single instance. The quantity necessary to effect a cure was generally from twelve to twenty-four grains.—*N. A. Med. & Sur. J.*

III.

OBSERVATIONS ON THE COAGULATION OF THE BLOOD.

By JOHN BOSTOCK, M.D.

SIR,—I have stated in my physiology, when treating of the crassamentum of the blood, that the coagulation of this substance may be prevented by strong agitation.* I was induced to make this statement, partly because it coincided with the opinion generally entertained, and partly because I conceived that I had not unfrequently myself witnessed the fact, although I had never made this point the direct object of experiment. During the course of the last winter, my attention was more particularly directed to it, in consequence of an attempt

which I made to ascertain the exact amount of fibrin in healthy blood, for the purpose of comparing it with the amount of fibrin in blood that exhibited the buffy coat. I shall not detail the various means that were employed, as they were none of them altogether satisfactory. But I was enabled to draw two conclusions from my experiments,—first, that the quantity of fibrin in healthy blood is much less than is generally supposed to be the case; and secondly, that its proportion is extremely variable in different specimens of what may be regarded as healthy blood.

My inquiries on this subject were still in progress when the last number of your Journal came into my hands, containing the observations of Dr. Davy, in which he notices the error that I had committed, and relates the results of various experiments that he had performed on the blood. From this paper, it appears that we had, to a certain extent, been pursuing the same train of investigation; and I have the pleasure to find that many of my results, of the correctness of which I was somewhat doubtful, were confirmed by his authority. With respect to the point in question, the effect of strong agitation on the blood, I believe that this process merely breaks down the coagulum, and divides the fibrin into fragments, which, from their minuteness, and the small proportion in which they exist, had previously escaped detection. Although I have found it extremely difficult to come to any precise result respecting the specific object which I had in view, yet I am strongly inclined to believe, that the proportion of fibrin is

* V. I. p. 436, 437.

greater than ordinary in blood which exhibits the buffy coat. There is, however, in this case, a circumstance to be guarded against, which may perhaps account for this apparent increase in quantity,—that in inflamed blood the serum seems, from some cause, either mechanical or chemical, to adhere more strongly to the fibrin; and as there is no method of separating the two substances, with which I am acquainted, except ablution, friction, compression, or some similar operation, we have no means of ascertaining with certainty when the separation is complete.

I have thought it desirable to transmit my observations to you, although in this very imperfect state, both because I am anxious to lose no time in correcting the error into which I had fallen, and because I wish still farther to direct the attention of chemists to the constitution of the blood, both in its healthy and in its morbid condition. It is a subject on which our information is very imperfect, so that many of the generally received opinions respecting it will probably be found to be incorrect, and have certainly been adopted upon insufficient grounds. I am, &c.

Ed. Med. and Surg. Journ.

IV.

CASE OF RUPTURE OF THE PULMONARY ARTERY.

By Mr. WILLIAM GUNN, Assistant Surgeon,
Royal Navy.

JOHN WHITE, seaman, aged 46, was put upon the sick list this morning, complaining of pain in the head, principally on the right side, extending down the neck

and arm to the hand, which was benumbed. He says he has been unwell for some time; that he has been restless at night, and not by any means so able for his duty as formerly. He has a slight cold, which commenced a few days ago; but he feels no pain in the chest, either on coughing or making a full inspiration. His bowels are rather inclined to constipation. He says that he feels little appetite for food; and some of his messmates have since informed me that, for some considerable time past, they have observed him eat very little, and that with no apparent relish. They have also been forcibly struck with the marked difference in his health and strength of late, yet he never made any particular complaint; and in answer to their inquiries regarding his health, he would state that "he felt unwell, yet could not say what was the matter with him." His pulse is weak, but quite regular; tongue dry, and a little furred; countenance sallow, and expressive of anxiety. There is also a particular vacancy observed about the eyes, which appear to have lost all their animation. A dose of salts was ordered to be taken immediately, and a diaphoretic at bed time. The right arm and hand to be well rubbed with volatile liniment.

In two days afterwards, the purgative and diaphoretic were again repeated, which relieved all the symptoms.

June 6th.—He appeared this morning at the visit, when he said that he felt much better, and wished to go to his duty. He was accordingly discharged from the sick list.

In the afternoon he was carried

into the sick birth in a state of insensibility : his body was covered with a clammy perspiration, and his extremities were cold. There was no pulse to be felt at the wrist or temple, and on applying the hand to the chest, the heart's action could not be perceived. Respiration was very hurried and irregular ; the mouth was widely open, and surrounded with foam : and the lips were livid. By degrees, the respiration became more hurried and faint, and he continued to gasp for a few minutes, when he expired.

I learned from those who had brought him into the sick birth, that he had been engaged in some duty, which required considerable exertion, on the bowsprit, and that, without complaining of feeling ill, he was heard to utter a groan, and seen to fall backwards, and if those who were near him had not taken hold of him, he must have fallen into the water ; they then carried him into the birth in the state mentioned. He had not spoken any before I had seen him, nor did he afterwards.

Dissection.—About ten hours after death, the body was examined by our excellent surgeon Mr. John Bell, my friend Mr. J. Wallace, and myself. As the cause of his death was supposed to exist in the chest, our attention was directed there, and on removing the sternum, the left side of the thorax was found to be completely filled with blood, more or less coagulated, and the lung was collapsed from the pressure of that fluid. On removing the clotted blood from the cavity of the thorax, we discovered a rupture in the pulmonary artery, about an inch and a half from its

origin in the right ventricle, large enough to admit the point of the little finger. A piece of the vessel, about two inches in length, was then detached from its connections. Upon slitting up the side of the vessel, opposite to that on which the rupture had taken place, we perceived that there was a circular spot of the artery, nearly the size of a shilling, much diseased, and that the rupture was situated exactly in the centre of this diseased portion. The muscular and internal coats of the vessel were completely destroyed, and nothing remained but the external tunic, which was thin, and of a brown dusky appearance, clearly showing that it was diseased in structure.

There was no line of elevation or distinction to be observed upon the internal surface of the vessel, to mark the exact spot where the destruction of the internal and middle coats had ceased to extend ; but, by holding this portion of the vessel up to a lighted candle, the disease was distinctly seen to be of the extent and appearance stated above.

The piece of ruptured vessel was of an angular form, having its base still attached, so that when laid down in its natural situation, it covered the opening as a valve.

As the cause of his death was so distinctly seen in the thorax, we considered it unnecessary to examine any of the other cavities.

Remarks.—Although there was destruction of the internal and middle coats of the artery, yet it does not appear that this was a case of aneurism, for there was no dilatation of the vessel, no sac

formed, nor any coagulated blood deposited.

This disease of the vessel must have existed for some time; and when we consider how thin and transparent the external coat was, it is surprising that the rupture did not take place sooner; yet this tunic possesses considerable strength, and, from the manner in which its fibres are mixed, it is rendered so firm that even after the destruction of the two inner coats, it remains a sufficient obstacle to prevent the blood from escaping, in the same manner as the peritoneal covering of the intestinal canal presents a powerful barrier to the escape of fecal matters, even when the mucous and muscular coats of the intestines are completely destroyed.

Though the external coat was found to be so thin at death, yet it is probable that this melancholy event would not have happened so soon, if the man had not been exposed to some violent exertion.

His sallow countenance and dejected appearance might, perhaps, on his first application, have led us to suppose that some organic disease existed; yet this emaciation did not appear to be more than might be expected to be met with in a man at his time of life, especially in a sailor, whose habits most likely were intemperate and irregular. The heart was found quite healthy; and this may account for the regularity of the pulse.—*Ib.*

V.

SCIRRHUS OF THE PYLORUS, AND ULCERATION OF THE STOMACH.

MR. WALDRON, of Bath, has related an interesting case of this

melancholy disease, in the last number of our Midland contemporary, which deserves notice on account of one or two curious circumstances connected with it.

The patient was a Mr. Anthony, æt. 50, commercial traveller of Bath, addicted to drinking spirits, who applied to Mr. Waldron on the 2d of December, 1828, with much debility, loss of appetite, uneasiness at the pit of the stomach, and frequent vomiting. The face was sunk and sallow, the pulse extremely weak, and the bowels very irregular. Till within the preceding eight months, he had enjoyed an uninterrupted state of good health. No fulness nor tenderness was detected on examining the abdomen, and some purgative medicines were prescribed. These, however, failing to effect any benefit, Mr. Waldron inquired further, and discovered that the sickness generally occurred from an hour and a half to three hours after eating, and that the matters brought up were dark colored, grumous, and more than commonly offensive: the evacuations were imperfect and scanty, and for some length of time a copious and sound stool had not been voided. Calomel and hemlock, leeches, and saline aperients, were now prescribed, but without any benefit; and on the 8th of January, being informed that some difficulty was experienced in administering the enema, Mr. Waldron examined the rectum himself, and by means of the stomach pump, found that some obstruction did exist, though a quantity of hardened feces was brought away. Shortly after this, a small bougie was introduced with some difficulty, when the patient expressed himself *greatly*

relieved, and the sickness of the stomach quite subsided. The bougie was gradually augmented in size, and a pill of three grains of calomel, with eight of the pil. rhei. comp., prescribed with surprising, though transient good effect. The patient began to sink, became furiously insane, and died on the 10th of February,—the sickness never having returned since the use of the bougie.

Sectio Cadaveris, forty-eight hours after death.—“I examined the body in the presence of Mr. G. Goldstone, Surgeon, of this city. Considerable emaciation had taken place in the muscles of the extremities. On cutting through the parietes of the abdomen, an unusual depth of adipose matter was found. In the abdomen, the vessels of the small intestines appeared dark, and congested with blood. I passed a ligature in two points above the cardiac extremity of the stomach, and having divided the part between the ligatures, was proceeding to trace the stomach downwards to its pyloric extremity, when it broke, and extravasated its contents into the abdomen. I next separated the small and large intestines, following them downwards throughout their whole course. Upon laying open the stomach, the cardiac extremity appeared enlarged and thickened, and the pyloric was a complete mass of disease: at that part where a conoidal opening is formed by the termination of the stomach projecting into the duodenum, an enlargement of the size of a large duck egg was found; the stomach above this enlargement was ulcerated and thickened, and appeared as a pulpy mass; at the

enlargement, the calibre of the part appeared to be nearly obliterated, and below it, the duodenum was ulcerated and thickened for several inches, and exhibited the same appearance of pulpiness, and was so fragile as to break on the slightest force being used. On cutting through the enlargement at the pyloric extremity of the stomach, the centre exhibited a scirrhus hardness; in one part there was a dark discoloration, similar to what is seen in scirrhus enlargement of the breast, prior to its passing into the ulcerative stage; on cutting into it, a dark-colored sanies escaped, which was imbedded in a tubercular cyst. The rest of the viscera of the abdomen exhibited no morbid appearance, excepting the colon and rectum, which were in several places so much contracted, as to reduce the calibre of the intestinal tube to the size of the smallest rectum bougie. In the sigmoid flexure of the colon, these contractions were very apparent, and the feces were with considerable difficulty made to pass these points, by pressing the finger and thumb above, and propelling the feces forward.

“When the colon and rectum were laid open, beginning above the left iliac region, the intestine appeared, in many parts, thickened and contracted; in other respects no morbid appearance was observed. In the head, the vessels of the brain appeared dark and congested with blood; the tunica arachnoides was very much thickened, and had become dense and obscure; in different parts, especially on one side, deposits of coagulable lymph were observed; a larger quantity of fluid than what is common, was found in the

ventricles ; in other respects, the brain exhibited no morbid appearances."

As Mr. Waldron justly observes, the marked relief from the passage of the bougie, and cessation of the sickness, are remarkable, and prove the intimate though mysterious consent and sympathy between the different portions of the alimentary canal.

The absence of pain on pressure, though uncommon, is occasionally met with, and no necessity exists for admitting the hypothesis advanced to account for the circumstance by the author,—viz., the quantity of fat in the abdominal parietes. We have seen the same absence of pain on pressure, where no such condition obtained. —*Med. Chir. Review.*

SKETCHES OF PERIODICAL LITERATURE.

CHLORIDES OF LIME AND SODA.

WE took occasion, not long since, to introduce these articles to the notice of our readers, as very powerful and useful agents in purifying the vitiated air of apartments and other places, which, by the presence of animal decomposition, had been rendered offensive or dangerous. A more ample description of their uses than we have seen, is contained in the Philadelphia Journal of Pharmacy. It is preceded by directions for the preparation of both articles, which, as they do not admit of abridgement, we give unaltered.

"The Chloride of Lime is prepared on a large scale, by introducing chlorine gas into a chamber, constructed in a suitable manner, and furnished with wooden shelves, upon which thin strata of recently slaked lime are exposed. This chamber is provided with two opposite windows, by means of which the operator can ascertain whether the vapors of chlorine are absorbed by the hydrate of lime. A door is contrived in one of the sides, in order to remove the chloride when prepared. Opposite to this door is an opening, through which the chlorine is introduced into

the chamber. The roof is provided with a hydraulic valve, to open a passage to the gas, in case of too great a dilatation.

"Another process was employed in 1816, at Jouy, which consisted in introducing some hydrated lime into a cylinder, furnished with rays of narrow and thin pieces of wood, and revolving upon a hollow axis, through which the chlorine passes. By the rotating motion given to the cylinder, the combination of the gas with the hydrate of lime is greatly facilitated. When the saturation is accomplished, the chloride is removed, and preserved in well closed bottles.

"Labarraque's process consists in filling up large stone pots of an elongated form, with a mixture of twenty parts of slaked lime, and one part of muriate of soda, and introducing, gradually, chlorine gas into them. The operation is continued until the lime is sufficiently impregnated with chlorine ; and this point may easily be ascertained by the appearance of the mixture becoming moist. This circumstance is a sure indication that the operation is drawing near its end.

"This compound may also be obtained by introducing slaked lime into a leaden cylinder, furnished with two bungs, one of which is provided with a tube intended for con-

veying the pure and washed chlorine into the cylinder, and the other with a second tube, bent at a right angle, with its inferior part plunged into a vessel containing milk of lime. The latter tube is intended to open a passage to such portions of chlorine as would have escaped combination, and would otherwise be lost, and annoy the operator.

“Solution of Chloride of Lime is prepared in the following manner:—Rub in a mortar a quantity of chloride of lime; add to it a small quantity of water, which increase gradually, so as to form a liquid mixture; let the liquor rest; decant, and pour more water on the residuum; unite these solutions of different degrees of concentration, and bottle them up securely.

“These solutions, as may be perceived, contain very different proportions of chloride. When this liquor is intended for disinfecting, it may be saturated. The quantity of dry chloride contained in Chevalier’s formula affords thirty-two hundredths of chlorine gas, acting as a disinfecting agent by decomposing the miasmata evolved from the disorganization of animal and vegetable matters.

“The liquid Chloride of Soda may be obtained easily, cheaply, and of an uniform strength, by decomposing the chloride of lime by the subcarbonate of soda, as has been proposed by Mr. Payen.

“*Payen’s Process.*—This method, extremely simple, has been employed in the preparation of a liquid chloride, which has obtained, in therapeutic exhibitions, all the good results it was expected to afford. It consists in mixing one part of dry chloride of lime with twelve parts of water, letting the liquor settle during three hours in close vessels, filtering, and washing the dregs in two parts more of water. On the other hand, dissolve, with a gentle heat, two parts of crystals of subcarbonate of soda in four parts of water, and let

the solution cool. Then mix the two solutions together, taking care to stir the mixture well. A copious precipitate of carbonate of lime takes place, and the liquor, after settling, is decanted or filtered, and bottled up securely. This liquor is the pure chloride of soda. The precipitate may be washed with water, if desired, and a weaker solution obtained, which may be employed to dissolve a new quantity of chloride of lime for a second operation.”

The uses of the chlorides are by no means confined to the mere disinfection of unhealthy apartments. In the arts they are employed for bleaching feculas, threads, linen, paper, and even for the restoration of books soiled by smoke or stains. The solution employed for this purpose contains one part of the chloride to twenty of water, in which the body is immersed until it has acquired the requisite degree of whiteness; after which it is washed with repeated portions of fresh water, in order to remove any of the chloride which might still adhere to it.

The germination of seeds is said to be rendered more active by soaking them, before sowing, in a mixture of one part of the chloride to nineteen of water. Feeble vegetables have their power of vegetating increased by watering them with a solution containing one sixty-fourth of the chloride.

The chlorides are found to aid in the preservation of alimentary substances. Eggs are preserved by being put into a solution of one part of chloride of lime to thirty-two parts of water, their relative position being occasionally changed. Vegetables

and meat, which have acquired a disagreeable smell and taste, are immersed several times in water containing from a fortieth to a sixtieth of chloride of soda, and then washed in pure water. By this process, their offensive qualities are wholly removed.

These compounds are capable of disinfecting all kinds of wearing apparel and goods infected with pestilence. By applying the solutions to their persons and clothes, physicians and others have been enabled safely to visit hospitals, touch the sick, dissect the dead, and "even to dress themselves, with impunity, with the shirts and wearing apparel of people who have died with the plague. In this last instance, they had previously immersed these clothes for sixteen hours in a solution of chloride of soda, and kept them on for eighteen hours, laying all the time in their beds. Although the clothes had been impregnated with perspiration, blood, and pestilential matter, and were still stained with them, not a single one of these physicians had been in the least affected with disease twenty-two days after this daring experiment was performed."

The employment of these singular agents in the practice of medicine has already been made known to the profession. We lately noticed a case of cancerous ulceration in which this practice had been adopted with success; and they have been also used in cutaneous affections, as in scabies, and some varieties of porrigo. In these cases, the solution is first made with about a fortieth part

of the chloride, and gradually increased in strength as the sensibility of the parts diminished. The lotions are repeated from four to six times a day.

NEW OPERATION FOR ANEURISM.

WE learn, from late journals, that the operation of tying the artery beyond the aneurismal tumor has been again performed in the Island of Mauritius, by Mr. Montgomery, R. N., in charge of the Civil Government Hospital at that place. As the case is in many respects remarkable, we shall lay before our readers its most interesting details.

The patient was a free black, forty years of age. The tumor was situated on the left side of the neck, immediately above the sternal extremity of the clavicle, of the size of a pullet's egg, and appearing to extend downwards behind that bone. In this situation, it was evidently impossible to tie the common carotid below the aneurism. There was severe dyspnœa, with cough, and frothy expectoration.

This was the state of things on the 20th of February, when the patient applied. He was put under medical treatment till the 9th of March following, when the tumor had increased to a most alarming size, its base occupying two thirds of the clavicle, and extending nearly four inches upwards toward the angle of the jaw. Under these circumstances, it was determined to perform the operation which afforded the only chance of relief. An incision was accordingly made through the fibres of the platysma

myoid muscle, and the dissection continued on the inner side of the sterno mastoid muscle, so as to expose the sheath of the artery close to its bifurcation. This was then slit open, the vessel separated from the vein and nerve by which it was accompanied, and enclosed in a ligature. Several embarrassments occurred during the operation, and the space through which the vessel could be exposed was very small, on account of the situation of the veins. None of the veins, however, were divided, and the whole hemorrhage did not exceed a teaspoonful.

The patient was considerably relieved by the operation, in regard to many of the symptoms. The cough and dyspnoea diminished, and his situation was rendered generally more comfortable. The pulsation in the tumor diminished, and at times was wholly absent. Its size, however, gradually increased; and its

parietes evidently grew more thin, threatening an approaching rupture. In the mean time, an abscess formed in the course of the cicatrix, which broke, and the wound entirely healed. At length, on the 28th of May, nearly three months from the time of the operation, the tumor burst, and discharged about eight ounces of fetid chocolate-colored fluid. As no hemorrhage followed this, and the natural opening seemed insufficient for the escape of this matter, it was enlarged with a lancet, and gave exit to six ounces more of similar fluid. On examining the cavity, the artery was found without pulsation below the place of the ligature. The wound was dressed with lint, and assumed a healthy appearance. At the time of the report, June 8th, it seemed on the eve of healing. The patient was recovering his general health, and seemed likely to do well.

BOSTON, TUESDAY, JANUARY 19, 1830.

ANNUAL REPORT OF THE BOSTON EYE AND EAR INFIRMARY.

By the fifth report of the Surgeons to this charity, it appears that its benefits have been more extensively sought than in previous years, and that it is regarded not as an experiment, but as an established Institution, the advantages of which are generally acknowledged, and need not enumeration or evidence. The number and success of the cases treated are thus set forth in the report:—

“Since the last annual meeting,

six hundred and ninety-nine patients have applied at the Infirmary. Of this number, 594 with diseases of the Eyes, and 105 with diseases of the Ears. Of this number, 439 diseases of the Eyes have been cured,—28 relieved,—20 not treated,—16 were incurable,—and 41 cases are still under treatment. A great proportion of the cases not treated were cataracts. Some were not sufficiently advanced for the operation; and some were not able to defray the necessary expense of board, and left the Infirmary without treatment.”

“Of the diseases of the Ear, 48 cases have been cured,—22 relieved,—25 were incurable, and not treat-

ed,—and 10 remain under treatment.”

Respecting the diseases of the eye, the Surgeons add :—

“Almost every case which is marked incurable, had been rendered so, long since, by mal-treatment or neglect, and no treatment afforded any chance of relief. It is a melancholy truth, that all of them were originally cases such as daily appear at the Infirmary, and receive certain and speedy relief.”

To the opinion contained in this paragraph we cannot yield an assent, without further proof than is yet before the public; and we regret that the officers of so useful and important a charity should think it necessary to express such a sentiment. That the extensive experience in ophthalmic disease acquired at such an institution is the parent of skill, and the means of relieving much suffering, cannot be doubted; but we do not believe that the well-educated members of the profession, in this country, are so grossly ignorant of a branch of practice which every one of them has considered as much within the sphere of his professional duty as that of midwifery,—we cannot believe them so ignorant of the diseases of the eye, as to justify the assertion that “almost every case which is marked incurable, had been rendered so, long since, by mal-treatment or neglect.” It is possible the reporters do not intend to say that the mal-treatment was by any regular practitioner;—we hope this may be the case; but if so, the sentence should not have been without qualification: for it is no light affair to drop into the families of our citi-

zens an official intimation that such a measure of incurable disease, in an organ the healthy functions of which are so important to our comfort and happiness, has been caused by the gross ignorance of the faculty in a branch of practice in which they are, in truth, very generally well versed, and practically skilful.

The Diseases treated at the Infirmary the past year have been as follows :—

Diseases of the Eye.

Acute Ophthalmia	83
Chronic Ophthalmia	38
Pustular Ophthalmia	22
Erysipelatous Ophthalmia	4
Purulent Ophthalmia	5
Puriform Ophthalmia	2
Rheumatic Ophthalmia	1
Ophthalmia with Ulcers of Cornea	36
Vascular Cornea and Granular Lids	13
Opacity of Cornea	10
Ptyrigium	1
Ectropeon	5
Entropeon	1
Nyctalopia	1
Ecchymosis Conjunctivæ	7
Staphyloma	4
Iritis	5
Cataract Adults	20
Cataract Infants	4
Amaurosis	10
Fungous Conjunctiva	1
Closure of Pupil	4
Ptosis	1
Tinea Ciliaris	83
Lippitudo	102
Tumors of Lid	10
Hordeolum	8
Abscess of Lid	2
Hypopion	2
Diseases of Lachrymal Passage	29
Wounds and other Injuries of Eyes	19
Weakness of Sight	9
Morbid Sensibility of Retina	33
Choroiditis	1
Inflammation of Cornea	1
Warts of Eyelid	2

Tumors of Conjunctiva	4	discovery may be eminently useful
Myopia	1	to the whole world, has not hesitated
Postular Lid	5	a moment to divulge it, and has au-
Strabismus	4	thorized me to publish in this Jour-
Deficiency of Pigmentum Nig	1	nal the experiments he has made in
	—	my presence, and which I have re-
	594	peated with the same success. Dr.

Diseases of the Ear.

Otorrhœa	22	Dr. Mitchell forms his preparation by
Obstructio Conchæ	17	soaking the caoutchouc in ether un-
Abscess of Concha	15	til soft. In that state it may be cut
Nervous Deafness	25	into plates or sheets, with a wetted
Polypus of Concha	1	knife, without difficulty, or the sheets
Otitis	20	may be stretched to a great extent.
Herpetic Eruption Concha	3	If caoutchouc <i>bags</i> , so softened, be
Obstruction of Eustachian Tube	1	inflated through a stopcock by the
Abscess of Mastoid Cells	1	breath, they are often expanded to
	—	a great size. One, now in Peale's
	105	museum, which weighs only seven
		ounces, measures six feet and some
		inches in circumference. The in-
		flated caoutchouc does not, when li-
		berated from pressure, contract much.

CAOUTCHOUC.

DR. J. K. MITCHELL, Professor of Chemistry in the Philadelphia Medical Institute, has discovered a mode of making sheet-caoutchouc, possessed of very remarkable qualities. It is eminently soft and pleasant to the touch, possesses very great extensibility, without the exertion of much force, and may be made so thin as to appear colorless and transparent, yet retaining considerable strength and tenacity. When a sheet is folded and cut, or when two pieces are laid together and cut with scissors, the cut edges adhere with considerable force, and indeed, after some hours maceration, adhere as strongly as the rest of the sheet. In that way, tubes, bags, socks, caps, luting joints &c. water and air tight, may be made. Its impenetrability and softness render it applicable to the treatment of many local diseases, especially chronic rheumatism.

Its properties and uses are so very similar to those of the sheet-caoutchouc made by Mr. Hancock, of London, that the identity of them is highly probable. Mr. Hancock conceals his process; but Dr. Mitchell, more liberal, and confident that his

Dr. Mitchell has also discovered a very good solvent for caoutchouc. It is the essential oil of sassafras, acting on the article after it has been softened by ether. This solution will, when dry, and it dries in a day or two, present a thin pellicle of pure caoutchouc, which can, by wetting it with water, be separated in a sheet from glass and porcelain. Applied to the surfaces of torn or cut caoutchouc, it causes their firm and inseparable adhesion. Silk treated with it remains *apparently* unchanged, but becomes water tight.

Note.—When very thin caoutchouc, prepared as above, is applied over the mouth of a glass jar, it adheres without the existence of any ligature, and permits, through its transparency, the inspection of the contents of the jar. As it is attacked by no insects, and cannot be gnawed by vermin, its protecting influence greatly exceeds that of anything but glass itself. It has also the convenient quality of durability, the same pieces being susceptible of repeated applications, because very few chemical agents act on them.—*Phil. Journ. of Pharm.*

Artificial Preparation of Ice.—

After numerous trials made by M. B. Meylink with different salts, for the purpose of converting water contained in a tin vessel into ice during their solution, he ultimately gave the preference to a mixture of four ounces nitrate of ammonia, four ounces subcarbonate of soda, and four ounces of water. This mixture in three hours produced ten ounces of ice; whilst with the mixture of sulphate of soda and muriatic acid, he obtained ice only after seven hours.—*Phil. Journ. of Pharmacy.*

Pharmacopœia.—

A medical convention is to be held at New York, on the first Wednesday of June, to alter and enlarge the Pharmacopœia, so as to conform to the improved state of science and practice.

A new Remedy for Intemperance.

—The Glasgow police have lately adopted the plan of shaving the heads of toppers, when found in a senseless state. Nothing could exceed the astonishment and horror of a man who was operated upon on Saturday night, when he put his hand on his head in the morning, and found it shorn. Let it be established by law, that every drunkard taken up by the watch shall have his head shaved, and we should at once see a great run of business to wig makers, or a very great diminution of those disgusting spectacles, with which our streets are now defiled.—*People's Friend & Gaz.*

Physicians in Jerusalem.—

In the laws of Jerusalem, according to Godfrey, of Bouillon, it is provided that "if any physician should fail to cure a slave, he shall be condemned to pay for the said slave, or to substitute another in his place: if a Christian die under his hands, his goods shall be confiscated, and he shall be hanged, having been first whipped, and conducted to the gallows with a urinal in his hand as a warning to others.—*N. Y. Med. Inquirer.*

Tic Douloureux.—

The nitrate of silver has been recommended in this disease, by Mr. Abernethy and others, in the dose of one grain twice a day.

Bituminous Coal.—

We understand a mine of this coal has been discovered in Clearfield Co., Penn., within twenty-five miles of canal navigation. It burns equally well with the best Liverpool coal. The great resources of our country, in different species of coal, are gradually being developed, and must eventually be a source of considerable revenue.

Boylston Prize.—

The Prize offered by the Boylston Medical Society of Harvard University, for the best Dissertation "*De Paruna,*" has been awarded to Mr. AUGUSTUS A. GOULD, of this city.

WEEKLY REPORT OF DEATHS IN BOSTON, ENDING JANUARY 9.

Date.	Sex.	Age.	Disease.	Date.	Sex.	Age.	Disease.
Dec. 28.	F.	82 yrs	old age	M.	5 yrs		dropsy in the head
Jan. 2.	M.	2 mo	inflammation in the lungs	F.	66		consumption
	M.	43 yrs	do. do.	M.	7 h		unknown
	F.	2	do. of the bowels	F.	38 yrs		consumption
	M.	8	enlargement of the heart	F.	36		do.
	F.	7	consumption	6.	M.	45	lung fever
3.	M.	44	do.	M.	32		consumption
	M.	10 mo	chickenpox	7.	F.	11 mo	dropsy in the head
	M.	34 yrs	unknown	8.	F.	24 yrs	consumption
	M.	70	gravel	F.	3		do.
4.	F.	39	unknown	9.	F.	23	liver complaint

Males, 11,—Females, 11. Total, 22.

ADVERTISEMENTS.

NEW MEDICAL BOOKS.

JUST published, and for sale, by **CARTER & HENDEE**,—Malaria; an Essay on the Production and Propagation of this Poison. By **JOHN McCULLOCH**, M.D. F.R.S., &c. &c.

An Essay on the Diseases of the Internal Ear. By **I. A. SAISSY**, M.D. Translated from the French, by **NATHAN R. SMITH**, M.D., Professor of Surgery in the University of Maryland; with a Supplement on Diseases of the External Ear, by the Translator.

Observations on the Utility and Administration of Purgative Medicines, in several Diseases. By **JAMES HAMILTON**, M.D., Fellow of the Royal College of Physicians, &c. &c. From the Fifth Edinburgh Edition.

A Treatise on Pathological Anatomy. By **WILLIAM E. HORNER**, M.D., Adjunct Professor of Anatomy in the University of Pennsylvania, Surgeon at the Infirmary of the Philadelphia Almshouse, Member of the American Philosophical Society, &c.

Elements of Operative Surgery. Translated from the French of **A. TAVERNIER**, Doctor of Medicine of the Faculty of Paris, &c., with copious Notes and Additions. By **S. D. GROSS**, M.D.

A Treatise on the Nature, Cause and Treatment of Contagious Typhus. From the German of **J. VAL DE HILDENBRAND**, Imperial and Royal Counsellor, Professor of the Practice of Medicine in the University of Vienna, &c. &c. By **S. D. GROSS**, M.D.

An Essay on the Morbid Sensibility of the Stomach and Bowels. By **JAMES JOHNSON**, M.D.

Examinations in Anatomy, Physiology, Practice of Physic, Surgery, Chemistry, Materia Medica, and Pharmacy. For the Use of Students. By **ROBERT HOOPER**, M.D. Dec. 22.

MEDICAL SCHOOL OF MAINE.

THE MEDICAL LECTURES at **BOWDOIN COLLEGE** will commence on **TUESDAY**, February 23, 1830. Theory and Practice of Physic, by **JOHN DELAMATTER**, M.D. Anatomy and Surgery, by **J. D. WELLS**, M.D.

Midwifery, by **JAMES McKEEN**, M.D.

Chemistry and Materia Medica, by **P. CLEAVELAND**, M.D.

The **ANATOMICAL CABINET** is extensive, and very valuable.

The **LIBRARY**, already one of the best Medical Libraries in the United States, continues to be every year enriched by New Works, both foreign and domestic.

Every person becoming a member of this Institution, is required to present satisfactory evidence that he possesses a good moral character.

The amount of fees for admission to all the Lectures is \$50. Graduating fee, including diploma, \$10. There is no matriculating fee. The Lectures continue three months.

Degrees are conferred at the close of the Lecture term in May, and at the following Commencement of the College in September. A systematic course of instruction, embracing Recitations in all the branches of Medical Science, Demonstrations, and Lectures, will be given by the Professors, during the interval between the annual courses of Lectures.

Boarding may be obtained in the Commons Hall at a very reasonable price.

Brunswick, Dec. 4, 1829.

MORBID ANATOMY.

CARTER & HENDEE have just received,—The Morbid Anatomy of the Stomach, Bowels and Liver; illustrated by a Series of Plates from Drawings after Nature, with explanatory letter press, and a Summary of the Symptoms of the Acute and Chronic Affections of the above-named Organs. By **JOHN ARMSTRONG**, M.D.

The above work will be completed in six numbers, at \$6,00 each. Three numbers are already published. Subscriptions received by **C. & H.**

Oct. 6.

2am3m

MEMOIR OF DR. HOLYOKE.

JUST published, and for sale by **CARTER & HENDEE**,—A Memoir of **EDWARD A. HOLYOKE**, M.D. LL.D., prepared in compliance with a vote of the **Essex South District Medical Society**.

ATREATISE on the Scrofulous Disease, by **C. G. HUFELAND**, Physician to the King of Prussia, &c., translated from the French of **M. Bousquet**, by **Charles D. Meigs**, M.D., is just received and for sale by **CARTER & HENDEE**.

Sept. 8.

Published weekly, by **JOHN COTTON**, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

I.

Communicated for the Boston Medical and Surgical Journal.

SOME REMARKS ON WEANING.

By J. P. SPOONER, M.D.

THE circumstances to be regarded in weaning a child are, the age, number of teeth, season of year, and state of health.

1. The child should be at least one year of age at the time of weaning, and if it can be continued at the breast until fifteen months old, it is generally better that it should be. Children under this age are better able to resist disease who are continued at the breast, than those who are weaned at an earlier age. The mother's milk gives to the child a vigor of constitution which is quite remarkable, when contrasted with the condition of those children who have been brought up by hand. Every one who has seen anything of children, knows how subject the latter are to diseases of all kinds, more particularly of the bowels, especially during the summer months. Occasionally we meet with a child who seems to be an exception to the above remark; one who is plump and thriving, although it may never have been nourished by its natural food. But it has been remarked even of these children, that when attacked with

acute disease, they possess less of the power of recovery than those brought up at the breast; such children may pass through the active periods of disease as well as other children, but their recovery is more tedious. Children who are weaned at one year generally do well, other things being favorable; still it is better, when practicable, that the child should be continued at the breast until he is fifteen months old. It is objected to long-continued nursing, that it is a great trial to the mother's constitution, and may prove a permanent injury to the health. This undoubtedly may be true in some cases. There are circumstances relating to the mother which may render it expedient to wean her child long before it has completed its first year. But a majority of mothers, by prudent management, may continue to nurse their children until they are fifteen months old, and some even until they are eighteen months, both with safety to the former, and benefit to the latter. But to do this requires prudent management. The child, after it begins to have teeth, should not depend upon the mother alone for sustenance; neither should the mother allow her child, at any age, to hang upon the breast through the whole night;—a custom, I apprehend, too common, and which cannot be too

strongly deprecated, as often leading to disastrous consequences. Breast milk, if only taken two or three times in a day, preserves the tone of the stomach and bowels, and enables even a very young child to take other food with impunity; and this is all that is required, when it is recommended for children to nurse after they have completed their first year.

2. A circumstance of more importance than the age, is the number of teeth. The greater the number of teeth at the time of weaning, the greater is the security. The child should have at least four teeth; and if it has cut all the incisors, it will be still better. There are few children who do not have four teeth by the time they have completed the first year. Many cut all the incisors by this age. Hence one year is safely adopted by most parents as the proper age for nursing their children. Still this circumstance of age ought not solely to be relied on. A child of ten months, who has cut all his incisors, is better prepared for weaning than one of a year old, who has only four teeth, although the latter can generally be nursed with safety. The reason for this must be obvious. The child who is well supplied with teeth, is not only prepared to act upon solid food, but the appearance of the teeth is an indication that the digestive organs have arrived at that degree of maturity when they are prepared to receive other food than the mother's. Another consideration should also be borne in mind. Those children pass through the trying period of dentition with the greatest ease, who have been nourished at the

breast. Now if they can be continued at the breast until they have cut a considerable number of teeth, they not only will have cut these teeth with greater ease, but the constitution, more particularly the digestive apparatus, will have become fortified, and the child be better prepared to cut the remaining teeth. The number of teeth is in general in proportion to the age of the child: hence the latter, other circumstances being favorable, is, in a majority of cases, a safe criterion for determining the time of weaning; but as the number of teeth indicates the degree of maturity to which the digestive organs have arrived, it is this circumstance more than the number of months the child may have lived, which is to be particularly regarded.

3. In connection with the age of the child and the number of teeth, the season of the year is to be considered. Cold weather is always preferable to warm for weaning. A child who is a year old, in January, if it has a sufficient number of teeth, can be weaned with greater safety than the same child could in the following July, when he would be eighteen months of age. An objection to weaning during the cold weather, is the length of the nights. This is, however, at most, an inconvenience; and when compared with the danger of weaning during the summer months, is not entitled to consideration. Under this head, no better rules can be laid down than those adopted by Dr. Jackson, of this city, which I here give.—“The safest period of the year for weaning, is from the middle of October to the middle

of March, provided they be not weaned under ten months after December, under eleven after January, nor under twelve after February. Children who are weaned at the age of twelve months, in March, are ordinarily safe; those who are weaned at this age, in April, are less so,—one half of them perhaps suffering severely in the subsequent summer or autumn. In May, the danger increases; and in the four subsequent months, if a child of any age be weaned, it will in most cases be sick before the middle of the October ensuing. The disease does not immediately follow the weaning; though in many cases the diarrhœa of teething children ensues at once. But the instances in which children who are weaned between May and October escape cholera infantum, are extremely rare indeed.* These rules, it should be observed, apply more particularly to the city. I am informed that in the country children are often weaned as late as the month of June, this month being preferred as safe and convenient on account of the shortness of the nights. How far this custom is correct, I am unable to say.

4. The fourth circumstance to be regarded, is the health of the child. No child should be weaned whilst laboring under acute disease. It must be obvious, after all that has been said, that a measure which at all times requires caution in its adoption, must be particularly objectionable at a time when the system is struggling against other difficulties. It should be remembered, also, that the child must be chief-

ly dependent upon the breast for the recovery of its strength, after having passed through the acute stages of the disease. During sickness, it is well to encourage a child to take aqueous or thin farinaceous drinks, allowing it to nurse only occasionally. Should it, however, refuse to nurse, care must be taken to retain the milk, by having the breasts frequently drawn; and the child should be restored as soon as there is a return of appetite, and be allowed no other food. It sometimes happens, in very young children, that the breast milk is the only food it will take; when this is the case, the food of the mother should be of the mildest kind. There are cases in which the mother's milk disagrees, and may be the cause of producing or maintaining a disordered state of the bowels; and this leads to the consideration of the causes which may render premature weaning expedient.

By *premature weaning*, is meant weaning at a time when it would be thought injudicious, in consideration of any of the circumstances above noticed. The universal rule, in deciding this point, is the following:—If it is evident that the milk disagrees with the child, or if there are good grounds for apprehending that continued nursing will be productive of permanent injury to the constitution of the mother, in either of these cases, there can be no question as to the expediency of weaning. This rule may be adopted as of universal application, admitting of no exception. The evidences of the milk disagreeing with the child are, a disordered state of the alimentary canal, wasting of the body, fretfulness, &c. But as this condition of the bowels

* N. E. Journal, Vol. I. No. 1.

may arise from other causes, whenever there is any suspicion of the milk, the point should be determined by a change of the nurse, or food ; care being taken, in the mean time, to retain the mother's milk until the question is satisfactorily decided.

As regards the mother, an indisposition which is likely to be temporary, or even an attack of acute disease, is not always a sufficient cause for weaning. In these latter cases, great fears are often apprehended that the child will take the disease from the mother. These fears are, for the most part, unfounded, as women have been known to nurse their children, with impunity, whilst laboring under the most malignant forms of fever.* In our common autumnal fevers, I have had repeated opportunities of verifying this remark. I have had patients suffering from this disease, who have for a long time continued to nurse their children; and when it has become necessary to wean, it has either been on account of the failure of the milk, or on account of the fatigue and exhaustion which nursing occasioned the mother, and not on account of any injury sustained by the child. It is often a question of some delicacy, to decide between the danger of recovery to the child, on the one hand, and the dangers of fatigue and exhaustion from continued nursing to the mother, on the other. No general rules can be laid down for determining this point, but each case must be decided by an attentive observation of the circumstances belonging to it ; remembering that the decision

should be in favor of the mother, who should be allowed to incur no hazards for what, in severe cases, is generally the doubtful chance of being able to retain the milk.

Another question akin to the one just considered, relates to the propriety of a woman continuing to nurse after she knows herself to be pregnant. The popular opinion is that she should not. And yet it is certain that some women do continue to give suck, long after they know themselves to be in that condition, without injury to themselves or their children. This question, I apprehend, is to be decided by a reference to the circumstances above detailed, and the rule which has been laid down for premature weaning. Should these circumstances be favorable, the existence of pregnancy would certainly be an additional reason for weaning. Should they be unfavorable, and should the milk agree with the child, and the mother derive no serious inconveniences from continued nursing, then there would appear to be no reason why the child should not be continued at the breast until more favorable circumstances for weaning occurred.

In the remarks which have been made, I have proceeded upon the supposition, that when it becomes necessary to deprive a child of its mother's milk, the only alternative is weaning. This is indeed often the case : for it not unfrequently happens that it is impossible to obtain a nurse with whom a cautious mother is willing to trust her child. It becomes, then, a question of no small importance, what substitute can be found for the human milk.

* Dewees.

The milk of various animals has been recommended, and are the articles which are generally used for this purpose. An examination of the constituents of the different kinds of milk may aid us in deciding this question.

Woman's milk contains but little curd, which is with difficulty separated: it yields a large quantity of cream, and is very sweet. When deprived of its cream, it is very thin, and has more the appearance of whey than of creamed milk. The curd is said to increase in proportion to the time from delivery.

"Cow's milk differs from woman's in being more consistent, and in containing a much larger quantity of curd, which is seemingly gelatinous; it has less cream and less sugar."

Ass's milk very strongly resembles woman's. It differs from the cow's, and consequently from woman's, in having less cream, which is very insipid; it contains more curd and less cream than the cow's.

Goat's milk resembles the cow's, but is more consistent, and contains a larger quantity of curd. Ewe's milk resembles almost precisely that of the cow.

Mare's milk is thinner than the cow's, but less so than woman's. Curd less abundant than in the cow. (See Thompson's *Chemistry* by Cooper, and Nicholson's *Fourcroy*, article Milk.)

From the above comparisons of the constituents of different milks, it will appear that the differences of consistency depend upon the different quantities of curd which they contain. There can be no doubt that the different milks are more or less digestible as they contain a less or greater

quantity of this constituent. We are thus able to account for the fact, that cow's milk so seldom agrees with children. The number of infants who can bear this article for constant food, however much it may be diluted, is exceedingly small. It has too much of the nature of solid food, owing to the large quantity of curd it contains. Ass's milk has been recommended for children, when human milk cannot be obtained. I have never had an opportunity of trying it, but from its great resemblance to woman's milk, it is probable that it would answer this purpose very well. But it contains less cream, is less nutritious, and is less palatable, than the child's natural food. Mare's milk stands next to ass's in its resemblance to human milk. It has also been recommended for children.

The article which I have used with the most success as a substitute for human milk, is cream. It is much preferable to clear milk, and can be taken when the latter cannot be borne. I have used it in the proportions of one third cream to two thirds water, with sugar enough to make it as sweet as human milk. I seldom recommend a larger proportion of cream than that I have mentioned; but I have known it to be given in much larger proportions. In one case, the mother assured me that she gave her child habitually not less than two thirds cream. This the child would take with a good relish: it was well digested; whilst milk uniformly disagreed with the child's bowels. I have had opportunities of making the same observation in other cases, where the article has been used in smaller propor-

tions. The case to which I have just alluded was so remarkable in demonstrating the different effects of milk, that some of the facts connected with it, so far as they seem to illustrate the present subject, I will here give.— This was a child who, at the age of six months, in the month of August, it became necessary to wean, on account of the sickness of its mother. Soon afterwards it was attacked with diarrhœa, which became very profuse. Medicine was administered, and, as usual in cases of this sort, whilst the cause continues to exist, with no effect. His diet had thus far been chiefly milk and water: this was changed for cream and water, in the proportions which I have just mentioned. His medicine was a grain each of calomel and rhubarb, taken night and morning. In a few days there was an evident improvement in the child's discharges, and by the end of a week they became natural; his flesh began to return, and in all respects he so much improved, that I discontinued my visits. In a few weeks I was again called to the same child, who was suffering in the same way, and nearly as much as before. On inquiry, I found that the mother, trusting too much to the child's improved condition, had neglected to obtain cream for him, and had been feeding him on milk again. I immediately put him upon the same treatment that I had before adopted, and with equally as good effects. After the last attack, I repeatedly called to inquire after the child's health; and the mother again and again told me that if, from any cause, the milk was given for a day, or even for half

a day, a very perceptible change would be produced in the discharges. This child thrived remarkably well on this diet: at the age of ten months he was a strong healthful child, had cut ten teeth, and almost went alone.

There is an effect which follows the use of cream which it is necessary to notice; and that is, that it renders the bowels costive. This, I take it, does not depend upon any sedative power in the cream, which restrains the peristaltic action; but the cream being easily digested, nearly the whole is converted into chyme, and but little excrementitious matter is left to sustain the action of the bowels. I have also observed that when the cream is much diluted, the urine is profuse, and occasionally there is a rejection from the stomach of a liquid, which has appeared to be clear water. From these facts, I have inferred that the cream is separated from the water soon after it gets into the stomach, and the water is either rapidly absorbed and carried off by the kidneys, or, should an unusual quantity accumulate on the stomach, it is relieved by its own efforts.

It has occurred to me that a very good substitute for human milk might be prepared by separating the curd from cow's milk. This may be prepared by separating the milk into its constituent parts, and then mixing the cream and whey in any proportion which may be thought best: or it may be obtained without separating the cream, by adding rennet to new milk when much heated; then "breaking down the curd, and forcibly separating the whey." It is said that "from whey thus

procured, butter can be obtained in considerable quantities; a full proof that nearly the whole of the creamy part of the milk has been separated with the whey."* I am unable to say which of these modes of making this preparation is preferable. If prepared according to the former method, the proportions of the constituents may be as large as we please: if according to the latter, the constituents will be more intimately blended; a consideration of some importance; for I apprehend it is owing to the intimate union of the component parts, that new milk is more easily digested than that which has been allowed to stand until a separation has taken place. Made in either way, it appears to me that it will be preferable to a mixture of cream and water, and might be given in those cases in which the latter would be objectionable, on account of the costiveness which attends its use. In its sensible qualities, with the addition of some sugar, it would very much resemble woman's milk. It will contain a portion of the curd, probably nearly as much as is to be found in human milk; for it is im-

possible, with rennet alone, to separate all the curd from the whey. Now this appears to me to be desirable; for although the cow's milk, in its pure state, contains too much curd for the feeble powers of the infant stomach, yet the very circumstance that a portion of this constituent is found in human milk, is a sufficient proof that it is designed for some good purpose. The presence of a small portion of curd, together with the salts* which whey is known to contain, would probably prevent the costiveness which sometimes renders cream objectionable, and perhaps answer other purposes with which we are unacquainted.

I have already said more upon this subject than I at first intended. The utility of this preparation must, after all, be determined by experience. I have had no opportunity of applying it, since it occurred to me, neither do I know that it has been before proposed; and it is now merely suggested for the consideration of others.

Boston, Jan., 1830.

* On evaporation of whey, muriate of potash and muriate of soda make their appearance.—*Thompson.*

* *Thompson's Chemistry by Cooper.*

BOSTON, TUESDAY, JANUARY 26, 1830.

WE must apologise for the little *variety* found in our paper this week. It has been occasioned not by want of material, but of room. It is always desirable to avoid *continuing* an article from paper to paper, and many advantages result from giving at once a full view of any subject which is

deemed important. In the next volume, which will begin in a few weeks, we shall adopt a plan by which this object may be accomplished without depriving the reader of a variety of subjects for his consideration. This, and one or two other contemplated improvements, as we

esteem them, will be more fully explained in the 1st No. of the Volume.

ST. AUGUSTINE,—AS A RESORT FOR CONSUMPTIVE PERSONS.

WE have received a circular letter from Dr. Andrew Anderson, dated at St. Augustine, March, 1829, in which he recommends that city as a favorable residence for consumptive patients. There is no physician in this part of the country, but has occasion, every season, to advise a greater or less number of his friends, laboring under or apprehensive of pulmonary disease, to spend the winter months in a milder climate; and there is no one who has not witnessed the benefits of such a course. It is still a question, in what part of the world is the atmosphere best suited to remove that morbid condition of the lungs which constitutes the predisposition to phthisis pulmonalis, and to arrest the progress of the disease when once established. It is still another question, whether the climate which would act most favorably in one stage of the malady, would also be best suited to all other stages; and whether the peculiar idiosyncrasy of individuals does not form another ground for the selection of different climates in different classes of patients. On these points, we leave each practitioner to decide for himself, according to his own observation and judgment. All must agree, however, that there are certain general traits of character in some climates, which seem to adapt them peculiarly well for accomplishing the general purposes proposed by such

as resort to them under the circumstances alluded to.

In mild cases, at their commencement, we have found a very marked and rather unexpected degree of amendment from a winter passed at Richmond, in Virginia. Although the distance is not great, yet the air is so bland and pure, so destitute of the raw and chilling qualities of our sea winds, that the respiratory organs seem to act with great freedom, and irritation in them is very speedily and effectually removed. But the more distant and celebrated places of resort for such patients have been, the south of France, Italy, and the West India Islands. All these have doubtless the advantage of a soft atmosphere, and a temperature equable and mild. In these advantages, the Island of Madeira is said to exceed them all, the range of the thermometer being but about 12 deg. throughout the year. Here too may be enjoyed, with great facility, the new plan of dietetic treatment, which we noticed on page 317, under the head of *Cure des Raisins*, and which would doubtless aid in the restoration to health of a large number of those who fly their own country for milder and more balmy regions.

Until we received the circular letter from Dr. Andrew Anderson, we confess ourselves to have been ignorant of the peculiar advantages offered for such invalids by the city of St. Augustine, in the Territory of East Florida; and it is certainly a fact too important to a numerous class of valetudinarians, to be passed lightly over by the faculty, if we indeed have, in our own country, and

under our own laws, and among our own people, a spot so congenial to consumptive patients as this city is represented by Dr. A. His account is altogether clear, and bears the marks of having been drawn up with great impartiality. Some of the more prominent features of this description we shall extract from his letter.

“The city of St. Augustine,” says he, “one of the oldest places on the Continent, is situated on the Atlantic coast, in about Lat. 35 deg. north. The soil around the place for miles is a mixture of shell and sand. The houses are generally built of shell, stone or wood, after the old Spanish mode, with orange groves in the rear; but owing to their age and peculiarity of construction, not offering, it must be confessed, much attraction at first to the inhabitants of the States. A large hotel, however, is about to be erected, which is intended to remedy any objection on that score. There is now in the place a Catholic church, a Methodist meeting house, a Presbyterian church nearly completed, and measures are in train for the erection of an Episcopal church. The markets present a sufficient variety of meat and vegetables. Beef, though lean, of good flavor; poultry, wild and tame turkeys, and venison in abundance; and fish equal to any in the world, sheepshead, bass, mullet, whiting, crabs, turtles and oysters,—all light, easy, yet nourishing food. Among the fruits are the orange, the lime, the fig, and a great variety of kitchen vegetables. The vine, olive and date would also flourish, and will no doubt be shortly introduced. That it is a place in some respects not presenting all the conveniences of a large and more busy city, is certainly not to be denied; that, however, is an evil that will soon cure itself. The water too, though drinkable, is

like that of most southern latitudes, rather hard. The price of board and lodging per week is from seven to ten dollars. All the above circumstances and facts are no doubt of some importance to most persons; yet to an invalid in search of health, there are other things of far greater interest; and it is here that St. Augustine stands undoubtedly unrivalled,—in air, in temperature, in physical peculiarities and advantages generally.

“The climate is as equal and as agreeable the year round as in the nature of things can be. The mean temperature by Fahrenheit, for January, in 1829, was as follows:—For January, 1829, at 7, A. M., 53 deg.; at 2, P. M., 60 deg.; at 9, P. M., 54 deg.: for February, at 7, A. M., 53 deg.; at 2, P. M., 60 deg.; at 9, P. M., 52 deg.: for March, at 7, A. M., 53 deg.; at 2, P. M., 63 deg.; at 9, P. M., 54 deg.: for April, at 7, A. M., 61 deg.; at 2, P. M., 74 deg.; at 9, P. M., 66 deg. In the summer months it ranges from 80 to 90 deg., but the heat is by no means as oppressive as the same height would indicate in more northern latitudes, on account of the dryness, clearness, and consequent elasticity of the atmosphere. The trade wind sets in about 10, A. M., and blows steadily until daylight next morning. There are no marshes in the vicinity, and consequently no fresh water vapors, and the frame is therefore generally braced, and the spirits in a state of exhilaration that at first is astonishing. This is no doubt the true secret of those enthusiastic and glowing descriptions of this land of flowers, that characterize all the earlier accounts of this country; and while it is one of the greatest sources of enjoyment, is also in itself an efficient remedy. So remarkable, indeed, and so well understood are the effects of the trade wind, that it is familiarly styled, among the inhabitants, ‘the Doctor.’

“The nature of the soil assists

the operation of these causes. Consisting of shells and sand, it absorbs the rain that falls very rapidly, and thus prevents the rise and accumulation of vapor, and avoids the unhealthy decomposition of vegetable matter, those prolific sources of fever and disease in our own climate; and even when occasionally the air may be somewhat damp, it is so impregnated with salt as to be perfectly harmless. One fact is worthy of particular remark, as being to consumptive patients of great importance: this is that there is *no liability to taking cold* in this climate; no ordinary exposure is unhealthy or dangerous. This fact, however curious, is unquestionable, and is accounted for on the plainest principles. There are no sudden changes from heat to cold, nor from dry to damp. During the day, the refreshing trade wind pours a steady current of air over the coast, and you retire to bed while this operation of nature is going on; instead of waking at night or in the morning, and feeling the chill of the night damp, the weather has uniformly grown warmer and milder from the gradual withdrawal of the effect of the wind, which ceases entirely about daylight. In other climates the night is almost invariably, and is always liable to be, colder and damper than the day. In St. Augustine the reverse is the case, and thus the delicate lungs of a patient are relieved from one of the greatest sources of irritation. This it is, in my opinion, that constitutes the secret of the climate; it creates the most bland and uniform temperature of the atmosphere, and there are no local causes to impede its complete operation."

There is one very important fact contained in the foregoing extract, which must modify very considerably the healthful tendency of the place. We refer to what is said of the *water*. The influence exerted on the system

by the water commonly used is too generally underrated. It does not stop, we must remember, with the quantities of this article taken in its pure state; it is not limited by the additional quantities taken for the dilution of spirituous liquors: it is active in the coffee and tea which form so large a part of the morning and evening repast; in the meats and the vegetables which have been boiled in it, we have another and daily recurring vehicle for conveying into the system the influence of the water of the place we reside in. If this therefore is impure, it constitutes a formidable objection to the city in question. This objection is the greater, since, as before hinted, a large proportion of cases, termed incipient phthisis, are probably caused by, consist in, or else are connected with, some morbid condition of the digestive apparatus.

We shall be happy to receive an account of such experiments as may be made, to test the effects of the atmosphere of St. Augustine, in chronic complaints of the lungs, or of any other organs.

MORTALITY OF BOSTON.

THE following are the Diseases, so far as they have been reported to the Health Office, which have occasioned the Deaths in this City the past year:—

Apoplexy	12
Accidental	12
Abscess	1
Abscess of the Lungs	1
Abscess of the Brain	2
Burns	4
Brain, disease of	2

Consumption	203	Mortification of the Bowels	1
Convulsions	28	Measles	72
Croup	35	Nervous Affection	1
Childbed, diseases of	17	Old Age	65
Canker	7	Palsy	11
Carcinoma Uteri	1	Pleurisy	4
Colic	3	Piles	1
Cholera Morbus	1	Poison	1
Chlorosis	1	Quinsy	3
Cancer	3	Rheumatism	3
Diseases unknown	160	Rupture	1
Dropsy	12	Rupture of Bloodvessel	1
Dropsy of the Brain	42	Sudden	7
Dropsy of the Chest	4	Stillborn	65
Dysentery	20	Suffocation	1
Drowned	19	Spleen, disease of	1
Debility	10	Salt Rheum	1
Diarrhœa	1	Scrofula	4
Disease of the Bowels	10	Suicide	5
Disease of the Chest	4	Scald	1
Epilepsy	2	Scurvy	1
Fever, Typhous	28	Spasm	2
“ Lung	80	Spine, disease of	1
“ Brain	14	Stomach, disease of	2
“ Bilious	6	Throat Distemper	3
“ Putrid	1	Teething	13
“ unknown kind	2	Venereal	1
“ Intermittent	1	Worms	3
“ Scarlet	1		
“ Inflammatory	1		1221
“ Malignant	1		
“ Nervous	1		
Fistula	1		
Fracture	1		
Gravel	2		
Gout	1		
Hemorrhage of the Lungs	1		
Hemorrhage of the Bowels	1		
Hooping Cough	11		
Hip disease	3		
Heart, diseases of	9		
Inflammation of the Bladder	1		
Infantile Diseases	55		
Inflammation	11		
Inflammation of the Lungs	10		
Inflammation of the Bowels	21		
Inflammation of the Brain	7		
Insanity	3		
Intemperance	30		
Jaundice	1		
Lock-jaw	1		
Liver, diseases of	14		
Lethargy	1		
Mortification	8		

We have given the diseases just as reported. The inaccuracy which will be observed in the nomenclature, renders it impossible to form a correct estimate of the proportional mortality of different complaints. It is worth remarking, however, that 203 have died of *consumption*, whilst the greatest number who have fallen victims to any other disease is 90, which marks the fatality of an acute disease of the same organs. (“Lung Fever, 80; Inflammation of Lungs, 10.”) More than 300, or about a quarter part of the whole number of persons who have died the past year, have been carried off by some disease of the lungs.—Next in fatality we find the *Measles*, which have been

particularly rife the past year; then *old age*,—and it is not a little singular that the number of those whose light has thus burnt entirely out, is the same as that of those in whom the lamp of life was extinguished before their entrance into the world. Next in order of fatality are *Hydrocephalus, Croup, Intemperance, Typhous Fever and Convulsions, Inflammation of the Bowels, Dysentery,* and so on.

Let us now see what has been the whole number of deaths in this city the last seventeen years. The following may be considered authentic, as it is from the Records of the Health Office.

“In 1813, seven hundred and eighty-six; 1814, seven hundred and twenty-seven; 1815, eight hundred and fifty-one; 1816, nine hundred and four; 1817, nine hundred and seven; 1818, nine hundred and seventy-one; 1819, ten hundred and three; 1821, fourteen hundred and twenty; 1822, twelve hundred and three; 1823, eleven hundred and fifty-four; 1824, twelve hundred and ninety-seven; 1825, fourteen hundred and fifty; 1826, twelve hundred and fifty-four; 1827, ten hundred and twenty-two; 1828, twelve hundred and thirty-three; 1829, twelve hundred and twenty-one.”

If now, in these years, the same proportion of the fatality has been produced by diseases of the lungs, then more than *four thousand and six hundred persons*, in this city alone, have been carried off by diseases in these organs, since the year 1813.

This view of the great loss of human life, together with the amount of moral and physical suffering oc-

casioned among us by pulmonary disease, should give a new impulse to our efforts to avert so appalling a calamity. It appears to us, that, in the present state of medical knowledge on this subject, too much attention cannot be given to an early and judicious change of climate;—this *local application* seems to be an almost indispensable aid to our general remedies; a circumstance which gives an additional interest to the facts stated in the preceding article.

The great fatality of lung complaints is by no means confined to this city; it is common to most places in the north which border on the ocean. In Portsmouth, e. g., there were 121 deaths the past year, and more than one quarter of them were from disease of the lungs. Neither is it peculiar to populous cities. In York (Me.) there were 35 deaths in 1829. Of these, 11 were occasioned by old age, and consequently 24 were the result of disease. Of these 24, eleven, or *nearly one half, died of consumption*. Thus do we see the effect of this disease on human life, in a place otherwise healthy, and remarkable for the longevity of a large proportion of its inhabitants. Of the whole 35, only twelve died a natural death under 62 years of age.

CONSUMPTION OF ANIMALS,—EFFECTS OF TEMPERATURE.

A LATE foreign journal contains some account, by M. Flourens, of the consumption of certain animals, and the effect of temperature in that disease. We would gladly present

the account entire to our readers, but as our limits forbid this, we shall only offer the following extract, which contains a history of some of the experiments of this celebrated pathologist.

"In the month of May, 1826, being then in the country, a duckling was brought me from a newly-hatched brood. It seemed on the point of dying of suffocation: its beak was wide open; it had the greatest difficulty to breathe, and in an hour of two it died.

"On examining its organs, I found the lungs of a deep red color, and gorged with blood. The animal had died of a violent inflammation of the chest.

"I went to the place where the other ducklings of the same nest were, and found another which had just fallen into the same state of suffocation as the first I had seen; and while I was examining it, a third was suddenly seized before my eyes with an oppression of the chest, so violent, that at the very instant of the attack it became motionless, and soon showed all the symptoms the first had done. The two last-mentioned ducks also died after a few hours. On examination, they both presented the same inflammatory engorgement of the lungs which I had observed in the first: all three, in fact, had died of the same kind of acute pneumonia; and it was evident, moreover, on considering the cold degree of temperature, and the exposure to the north of the place in which they were found, that it was to the cold, and only to the cold, that these pulmonary inflammations were to be attributed.

"The sudden and violent effect of cold on these young birds, reminded me of some observations I had made some years previously on several animals which had been the subjects of my experiments. These animals which had been operated on, in the course of experiments during the

warm season, and completely cured, had most of them died of chronic pulmonary inflammation on the first cold weather which succeeded the period of operation.

"The comparison of these effects of cold on different animals, its action so decided and constant on the respiratory organs, the different degrees of chronic or acute inflammation which had occurred under my own eyes, made me sensible that I had in my power the means of direct investigation and experiment on one of the most cruel maladies by which humanity is liable to be afflicted,—namely, pulmonary consumption; and I determined to derive all possible advantage from them.

"I first applied myself to ascertain whether, in certain given cases, cold alone is sufficient to cause pulmonary consumption; and then to discover if, in such cases, to avoid the cold would be sufficient means of avoiding the malady. I resolved, in the third place, to inquire whether this malady, after it had commenced under the influence of a cold temperature, might not be cured by the simple and only effect of a mild temperature."

The following is detailed by M. Flourens as one among the many experiments made by him in the investigation he had thus proposed to himself:—

"Early in October, 1826, I procured a brood of twenty-three chickens, about a month old. As soon as the cold commenced, I placed six of these chickens in a place chosen for the purpose, in which I kept up a mild and uniform temperature. Not one of them was attacked with pulmonary consumption.

"Out of eleven chickens which were left exposed in the yard to the variations in the temperature of the atmosphere, all but two died of pulmonary consumption, after having passed through all its various degrees; and the two which survived were small and weak. But the most

important results were offered by the six chickens which remain to complete the number of twenty-three.

"I had left them at first with the eleven just mentioned in the common yard, until they showed evident signs of consumption more or less advanced. I then removed them to the place which I had kept at a constant and mild degree of temperature, and left them in company with others which were already kept there.

"Two of these six, which, had they been left exposed to the effects of the cold, would certainly have died either the very day I removed them from the yard, or the following at latest, after having at one time improved in a slight degree in strength, died, the one at the expiration of four days, the other at the end of nine; I found their lungs in a state of complete inflammation and suppuration.

"The other four regained by degrees their vivacity and strength, and at last completely recovered. In the month of April, 1827, when I set them all at liberty, they were quite as well as those which had been constantly kept in a place of warm temperature.

"It now only remained to ascertain the condition of the lungs of these four chickens, and what might be the states in which those organs had been during the time when the signs of their suffering under consumption were so evident.

"I found then, in the lungs of all, vestiges of former disease, more or less important, and now cured.

"I have preserved in spirit, and shown to the Academy, one of these cured pair of lungs, in which an entire lobe presented nothing but contracted vesicles, scars of extinct inflammation and suppuration, and evidence, not less authentic than consolatory, of the powerful influence of warmth, and of the complete cure of a malady to which so many of the human race fall victims.

"These experiments show clearly

what is the sort of influence which warm climates have on pulmonary consumption; that it is by effecting the cicatrization of the lungs, when injured by the cold of more rigid climates, that the mild temperature of the south produces the good effects so long observed by the faculty."

The memoir of M. Flourens concludes with insisting on the important advantages in throwing light on human pathology, which may be derived from observing the diseases of animals, and urges the propriety of forming *national establishments*, on the plan of that proposed by Baglivi in the seventeenth century, for the express purpose of studying the maladies of animals, in order to enlighten and assist the study of the disorders to which mankind is subject.

ALOES IN ULCERS.

THE resin of aloes is said to be more effectual than myrrh, or any other terebinthinate, in deterring foul ulcers, and promoting the healing process. It may be used in an ointment, made according to the following formula:—

Take of Resin of Aloes ℥i.
Bee's-wax ℥iv.
Ol. Oliv. ℥v.

Mix and blend by gently boiling for a few minutes.

Acute Rheumatism.—Two cases of this disease are related by a physician of Montpellier, in which a speedy cure was effected, after other means had failed, by the tartrate of antimony. It was given in the dose of a quarter of a grain, and gradually increased until it produced nausea and diaphoresis.

Tic Douloureux and Periodical Headach.—Dr. Wetherill, an eminent physician of Liverpool, has treated two cases of confirmed tic douloureux by the sulphate of quinine, in doses of from five to ten grains three times a day. In one

case (a delicate female) the paroxysm recurred daily about one o'clock, and continued very severe for four hours. After taking the medicine three days, the paroxysm did not return, and she remained free from the malady. In the other case the effects were not so satisfactory. He has also successfully prescribed the sulphate of quinine in the same dose, in cases of periodical headach and nervous toothach.

London University.—The spirit which prevails among the Medical Professors of this new and celebrated University, bids fair to be the means, if not of augmenting, certainly of diffusing much important and useful scientific information. A monthly magazine, bearing the name of the University, has already reached its third number, and contains many valuable medical papers. With these we shall make our readers better acquainted in the course of a few weeks.

Indications of Insanity.—A Treatise on this subject is in preparation by Dr. Conolly, Professor of the Nature and Treatment of Disease in the University of London.

The Siamese Boys.—These twins have been so ill of a cough as not to be exhibited several days. They were attended by Mr. Bolton, and

are on the recovery. A representation of them playing at battledore and shuttlecock has been published by Mr. Ackermann.

NOTICES.

WE feel it a duty to say, although a matter in which we have no possible pecuniary interest, that about a thousand dollars of the subscription to the "Medical Intelligencer," one of the roots from which this Journal sprang, still remain unpaid. As this amount is due to the family of the late Dr. J. G. Coffin, the last Editor and Proprietor of the Intelligencer, and as the circumstances of his estate are such as to render the payment of this sum very desirable, we must solicit, from those in arrears for that work, an immediate settlement of their accounts. The Proprietor of this Journal will receive and receipt for the same. The circumstances to which we have alluded will not be lightly regarded by the upright and humane debtor to Dr. C.

In our notice last week of Mr. Gould's Prize Dissertation, a typographical error occurred. The subject, *De Paruria*, was printed "*De Paruna*."

WEEKLY REPORT OF DEATHS IN BOSTON, ENDING JANUARY 14.

Date.	Sex.	Age	Disease.	Date.	Sex.	Age.	Disease.
Jan. 8.	F.	24 yrs	consumption	11.	F.	3 yrs	typhous fever
	M.	3 d	unknown		F.	31	childbed
	M.	70 yrs	old age		M.	50	unknown
	M.	32	diarrhœa	12.	M.	40	do.
	F.	29	consumption		M.	3 mo	do.
	F.	18	do.		F.	3 yrs	hooping cough
	F.	3	do.		M.	38	unknown
9.	M.	23	liver complaint	14.	F.	42	cancer
	M.	19	consumption		F.	68	unknown
10.	F.	12 mo	croup		F.	51	consumption
	F.	1 d	unknown		Males, 9,—Females, 12. Total, 21.		

ADVERTISEMENTS.

NEW MEDICAL BOOKS.

JUST published, and for sale, by **CAR-TER & HENDEE**,—Malaria; an Essay on the Production and Propagation of this Poison. By **JOHN McCULLOCH**, M.D. F.R.S., &c. &c.

An Essay on the Diseases of the Internal Ear. By **I. A. SAISSY**, M.D. Translated from the French, by **NATHAN R. SMITH**, M.D., Professor of Surgery in the University of Maryland; with a Supplement on Diseases of the External Ear, by the Translator.

Observations on the Utility and Administration of Purgative Medicines, in several Diseases. By **JAMES HAMILTON**, M.D., Fellow of the Royal College of Physicians, &c. &c. From the Fifth Edinburgh Edition.

A Treatise on Pathological Anatomy. By **WILLIAM E. HORNER**, M.D., Adjunct Professor of Anatomy in the University of Pennsylvania, Surgeon at the Infirmary of the Philadelphia Almshouse, Member of the American Philosophical Society, &c.

Elements of Operative Surgery. Translated from the French of **A. TAVERNIER**, Doctor of Medicine of the Faculty of Paris, &c., with copious Notes and Additions. By **S. D. GROSS**, M.D.

A Treatise on the Nature, Cause and Treatment of Contagious Typhus. From the German of **J. VAL DE HILDENBRAND**, Imperial and Royal Counsellor, Professor of the Practice of Medicine in the University of Vienna, &c. &c. By **S. D. GROSS**, M.D.

An Essay on the Morbid Sensibility of the Stomach and Bowels. By **JAMES JOHNSON**, M.D.

Examinations in Anatomy, Physiology, Practice of Physic, Surgery, Chemistry, Materia Medica, and Pharmacy. For the Use of Students. By **ROBERT HOOPER**, M.D. Dec. 22.

MEDICAL SCHOOL OF MAINE.

THE MEDICAL LECTURES at **BOWDOIN COLLEGE** will commence on **TUESDAY**, February 23, 1830. Theory and Practice of Physic, by **JOHN DELAMATTER**, M.D.

Anatomy and Surgery, by **J. D. WELLS**, M.D.

Midwifery, by **JAMES MCKEEN**, M.D.

Chemistry and Materia Medica, by **P. CLEAVELAND**, M.D.

The **ANATOMICAL CABINET** is extensive, and very valuable.

The **LIBRARY**, already one of the best Medical Libraries in the United States, continues to be every year enriched by New Works, both foreign and domestic.

Every person becoming a member of this Institution, is required to present satisfactory evidence that he possesses a good moral character.

The amount of fees for admission to all the Lectures is \$50. Graduating fee, including diploma, \$10. There is no matriculating fee. The Lectures continue three months.

Degrees are conferred at the close of the Lecture term in May, and at the following Commencement of the College in September. A systematic course of instruction, embracing Recitations in all the branches of Medical Science, Demonstrations, and Lectures, will be given by the Professors, during the interval between the annual courses of Lectures.

Boarding may be obtained in the Commons Hall at a very reasonable price.

Brunswick, Dec. 4, 1829.

Dec. 15.—4teop.

LAENNEC ON THE CHEST.

JUST published and for sale by **CAR-TER & HENDEE**, A Treatise on the Diseases of the Chest, and on Mediate Auscultation. By **R. T. H. LAENNEC**, M.D., Regius Professor of Medicine in the College of France, Clinical Professor to the Faculty of Medicine at Paris, Physician to her Royal Highness the Duchess of Berri, &c. &c. Translated from the latest French edition, with Notes and a sketch of the Author's Life, by **JOHN FORBES**, M.D., Member of the Royal College of Physicians, and Senior Physician to the Chichester Infirmary. With Plates. From the third Revised London edition, with additional notes.

Jan. 26.

AN ENGRAVING,

REPRESENTING the Perfect and Imperfect Cow Pox and the Chicken Pox, during their course, by **J. D. FISHER**, M.D. This day published and for sale by **CARTER & HENDEE**, cor. of Washington and School sts. Price 6² 1-2 cts.

Jan 26.

Published weekly, by **JOHN COTTON**, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

I.

MENTAL DERANGEMENT FROM GASTRIC IRRITATION.

By H. WORSHIP, M.R.C.S.

EDMUND ———, aged 15, but not yet arrived at puberty, of small stature, but regularly formed, with light-colored hair, delicate and pale skin, and an active and intelligent mind, was put under my care for an affection of his eyes, which presented the following appearances:—There is in each eye a pencil of red vessels, running from the external and internal angle, and terminating at the margin of the cornea, which is perfectly transparent; the pupil is large and regular; the iris acts slowly and almost imperceptibly when a strong light is admitted to the eye, and the pupil becomes contracted only when the sight is fixed on any particular object; the conjunctiva of the lids inflamed, and there is lachrymation and confusion of vision when an object is regarded for any length of time. The upper eyelid is large from the number and size of its vessels. He has been subject to similar attacks from time to time during the last four or five years, and has lately been under the care of a celebrated oculist, who has advised the application of leeches, and an occasional dose of calomel, to be followed up with senna and salts.

His mother informed me that

he was not sound in his mind; and with respect to this point, I made out the following history. About two years since he was the subject of scarlet fever, which ran rather high. He had passed nearly a week in convalescence from the attack, when he was seized with acute pain in the abdomen, followed by purging and vomiting, which continued for some hours. It was then his mind became affected; he screamed, and made such exertions, that he was with difficulty kept in his bed; he fancied he was going to be murdered, and pointed at the imaginary objects which were to destroy him. He would minutely detail many absurd stories, of which he had no memory when subsequently questioned. From this state he passed into one nearly resembling idiotism, and then gradually recovered. Although occasionally irritable, he has had no attack like the one I have just described till within a short time of my attendance, nor was this attack of so severe a character as its predecessor.

Disregarding, for a time, the affection of the eyes, and bearing in mind the history of the former illness, I was induced to look for the cause of the present relapse in a disorder of the stomach, or some other abdominal viscus. That such a disorder existed, and that the treatment I adopted for its removal acted beneficially on the

brain, the following statement will fully prove.

Nov. 3d.—My patient complains of great pain and heat in the head, with confusion of ideas. His pulse is quick and full; respiration short, and principally carried on by the ribs. He sighs continually; his digestion is painful, and his appetite immoderate, for scarcely does half an hour elapse after eating a meal, which would satisfy two persons, when he again calls for food, and eats to a like excess. The tongue is covered with a white fur; the bowels are irregular; the epigastrium is full and hard, and painful on pressure. He was put on low diet, with lemonade for drink; leeches, followed by poultices, were applied to the pit of the stomach on the 3d, 4th, and 8th; the leeches amounted in all to forty. To the treatment just mentioned, my patient added the occasional use of a foot-bath.

Nov. 14th.—His recovery has been as rapid as I could have wished: at the time I am writing, his tongue is clean, his head clear; the pain in the epigastrium no longer exists, and the inflammation of the eyes has quite disappeared; so that, he says, his sight is as good as ever it was.

It will readily be granted that there are many cases in which disorder of the stomach is the exciting cause of pains, and other unpleasant feelings in the head; but that this disorder (be its character and symptoms what they may) should so far act on the cerebral mass as to produce a derangement of the intellectual functions, for any length of time, or at intervals, is a point which will less readily be believed from the want of facts to substantiate such an opinion. From the history of the

first attack, as related to me by the lad's mother, I had already formed my suspicions respecting its cause. In the treatment I adopted when he came under my care, I was farther guided by the symptoms which then presented themselves; and the favorable result which I obtained has justified me in the plan I pursued. Previously to my attendance, the lad had, unknown to his mother, obtained some leeches, and applied them to his head; the relief he experienced was slight, and of but short duration. The account of the affection of the eyes has been given in detail, that the cure, which was effected by the general treatment, and without local applications, may have its due importance. My object in publishing this case is to solicit the attention of medical men to the influence which gastric irritation possesses in producing disorders of the mind.
—*Lond. Med. Gaz.*

II.

RABIES CANINA.

CANINE RABIES is a disease respecting which our knowledge is deficient; we refer particularly to that kind of knowledge which, having been derived from actual experiment and close and extensive observation, can be implicitly relied on. A German physician, Dr. Hertwig, has conferred a great obligation on the profession by his recent contributions towards a better knowledge of this subject. In his treatise, Dr. H. considers *first*, what are the true and diagnostic symptoms of Canine Rabies; and *secondly*, what are its possible and what its most frequent

causes. The *treatment* has not been discussed by this author, since he had not the ability to propose with confidence any new remedy, or extol the success of any which is already known to the faculty. On the two first topics, the facts communicated by Dr. H. are of great practical value; they are the result of a minute personal examination of 300 cases of this disease, and above 50 experiments conducted by him with uncommon judgment and indefatigable zeal. We shall therefore offer these facts to our readers, as stated with clearness and ability in a late number of the *Edinburgh Journal*.

Symptoms of Rabies Canina.

Dr. H. has observed two species of this disease, one of which he denominates *Raging Rabies*, and the other *Calm Rabies*; and of these two species, he thus relates the most prominent symptoms:—

The first symptom of the *Raging* form of rabies is a change in the behaviour of the animal, sometimes dulness, sluggishness and peevishness, sometimes, on the other hand, increased sensibility, activity and serviceableness, with a disposition to anger; and the change of temper, whatever it may be, is not permanent, but intermitting.—A very common symptom at the beginning is a great disposition to lick cold objects, such as a chain, stones, heads of nails, the noses of other dogs, and the like.—Restlessness is also a very common early symptom. In its slightest degree this is manifested in frequent shifting of the place where they lie, and a tendency to go often towards the door, without an object; in

its highest degree it impels the animal to run off to a considerable distance in the neighborhood, sometimes for a whole day; but it always returns home if permitted, and there takes pleasure in recognising its acquaintances. The degree of restlessness often depends on the usage which the dog receives at home.—A rabid dog never loses its intelligence entirely till it is near the point of death. All know their master or keeper, and obey him more or less, but less and less as the malady gains ground; and those which have been taught tricks will for some days perform them when told. No mad dog is completely disobedient to his master, but becomes more and more so the more the disease advances, and the more he is irritated.—Loss of appetite is a very early and nearly invariable symptom. A few will take, throughout even their whole illness, a little soup, or a morsel of soft bread or flesh. But by far the greater number refuse food entirely at an early period, and many of them even two days before any other symptoms of note would be remarked by a careless observer. This is a striking character of rabies; for in all other diseases of the dog, the appetite does not fail till the disease is fully formed, or at least is obvious to an ordinary observer.—Loss of appetite is almost invariably accompanied with a propensity to eat indigestible substances, such as straw, leather, wool, fragments of wood, turf, and glass, and also to swallow their own urine and dung, as well as those of other dogs. This depraved appetite is very rare in other diseases, and is an important criterion, since it is applica-

ble both during life and after death.—A few rabid dogs do not suffer from thirst, and therefore do not care for water; but the greater number lap and swallow it during their whole illness, and many of them greedily; some lap it frequently, but cannot swallow it properly, because the tongue or throat is swollen. But no rabid dog dreads water. This is not a new observation; for Meynel,* Blaine,† and Greve‡ have made the same remark. It does not the less require repetition, however: because not only the vulgar, but also many medical men, and even some late authors, such as Waldinger,§ continue to fall into the old error of supposing that canine madness is accompanied with hydrophobia.—Neither does any rabid dog dread the light or the air, as some erroneously imagine. A few animals have an increased sensibility to bright light, and on that account prefer an obscure place, and wink when the light is vivid; but none can be properly said to have an aversion to light.—All have a tendency to constipation.—The most important and invariable symptom of all is a change of cry. The tone is sometimes higher, sometimes lower than natural, rough, hoarse, and expressive of anxiety. The animal does not give utterance, as in health, to a rapid succession of short, distinct-

ly separated barks; but to a single short bark, which is suddenly changed to a short howl. The sound is neither a bark nor a howl, but something intermediate between both, and so remarkable that no one who has heard it once can fail to recognise it again. In no other disease does the cry of the dog undergo a similar change; and hence in cases otherwise doubtful, Dr. Hertwig has often decided that rabies was present from the cry alone, and he never was wrong in his decision. Our attention was pointedly called to the peculiar cry of the dogs affected with rabies in Paris, and, like our author, we conceive it is quite peculiar to this disease, and so marked that no one who has heard it once can fail to recognise it again, or to distinguish it amidst those of many healthy dogs barking at the same time. In many cases the animal cries without any apparent cause, in others only when it is irritated.—In most dogs affected with raging rabies, a disposition to bite is manifested in a greater or less degree. This disposition is not constant, but occurs only at intervals. It is also very different in degree, according to the race, temperament, and habits of the animal. Mild-tempered and phlegmatic dogs sometimes only snap, or push or pinch with their teeth, without actually biting. Furious dogs, and those accustomed to fight or to kill vermin, exhibit on the contrary an ungovernable propensity to tear and slaughter all living things that come within their reach, or even to destroy inanimate objects, and to lacerate their own bodies. The propensity to bite is increased in all by irritating them. Cats

* Trans. of a Soc. for Med. and Chir. Knowledge, Vol. i.

† Canine Pathology, or Description of the Diseases of Dogs, 1817.

‡ Erfahrungen und Beobachtungen über die Krankheiten des Haushiere, 1818 and 1821.

§ Ueber die in den Jahren 1814 and 1815 häufiger beobachtete wuth der Hunde. In der Mediz. Jahrbuch. des K. K. Oesterreich. Staates III. iii. 89.

are the first animals they attack, then their own kind, then other animals, and lastly man. When they come in contact with other dogs, they first snuff at them, particularly about the snout and genitals, wagging the tail all the time, and then bite quite unexpectedly. The bite is seldom preceded by snarling or accompanied by a growl.—Many rabid dogs snap frequently at imaginary objects in the air.—Their external appearance is at first little altered. On the second or third day, the eyes usually become somewhat reddish, and the eyelids are closed from time to time for a few seconds, as also happens with dogs that have the distemper or catarrhal affections. At the same time the skin of the forehead is drawn down over the eyes in small wrinkles. At a later period the eyes are dull and muddy, but never more fiery or lively than at the beginning. In many instances the whole head swells, in others the nose or tongue only. Most have a rough appearance; and all become rapidly very lean.—The muzzle in Raging rabies is generally rather dry than moist, and therefore without froth or slaver, which is commonly supposed by the vulgar to indicate the disease. The surface of the lips and tongue is sometimes very dry. Salivation is observed only in the rare instances where there is considerable swelling of the pharynx, and consequently difficulty in swallowing.—Another common error is to suppose that the tail is always held down between the legs. On the contrary, it preserves its usual position till the animal becomes very weak, and then it hangs down flaccid.—In like manner the gait

is at first unaltered. But as the disease advances, the hinder part of the body becomes gradually weaker and weaker, and at length the hind legs are completely paralysed.—It is an error to suppose that mad dogs run straight forward. At first they run about snuffing and following the scent in various directions; and when the biting fit comes on, they turn aside in quest of objects. It is only when the disease is in its advanced stage, and the animal's intelligence blunted, that it runs straight forward.

In the *Calm* form of Rabies, a change of behavior is remarked as in the former variety; and for the most part the animal becomes inactive, listless and sorrowful. The most striking and important symptom of this variety, is paralysis of the lower jaw, so that the mouth is constantly more or less open. The dropping of the jaw has been ascribed by some authors to spasmodic contraction of the muscles which open it: but this is an erroneous idea; the real cause being a paralysis or weakness of the muscles which close the jaw, as may easily be seen from the facility with which the jaw can be raised so as to close the mouth. The paralysis is different in degree in different cases: some dogs cannot shut the mouth during their whole illness, or under any circumstances; while others, when excited, can close it for a few seconds so as to bite. The palsied state of the jaw prevents them from swallowing, so that the fluids which they lap run out by the corners of the mouth, and the saliva also commonly flows out in the same manner. The tip of the tongue often projects a little between the

teeth. Animals affected with the calm form of rabies have much less propensity to bite than those who have it in the raging form; and they have also less tendency to change place or run away from their home. Their cry is changed precisely in the same manner, but it is much more seldom heard; and some dogs do not cry at all. In all other respects but those now mentioned, the symptoms of the calm and raging varieties are the same.

The course of the disease differs considerably. Death is commonly preceded by gradual exhaustion of the strength; and it is inevitable. From six to eight days is the ordinary duration; but some animals die sooner, and others live ten days. Dr. Hertwig never saw an instance where the animal survived that period.

The history of which we have here given an abstract, agrees in most particulars with an account published a few years ago by Mr. Youatt, a veterinary surgeon (Lond. Med. Repos. 1826, ii. 448), but is much more full and complete.

Morbid Appearances.

After about 200 dissections, our author has been unable to ascertain that any particular change of structure is uniformly attendant on the disease.

Diagnostic Symptoms.

To this part of the subject we would more particularly direct the attention of the reader; he will find more information on this subject in the following enumeration, than is contained in any work we have ever met with.

In establishing the diagnosis

between rabies and other analogous diseases in the dog, Dr. Hertwig passes in review the following disorders:—The *Distemper*,—*Inflammation of the Stomach and Bowels*,—*Constipation*,—*Inflammation of the Larynx and Windpipe*,—*Foreign bodies in the Throat*,—*Fracture and Dislocation of the lower Jaw*.

The *Distemper* is a catarrhal affection, indicated at the commencement by lacrymation, sneezing, discharge of mucus from the nose, and fever; and in the latter stage by tetanic paroxysms. "These paroxysms, but particularly the spasmodic chewing which often attends them, and which the ignorant mistake for a desire to bite, together with the frothing and slavering from the mouth, and the bewildered roaming of the animal, give it a very suspicious and much more frightful appearance than rabies itself, with which some ignorantly confound this disease. It is distinguished from rabies by the spasmodic fits which never accompany the latter malady, by the excessive slavering and insensibility which attend the fits, and by the want of the most striking symptoms of rabies, such as the peculiar cry, the propensity to bite, and the palsy of the lower jaw."

Inflammation of the Stomach and Bowels, which is usually caused by cold, by poisons, or by foreign indigestible substances, is distinguished by vomiting of ingesta, sometimes accompanied with blood; by the stiff position, and wearied melancholy appearance of the body; by the unnatural heat of the belly, and the loud cries of the animal when the belly is touched; by its listlessness; by the want of the cry of rabies, or

the disposition to bite, or the tendency to swallow indigestible substances, or the palsy of the lower jaw.

Constipation, when it has lasted some time, induces an excessive restlessness, and a disposition to bite when the animal experiences or dreads rough handling; and these symptoms have led to the affection being confounded with rabies. But it may be at once distinguished by the frequent efforts which the animal makes to discharge feces, and by the unaltered sound of its cry.

Inflammation of the Throat, the consequence of catarrhal affections, or of mechanical injury of the root of the tongue, pharynx or larynx, bears a closer resemblance to rabies than any other disease. The animal loses its activity, acquires an anxious look, and hangs the head stiffly. The eyes are sometimes red and irritable, the nose hot and dry, the inside of the mouth and the tongue red and dry, and covered with an abundant tough mucus. The throat externally is swelled more or less, and always tender to pressure; and in consequence of the swelling, the lower jaw is often kept open. The cry is a short hoarse bark, expressive of pain, and not terminated by a howl; and it is rarely uttered except when the animal is irritated. It may be distinguished from rabies,—to the calm form of which, however, it bears a very close resemblance,—by examining attentively the lower jaw. In rabies, the jaw can be very easily closed by supporting its weight; in inflammation of the throat, this cannot be done either so easily or so completely. In rabies, the jaw may be thus closed without

hurting the animal; but not in inflammation without exciting expressions of pain. In rabies, the jaw remains immoveable so long as the animal is not irritated; in inflammation its position varies, being at one time more closed than at another.

The *presence of Foreign Bodies* sticking in the mouth between the teeth, or in the fauces or gullet, produces a sorrowful expression, much restlessness and frequent crying, scratching of the mouth with the fore feet, rapid breathing, and much slavering. When the body is sticking in the mouth, the animal cannot shut the lower jaw completely; when it is in the throat, frequent efforts are made to dislodge it. These two circumstances will lead an accurate observer to suspect the real cause of illness, and the exact position of the foreign substance.

Fracture and Dislocation of the lower Jaw give the dog, in many respects, the appearance of calm rabies; for the mouth is constantly open, the saliva issues from it in abundance, and the animal can neither eat nor drink well. At the same time the countenance is much altered, and expresses anxiety and pain. The diagnosis is to be formed by attending to the swelling and tenderness around the injured part, and to the crepitus on motion in the case of fracture, and the impossibility of closing the jaw in the instance of dislocation.

On the whole, it appears that with a moderate share of knowledge and due caution, very little difficulty ought to be experienced by any one in distinguishing Rabies from any of the diseases which bear a resemblance to it in external characters.

Causes.

Most of these are obscure. Dr. H. believes that the disease frequently arises spontaneously, and that it depends greatly on individual predisposition. Age, sex, and other discernible peculiarities in the figure, character or situation of the animal, seem not to predispose to rabies. Highly excited and ungratified sexual desire, is doubtless among its most influential causes; but heat and cold, which are generally supposed to influence the disease more than any other circumstances, are not thought by Dr. H. to have any connection with it whatever. The cases deduced in support of this opinion are conclusive. We give but the following.

Among the innumerable multitude of dogs used in and about Berlin for drawing milk barrows, and which are exposed to inclement weather of every kind throughout the whole year, without any shelter whatever, he has witnessed only one case of rabies in five years.

Contagion, or inoculation with the saliva, foam, or blood of a rabid dog, is believed to be by far the most common source of this disease, about *twenty-four per cent.* of all those inoculated by him having been thus affected. Dr. H. then goes on to say that,—

The contagion may be communicated at all periods of the disease, and even for some time after death. In several instances it was produced by inoculation with the froth of the mouth collected in the dead body. It never appeared, however, to be induced, if the matter was col-

lected later than about twenty-four hours after death.

The contagion takes place only when the matter is introduced into the system through a wound of the external surface; for it was found, by many experiments, impossible to impart the disease by making dogs swallow large quantities of the diseased matter. But a bite is not necessary. The disease may be communicated quite as well by applying the matter to a common wound. It is clear, therefore, that the production of hydrophobia in man is the effect neither of the peculiar kind of wound, nor of terror, but is owing to a peculiar virus.

It was maintained by a German writer of the last century,* and has been very lately asserted by an Italian author,† that rabies is not contagious in the second generation,—that animals affected by inoculation, from a dog in which it arose spontaneously, are incapable of communicating it in their turn. This supposition Dr. Hertwig contradicts by many experiments. In one instance he communicated rabies to a dog with the saliva of a man who died of hydrophobia; and this dog communicated it by biting two other dogs.

The morbid matter produces in the dog no perceptible effect, either local or general, till the malady breaks forth. The case may be different with man. But certainly in the dog no change whatever is observed till the disease begins; and in particular the wound heals like other lacerated wounds; nor is there ever found

* Bader, Neue Theorie der Wassersch. Frankfurt, 1792.

† Capello, Memoria sull' Idrofobia. Roma, 1823.

under the tongue any vesicle or pustule, such as Marochetti has described.

The disease breaks out in the dog within fifty days after the inoculation. Dr. Hertwig never witnessed it after a longer period. It does not always assume, in inoculated animals, the same form as in the animal from which it is communicated. Each variety may produce the other.

There is no peculiarity in the effluvia of rabid dogs which leads other animals of the same species to shun them, nor are healthy dogs averse to come in contact with them. On the contrary, they allow rabid dogs to approach them without fear, and snuff at them, and are snuffed at in their turn, without exhibiting any sense of fear. Healthy dogs are also not afraid of the carcass of a rabid dog, as is often imagined.

III.

HYDROPHOBIA.

THE shocking effects produced on the human system by the bite of a dog affected with the disease so clearly described in the foregoing article, are well known to the profession. It may not be amiss to record, in this place, an account of a specific, so called, for hydrophobia, noticed by Mr. Hardy in his travels

in Mexico. The efficacy of the remedy was attested by the best authority, and its mode of administration is thus stated by Mr. H. :—

“The person under the influence of this disease must be well secured, that he may do no mischief either to himself or others.

“Soak a rennet in little more than half a tumbler of water, for about five minutes. When this has been made, add of pulverized sevadilla* as much as may be taken up by the thumb and three fingers. Mix it thoroughly, and give it to the patient; that is, force it down his throat in an interval between the paroxysms. The patient is then to be put into the sun if possible, or placed near a fire, and well warmed. If the first dose tranquillize him after a short interval, no more is to be given; but if he continue furious, another dose must be administered, which will infallibly quiet him. A profound sleep will succeed, which will last twenty-four or forty-eight hours, according to the strength of the patient's constitution, at the expiration of which time he will be attacked with severe purging and vomiting, which will continue till the poison be entirely ejected. He will then be restored to his senses, will ask for food, and be perfectly cured.”

* Probably the veratrum sevadilla, or hellebore.

SKETCHES OF PERIODICAL LITERATURE.

SUPPURATION.

FROM the variety of language which is employed by different writers in describing this process, it seems a necessary inference, that its true na-

ture is as yet but imperfectly apprehended. The expressions employed by some authors on the subject, imply an actual conversion of the substance of organs into purulent fluid.

This conversion, according to the view thus taken of it, occurs when this substance, from continued inflammation, has been rendered incapable of maintaining its vital functions. Under these circumstances, it softens, loses its organized character, and undergoes an alteration in its physical properties, by which it is converted into a fluid, not very different in its chemical composition from the circulating blood. This fluid, by a peculiar solvent property, or more simply, by the destruction of organized life in those parts with which it is in contact, reduces them gradually to its own nature and form. As this effect takes place most readily where the parts are most yielding, the pus gradually approaches the surface through which it at length penetrates, unless an artificial opening be previously found for its escape.

Such is nearly the theory by which many of the earlier and some of the later writers have explained the suppurative process. Nor are arguments wanting to render this view a plausible one. The solvent property of pus, in the sense above given to the term, is shown in its action on foreign substances which produce local irritation. That it actually represents the parts previously contained in the cavity it fills, though in some sort a gratuitous supposition, is yet rendered probable by those chemical properties to which we have alluded, and by which it is assimilated to the fluid from which these parts were formed. Its *modus operandi* in causing this chemical change to take place, is indeed not easily explained; but there are pro-

cesses in nature, such as the action of ferment on vegetable substances, to which it presents at least some distant analogy.

The later and more prevalent view of this subject, differs in an important particular from that which has just been stated. It makes the purulent fluid to be a secretion from the internal surface of the abscess,—the effect, therefore, and not the cause of the cavity which encloses it. According to this view, pus possesses no solvent power; and the disappearance of the parts where an abscess is formed, is to be accounted for upon the common principle of an absorbent process, by which they are re-conveyed into the mass of circulating fluid.

This account of the matter, though characterized by great simplicity, and based on rigidly physiological principles, has yet its difficulties. If pus is a secretion from the surface of the abscess, then a cavity must be found before pus can be produced; and what, we may ask, occasions its first production? To this it may indeed be replied, that the first step in the process is the absorption of a certain central portion of matter which has become dead or useless. This being removed, the surface of the cavity secretes a purulent fluid until the cavity is filled. Here it would be natural to suppose the process would stop; for the part which has thus actively exercised the secreting function still retains its organic life, of which it can only be deprived by the action of some external agent. That this agent should be the pus itself, which is thus capable of destroying

that life which has first produced itself, yet incapable of exerting any solvent power on the part thus disorganized, involves a series of suppositions somewhat difficult to admit; particularly as the processes which they suppose, have no analogy in any other part or function of the animal economy.

It may be farther objected to this hypothesis, that the successive absorption and secretion which it supposes, must require for their completion a considerable period; and that the formation of an abscess in this mode must be a slow and gradual process. In fact, however, suppuration, when once commenced, goes on with great rapidity; and in a very short time after the existence of any matter can be discovered, the quantity accumulated is found to be very considerable. That this may not happen by the processes alleged, we are not prepared to assert; that it does happen in this manner, is at least doubtful. The subject is among the most interesting in the speculative department of surgical science; and we may well indulge the hope that the labors of cotemporary physiologists may furnish us with a better theory of the suppurative process than we yet possess.

OBLITERATION OF CUT VESSELS BY TORSION.

THE plan of securing divided vessels proposed by M. Amusat, seems to have excited considerable attention abroad, and to have encountered no small opposition from those attached to old modes of proceeding in these

cases. We notice the account of a very animated debate which took place on the subject in the French Academy of Medical Science, in which Larrey, Lisfranc, and several of the most distinguished surgeons took part. Two grounds were taken in opposition to M. Amusat. The first was, that this mode of securing vessels was attended with much more danger than the usual one. M. Larrey remarked that there was no accident which could take place in securing a vessel, so serious as that of its rupture at a part beyond the reach of the operator, where it could only be reached by new incisions; that such an accident was often followed by fatal consequences; and that the mode of operating proposed by M. Amusat rendered its occurrence highly probable. It was further said that great hazard was in this way incurred of causing inflammation of the vessels. The second ground taken was, that whatever degree of merit belonged to the operation, it was not original with M. Amusat; and a passage was quoted from Galen to prove that this author had anticipated the plan, and even put it in actual execution.

M. Amusat defended himself against these attacks by recapitulating the advantages of his operation, and denied that the evils apprehended from it had ever occurred to him in practice. With regard to his own merit in proposing it, however, he denied ever having claimed an absolute originality, and contended only for the honor of reviving the operation, or for what he himself called

its modern priority. On the whole, in question, although it might no there seems to be no probability of doubt be applied to small vessels a very frequent adoption of the plan with a considerable degree of success.

BOSTON, TUESDAY, FEBRUARY 2, 1830.

BURNS.

THESE accidents, to which we are liable at all times, are especially likely to occur during the present season; and as their immediate effects are exceedingly distressing to the patient, and alarming to friends, their nature and treatment deserve attentive consideration.

The character of a burn is modified by the part which is affected, the mode in which it is produced, and the age and circumstances of the patient. Generally, however, burns may be divided into three classes, formed with reference to the severity of the injury. In the mildest cases, an erythematous inflammation of the skin is produced, which is not necessarily followed by vesication; in the second class, a greater or less separation of the cuticle occurs; and in the third, or severest description of cases, there takes place more or less destruction of the cutis and subjacent cellular membrane, and consequent sloughing. The first kind of case is of course the most frequent; it presents that degree of inflammation which follows immediately on the application of the burning substance. Thus a child seizes with his hand a heated substance, without knowing or remembering the consequence, or in ignorance of the state in which the substance touched is at the time.

As soon as pain is felt, the grasp is loosened and the hand withdrawn; in these and in similar circumstances, it will most frequently happen that the accident falls within the first class of cases. The surface becomes red and gives a peculiar burning sensation, accompanied with exquisite pain. In cases of this kind, so far as the ultimate recovery is concerned, the treatment employed is a matter of little moment. Without any treatment whatever, the part will gradually recover and return to its previous state. To the patient, however, it is not matter of indifference whether the agonizing pain which he endures is relieved immediately, nor whether it continues for three or six or twelve hours; and therefore the speediest means of relieving pain must be the means adopted. Two modes of treatment, diametrically opposite in their character, have been advocated by men of science, and the same conflict of opinion has naturally enough extended itself to the public. Both the learned and the unlearned, on this point, are divided between fire and water, between heat and cold. The idea that the fire may be drawn out by the sympathetic influence of external heat, has come down from the most ancient times, even from the days of Hippocrates himself; and in conformity with this notion, the un-

happy sufferer is often compelled to expose his tortured limb to a blazing fire, until its sensibility is exhausted by continual suffering. On the other hand, the mode naturally suggested by the feelings of the part is to plunge it in cold water, or even to cover it with ice. The sensation produced by these applications is that of instantaneous relief, which continues as long as it is steadily continued. A cure however by this mode of treatment requires many hours for its completion; the application of water during so great a length of time is very inconvenient, and that of ice dangerous to the vitality of the part. A much more convenient article for permanent application is prepared from the potatoe by scraping; it may be allowed to remain on the part, and though the sensation it gives is by no means cool, it yet lessens the burning heat in a considerable degree. One circumstance by which the nature of applications should be regulated, is the relation of the surface to important internal organs. Where the burned surface is that of the chest or abdomen, cold applications are attended with some hazard of causing a transfer of disease to the viscera of the cavities; and where the surface is extensive, such applications to these parts are certainly to be discouraged.

In the second class of cases, or those in which vesication occurs at a greater or less interval, the want of uniformity in the actual treatment is scarcely less remarkable than in the former. The accidents which are followed by burns of this class

are, beside those which have been mentioned in the first, that of actually falling into the fire, from which the individual can scarcely be rescued without having suffered sufficient injury to produce this effect, and that of scalding with boiling water. In these cases, as we have said, a great diversity of practice prevails; some writers having recommended stimulating applications to be employed, and particularly the oil of turpentine; while a more general preference is given to those of a soothing character. Of the latter class may be mentioned cotton, and the saponaceous wash, composed of lime water, oil and lard, in various proportions. The common quality possessed by these applications, and that to which they probably owe a considerable share of their efficacy, is that of protecting the part from the agency of atmospheric air. It may be remarked, however, with respect to surfaces blistered by heat, that the loosened cuticle should be allowed to remain on as long as possible, as the best possible covering to the inflamed cutis. Even the fluid effused between may be suffered to remain until it produces pain by distending the parts; when it should be drawn off by a small puncture. Whether the opening is natural or otherwise, it should be covered by some of the applications already mentioned, of which the liniment alluded to is perhaps the best. An occasion on which this rule is apt to be carelessly or wilfully violated, is that of a scald occurring beneath a close covering of woollen or cotton, as in the foot or leg. An injury of

this kind may be materially aggravated by an injudicious manner of removing the stocking. It should be taken off, if possible, in such a manner as to leave the cuticle unbroken. Where great care is taken, this may sometimes be effected, and much subsequent suffering may, by this precaution, be prevented. The dressings applied to the denuded surface should be allowed to remain untouched, until the discharge accumulated beneath them becomes injurious, and renders a change necessary.

The last and most severe description of these injuries, is where the cutis is destroyed to a greater or less extent, and this destruction is followed by sloughing. Burns of this kind are produced when the individual, from any cause, is incapable of escaping from the cause of injury, so that its application is continued for a considerable time. This may happen when a child who is not watched falls into the fire, or when the same accident happens to an adult in a fit, or in a state of intoxication. It may also occur during a conflagration, when the sufferer is not able immediately to escape the flames. One circumstance which is peculiar in these cases, and which it is important to consider, is the extreme prostration by which they are followed, and which requires the seasonable exhibition of stimulants to prevent utter exhaustion. With regard to the local applications,—as this species is always complicated with the preceding one, and the limits of the two are not at first very definite,—it is convenient to make the incipient treatment the same for both. At a

subsequent period, the separation of the destroyed part must be aided by poultices, and the ulcers treated upon general principles.

ERGOT OF MAIZE.

In a memoir read to the Royal Academy of Sciences in France, Dr. Roullin has presented some interesting facts respecting the ergot of Indian corn. The appearance of this ergot is probably familiar to most of our readers. It is not long, like that of rye, but pear-shaped, of a livid color, and without smell. The disease rapidly spreads among many neighboring plantations. The effect of this ergot when taken into the stomach for a period of time, is a loss of hair, and sometimes looseness of the teeth; but gangrene is never produced by it.—Swine who eat corn affected with this disease, lose their hair: the hind legs become subsequently debilitated and emaciated, and scarcely capable of supporting the body. The quality of the pork of swine killed whilst laboring under these consequences, is said to be unaffected by them. Other animals are affected by this food in the same manner, and the fact that hens who feed upon it lay their eggs without shells, seems to show that some of its effects on the animal economy resemble those of the ergot of rye.

Bark of the Willow.—M. Magendie announced to the same Academy, that two vegetable alkalis had been discovered in the bark of the willow, which resemble in all their qualities the quinia and cinchonia. The distinguished chemists Gay Lussac and Theuard were directed to examine the subject, and report their results to the Academy.

Sulphate of Quinine.—This substance is supposed, by Dr. Harty, of London, to aid the preparations of mercury in producing salivation. He relates several instances in which

salivation, nearly ended, was greatly increased by the administration of this medicine alone. If this be the fact, it is matter of great practical importance, since the preparations of bark are commonly resorted to, though in vain, to cure excessive salivation.

Strychnine.—A case of hemiplegia entirely cured by this medicine is related in the last Midland Reporter. One sixth of a grain was given three times a day, and the head was blistered at the same time.

Prevention of Sore Nipples.—A foreign journalist recommends the use, during the last month of pregnancy, of a mixture of six drachms of olive oil and one of spirits of turpentine, as a wash to prevent sore nipples. We have always accomplished this desirable object by a wash of cold water.

Dr. Spooner on Weaning.—This valuable paper, which appeared in the last number of our Journal, was unfortunately printed without the aid of a revised proof, and several typo-

graphical errors occurred. As some of these affect the sense of the sentences in which they occur, we will thank the reader to correct with his pen those we designate below. By perusing the article after such correction, he will find in it much of practical value.

Page 786, 1st column, 16th line from bottom, erase "nursed" and write *weaned*. Again, 7 lines above, for "nursing" substitute *weaning*.

Page 788, 1st col., 11th line from bottom, for "recovery" write *weaning*.

Page 789, in the remarks on ass's milk, for "more curd and less cream" write *less curd*.

Page 790, 1st col., 4th line from top, after the word "milk," write *and cream*.

The proof sheet of the paper which contains these errors was sent to Dr. S. for correction, but, by a mistake of the boy, it was taken from his house before he had revised it;—hence occurred these important misprints.

A rare and interesting case by Dr. STORER, is acknowledged, and will appear next week.

WEEKLY REPORT OF DEATHS IN BOSTON, ENDING JANUARY 21.

Date.	Sex.	Age	Disease.	Date.	Sex.	Age.	Disease.
Jan. 10.	F.	18 yrs	pleurisy		M.	21 mo	lung fever
12.	M.	30	consumption		F.	3½ yrs	consumption
13.	M.	5 mo	dropsy in the head			1 d	
	F.	42 yrs	cancer		F.	12 mo	
	M.	44	consumption		F.	29 yrs	consumption
14.	F.	23	do.		M.	32	
	M.	77	inflammation in the bowels	20.	M.	29	brain fever
16.	F.	14 mo	croup		M.	5 mo	lung fever
	M.	58 yrs	suicide		F.	5 1-2 y	measles
	M.	31	do.		M.	9 mo	do.
	F.	2	croup		M.	46 yrs	inflammatory fever
17.	F.	45	inflammation on the lungs		M.	10 w	lung fever
	F.	3 1-2	croup		F.	22 yrs	consumption
18.	F.	13 mo	lung fever	21.	M.	2	croup
	F.	32 yrs	unknown		F.	3	dropsy on the brain
	F.	9	lung fever	22.	F.	11 mo	hooping cough
	F.	18	consumption		F.	5 w	
19.	F.	35	do.		M.	23 yrs	paralytic
	M.	81	old age		F.	32	consumption
	M.	5	consumption	23.	F.	70	old age

Males, 17,—Females, 23. Total, 40.

ADVERTISEMENTS.

NEW MEDICAL BOOKS.

JUST published, and for sale, by CARTER & HENDEE,—Malaria; an Essay on the Production and Propagation of this Poison. By JOHN McCULLOCH, M.D. F.R.S., &c. &c.

An Essay on the Diseases of the Internal Ear. By I. A. SAISSY, M.D. Translated from the French, by NATHAN R. SMITH, M.D., Professor of Surgery in the University of Maryland; with a Supplement on Diseases of the External Ear, by the Translator.

Observations on the Utility and Administration of Purgative Medicines, in several Diseases. By JAMES HAMILTON, M.D., Fellow of the Royal College of Physicians, &c. &c. From the Fifth Edinburgh Edition.

A Treatise on Pathological Anatomy. By WILLIAM E. HORNER, M.D., Adjunct Professor of Anatomy in the University of Pennsylvania, Surgeon at the Infirmary of the Philadelphia Almshouse, Member of the American Philosophical Society, &c.

Elements of Operative Surgery. Translated from the French of A. TAVERNIER, Doctor of Medicine of the Faculty of Paris, &c., with copious Notes and Additions. By S. D. GROSS, M.D.

A Treatise on the Nature, Cause and Treatment of Contagious Typhus. From the German of J. VAL DE HILDENBRAND, Imperial and Royal Counsellor, Professor of the Practice of Medicine in the University of Vienna, &c. &c. By S. D. GROSS, M.D.

An Essay on the Morbid Sensibility of the Stomach and Bowels. By JAMES JOHNSON, M.D.

Examinations in Anatomy, Physiology, Practice of Physic, Surgery, Chemistry, Materia Medica, and Pharmacy. For the Use of Students. By ROBERT HOOPER, M.D. Dec. 22.

MEDICAL SCHOOL OF MAINE.

THE MEDICAL LECTURES at BOWDOIN COLLEGE will commence on TUESDAY, February 23, 1830. Theory and Practice of Physic, by JOHN DELAMATTER, M.D.
Anatomy and Surgery, by J. D. WELLS, M.D.
Midwifery, by JAMES MCKEEN, M.D.

Chemistry and Materia Medica, by P. CLEVELAND, M.D.

The ANATOMICAL CABINET is extensive, and very valuable.

The LIBRARY; already one of the best Medical Libraries in the United States, continues to be every year enriched by New Works, both foreign and domestic.

Every person becoming a member of this Institution, is required to present satisfactory evidence that he possesses a good moral character.

The amount of fees for admission to all the Lectures is \$50. Graduating fee, including diploma, \$10. There is no matriculating fee. The Lectures continue three months.

Degrees are conferred at the close of the Lecture term in May, and at the following Commencement of the College in September. A systematic course of instruction, embracing Recitations in all the branches of Medical Science, Demonstrations, and Lectures, will be given by the Professors, during the interval between the annual courses of Lectures.

Boarding may be obtained in the Commons Hall at a very reasonable price.

Brunswick, Dec. 4, 1829.

Dec. 15.—4teop.

DEWEES' PRACTICE.

JUST published and for sale by CARTER & HENDEE, A PRACTICE OF PHYSIC, comprising most of the Diseases not treated of in "Diseases of Females" and "Diseases of Children." By William B. Dewees, M.D., Adjunct Professor of Midwifery in the University of Pennsylvania, etc. etc.

"We live in an age in which the fear of debility causes a prodigal use of stimulants; and this too often at the expense of the health and the life of the patient."—*Broussais Phleg. Chron. Vol. 2, p. 82.*

"Had I dared to bleed freely, and especially by means of leeches, the patient might have been saved; but I was afraid of debility. But who is to blame?"

Feb. 2.

AN ENGRAVING,

REPRESENTING the Perfect and Imperfect Cow Pox and the Chicken Pox, during their course, by J. D. Fisher, M.D. This day published and for sale by CARTER & HENDEE, cor. of Washington and School sts. Price 62 1-2 cts.

Jan 26.

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

I.

CASES ILLUSTRATING THE METASTASIS OF DISEASE.

Case 1st.—Gonorrhœa alternating with Bilious Remittent Fever.

By LEWIS CAMPBELL, M.D., of Moulton, Alabama.

ON the 23d of July, 1827, I was called by Mr. ———, who had been affected with gonorrhœa three years since ; and as he had been obliged to ride some distance every day on business, the symptoms were somewhat aggravated. He suffered greatly from ardor urinæ and chordee. The discharge of matter from the urethra was very profuse, and considerable general excitement was present. His bowels were freely opened with sulphas magnesiæ ; one drachm of balsam of copaiva was directed to be given three times a day, and a low diet enjoined. He obtained sudden relief of the ardor urinæ from this course ; but a profuse discharge of matter, and the retraction of the urethra, remained. His business calling him from home, he was under the necessity of riding some distance every day till the 26th, when he was attacked with a bilious remittent fever. During the evening he felt languid, sick at the stomach, &c. At eight in the evening he was attacked with a violent chill, followed by fever. During the chill the go-

norrhœal discharge was suddenly suppressed. On the morning of the 27th I found him entirely free from all the symptoms of gonorrhœa. He assured me he felt no inconvenience from that source.

The fever continued till the 30th. During this time he enjoyed entire exemption from the gonorrhœal symptoms. On the 30th, his general health being much improved since the preceding day, he escaped fever, but was again attacked with gonorrhœa and chordee. He was again put under treatment for those affections. His general health continued to improve till the 2d of August, when from exposing himself to the sun on a short ride in the heat of the day, the bilious symptoms returned ; and he then had chills and fever two days in succession. During the first chill the running was again suppressed ; and he was completely relieved from any uneasiness in the urethra during the continuance of the febrile symptoms. On the 4th he experienced exemption from fever and a return of gonorrhœa. His general health continued to improve from this period, though the affections of the urethra proved somewhat lingering. His stomach rejected the balsam in any form, and scarcely tolerated the presence of any medicinal substance whatever. Regimen and time effected a cure. Was the suppression of the gonorrhœa during the

fever, and its immediate return when the fever yielded, a mere coincidence? Or was it a metastasis of morbid action from the urethra to the stomach, and from the stomach to the urethra? If the latter, does it not favor the opinion of the physiological school relative to the non-specific nature of venereal affections?

Case 2d.—Croup, followed by Colic, Convulsions and Inflammation, and terminating favorably.

By F. R. GREGORY, M.D., of Lombardy Grove, Virginia.

I was called, some time last winter, to see an infant son of Mr. G. about three months old, laboring under a most violent catarrh, with some premonitory symptoms of croup. By the use of emetics, warm bath, a dose or two of oil, and the substitution of barley water for its usual diet, the catarrh and every symptom of croup were relieved. I left the child now convalescent, and was called the next day to see it with an attack of the colic, which for four or five hours resisted every means I could employ for its relief. I gave several doses of oil of butter and castor oil, laudanum, as well as Hoffman's anodyne, injections of barley water, and oil of butter and molasses combined; placed my patient in the warm bath, and applied blankets wrung out of hot water after taking him out. After persevering for some time in the above means, my little patient was relieved. On the next day he was again attacked with colic. I now inquired more particularly as to the cause of this second attack of colic, and learnt from the mother and nurse that the child had eaten nothing but cow's milk diluted, as

I had prohibited its mother's milk as diet, she being an unhealthy woman. Fearing that there might be some inflammation of the stomach and bowels, I examined the abdomen &c., but found that there was no tenderness on pressure, no fever, and no appearance of the tongue indicating such a state. It frequently occurs in our southern states, that the torpid and inactive state of the liver is the cause of frequent attacks of colic. Conceiving that such might be the case in the present instance, I commenced the treatment of this attack with a teaspoonful of oil and one grain of calomel combined; the medicine not operating sufficiently early, I gave an injection of barley water, and repeated it several times. The oil and calomel now operated pretty well, and produced two copious stools, the discharges resembling the curd of milk. Still the excruciating pain, evinced by rubbing the gums together, mournful cry and great restlessness, continued, and was at last followed by convulsions. I now placed the child in a warm bath, and after taking him out, applied the blankets as before; this afforded some relief. In about fifteen minutes after the blankets were removed, another convulsion came on; bath and blankets as before; convulsions went off; still no relief of the pain; gave five drops of laudanum, and repeated it twice in about twenty minutes; repeated the bath and applied the blankets as before. I was determined to continue their application till the pain was relieved; but in about twenty minutes my little patient seemed free from suffering. I now left the child, hoping he would continue to mend, but fearing the consequences of the laudanum he

had taken. On my visit the next day, I found him extremely ill, with inflammation of the stomach and bowels. Leeches could not be procured, and I was afraid to bleed from the arm; ordered injections of barley water, to be repeated five or six times during the day, and a teaspoonful of the oil of butter three times a day; barley water as diet. The child continued extremely ill for twenty-four hours, and I feared that the case would certainly prove fatal; his pulse had become almost imperceptible; there was squinting of one eye, pouting of the lips, &c. I now applied a blister over the whole abdomen, which remained on for hours without producing the least pain. This, with the other alarming symptoms, caused me to despair, and taking off the blister, I found the surface underneath unchanged. In a short time I again examined the part from which the blister had been removed, and found it red; vesicles soon appeared, reaction took place in the circulation, and the child seemed free from pain. I continued to give nothing but barley water as diet and medicine by the mouth, and ordered injections of it to be repeated four or five times a day. My suffering little patient continued to improve, and seemed perfectly well, with the exception of a hoarse dry cough, which was relieved by a watery solution of asafœtida.

I am aware that many will object to the management of the attack of colic, and will attribute the inflammation of the stomach and bowels to the large doses of laudanum and Hoffman's anodyne. Yet the milder plan had been pursued and had failed. In the management of both attacks of colic,

I commenced with laxatives and injections, and these failing, my practice was bolder and more energetic. It is my rule never to suffer a patient to die of a disease which I have a remedy to relieve, from the fear of the consequences of that remedy. The situation of a patient under such circumstances is like that of a man in the third story of a house on fire, when every engine has poured forth its water in vain, and the flames continue to advance and spread on every side. If he remains and trusts to the engines to subdue the flames, death is more certain than from injury which he may sustain by leaping from a window; and what Broussaist is there that would not say to a man so situated, jump!—*N. A. Med. and Surg. Journal.*

II.

STATISTICAL VIEW OF THE FOUNDLING HOSPITAL AT PARIS.

WE have translated the following article from a recent French journal. Though the statements it contains are somewhat too general in their character, they are still highly interesting in many points of view: they exhibit, in a very forcible manner, the influence of judicious management in the preservation of life, during the period of infancy.

From 1806 to 1828, the number of infants abandoned by their parents in Paris, was increased from 4238 to 5947 annually. With a few irregularities, for which it is not easy to account, the increase has been progressive; and, during later years, it has evidently been in proportion to the increase of population. The scarcity which prevailed in 1811, 1812, 1816

and 1817, occasioned the number of foundlings, during these four years, to be much greater than at any other period.

Previous to the year 1814, the mortality among these infants varied from 400 to 700 per annum; in 1814 it arose to 1000, and subsequently to 1300, 1400, 1500, and even 1600 each year. The causes of this mortality are easily explained. A great number of the infants brought to the hospital are feeble, or labor under some infirmity or disease. Formerly, with few exceptions, they were sent into the country to be nursed. The majority of them, not being in a condition to bear the journey, perished on the road, or in a few days after their arrival at the dwelling of the nurse. Hence the number that died in the hospital was inconsiderable.

Since, however, the management of the hospital has been confided (in 1814) to the *Sisters of Charity*, such infants as are feeble or diseased have been retained there, and properly nursed, until they were in a condition to support the fatigue of the journey. But while by this means many lives are saved, the mortality at the hospital has been necessarily increased, and, on the contrary, it has been considerably diminished among those placed at nurse.

The number of the latter, in 1812, was 4754 out of 5394 infants received at the hospital; while, in 1828, it was only 4022 out of 5497: that is to say, a proportionably less number by 840.

Following this comparison, we find that in 1812 there died, of the whole number at the hospital, 622; those at nurse were 3267, making a total of 3889; while in 1828,

the number of deaths at the former was 1444, and the number in the country only 2837,—in all, 4281.

The number of infants remaining alive at the end of each year has augmented annually: at the end of 1806 it was 5855, and it increased progressively, to the end of 1817, to 11,927. At the termination of 1818 it was 11,600, which was the period when the shameful abuses in the management of the institution were first detected. Under the reformed system, the number remaining annually was augmented, in 1820, to 12,333; in 1821, to 12,716; and since the complete reorganization of all the departments, the number remaining has increased successively, in 1822, to 12,962; in 1823, to 13,630; in 1824, to 14,152; and finally, in 1826, to 15,946.

This increase is not to be attributed merely to the greater number of infants abandoned by their parents each year, but especially to the greater number of lives preserved by the more judicious manner in which the institution is conducted. We may instance the care which is taken to have each infant properly vaccinated, soon after its reception; the daily inspection and superintendence exercised by the present overseers, with the assistance of the physicians; a better choice of nurses; the regular payment of the wages of the latter, in consequence of which they are enabled to pay more attention to the comforts of the infants placed in their charge; and generally, the very excellent regulations to which every department of the institution is now submitted.—*Journal of Health.*

III.

PORTION OF BONE LODGED FOR FORTY-EIGHT DAYS IN THE TRACHEA OF AN INFANT.

By THOMAS STABB, M.R.C.S. &c.

On the 20th Sept. last, S. H. S. aged ten months, playing with a bone of a neck of mutton, which the nurse gave her whilst at dinner, put it into her mouth and detached a small portion, about the size of a large marrow-fat pea, which slipped into her windpipe, and produced violent coughing and irritation for about five minutes, when it ceased, leaving a noise in breathing like that produced by a saw. In the course of twenty-four hours, great difficulty of breathing, with constitutional irritation and cough, came on, which was subdued by the usual remedies. The same saw-like noise of breathing and some cough continued, but did not appear to give pain after the fourth day, the child's health and spirits after that time appearing as good as usual, except this constant wheezing.

On the 3d of November, upwards of six weeks after the accident, in consequence of a cold she took from going out into the air, violent irritation in the trachea, with cough, returned. A solution of tartarized antimony was given, and on the 7th, after a dose which produced vomiting and general relaxation, and whilst the nurse was briskly rubbing her throat with a volatile embrocation, the head being bent back over her lap, she was seized with a violent fit of coughing, and threw up the piece of bone, embedded in mucus, which had been retained forty-eight days in the

trachea. Her breathing almost immediately became natural, and the next day she was as well as ever. The piece of bone was very rough, of a triangular shape, the edges quite sharp.—*London Med. Gazette.*

IV.

BOSTON SOCIETY FOR MEDICAL IMPROVEMENT.

*Case of Cerebral Disorganization.
Read to the Society by*

D. HUMPHREYS STORER, M.D.

On the afternoon of the 7th inst., I was called upon to visit the child of a laborer in Pleasant Street. The child, a boy four years and eight months old, had been sick from its birth: but the present difficulty was an incessant coughing, which the mother assured me had existed for at least three hours, without any interval, save a moment's cessation, from apparent exhaustion. To allay this symptom then was my object; which, when my next visit was made, at ten o'clock in the evening, I had the satisfaction of finding was accomplished. The *debility* of the child was so great, I feared it could not survive through the night. It died at five o'clock in the morning.

The following history of the case, together with the post-mortem examination, may not be thought altogether devoid of interest by this Society.

The second and third nights after the birth of the child, its parents were rendered anxious by its restlessness, shown by constant, irregular motions of limbs and frequent startings, as if in pain;—these, however, were re-

moved, by removal of meconium. —When about three months old, each time it awoke, a slight spasmodic affection appeared, which existed about five minutes. This symptom continued until it was weaned, which took place when it was *two years and a half old*. The mother tells me her child was a fine healthy-looking babe, and until within a year, was as large as children generally of its age;—it however *always* had a motion of the head from side to side, and an inability to support it in an erect position. It was (to use the expression of the mother) “extremely backward” in nursing, never taking the breast unless the nipple was put into its mouth. The bowels, before it was weaned, were in a pretty good state; they were opened several times weekly, and the discharges were not unnatural in their appearance. The child taking an aversion to the breast,—when, as I said before, it was two years and a half old,—which the mother could not overcome, was fed with milk and a small quantity of the softest and lightest bread. Its discharges from the bowels now became peculiar in their character, the feces passing but once in the week, and then in the form of irregular balls, hard, dry, and of a dark color. This state of the bowels continued till its death. Its discharges were, during its *whole life*, involuntary; or it gave no intimation of a desire to have an evacuation, never having spoken, except a *restlessness*, which upon these occasions was seldom absent. This *restlessness* would sometimes continue *two days* previous to an evacuation; and the mother thinks, during these periods, its sufferings

were great. *Urine*, like the feces, passed involuntarily, and imparted a color, resembling *burned coffee*, to all articles it touched.

After the child was weaned, the *spasms* with which it awoke disappeared, and violent convulsions of the whole body, as if from fright, frequently appeared, without any apparent *immediate* derangement of the stomach. The convulsions became more frequent, as well as more powerful, as it grew older;—the left foot and right hand were distorted by these convulsive efforts, and turned outwards. Until a short time previous to its decease, its usual quantity of food was from one quart to three pints of milk, and a small quantity of bread, daily. The *teeth* appeared at the usual time, but in a very short period would decay.

The senses were extremely defective, with the exception of *hearing*. The eyes, although apparently bright, were never known to be fixed upon any object for an instant, although the father had repeatedly endeavored to attract the attention of the child to some one point. The pupil of the eye was not affected by light. The mother thinks her child could distinguish neither the different odors of different substances, nor the peculiarities of taste. The sense of *hearing*, however, appears to have been unusually acute. The two first years of life, the child slept both forenoon and afternoon; but after that time, it slept only during the night, as if prevented by noises about it;—but the following anecdote proves that the sense of hearing was present and powerful:—About two years since, the father, after having returned from the labors of the day,

took his violin to amuse himself. The moment he began to touch its strings, this little unfortunate being appeared to be in extacies: its countenance brightened with a smile, and it seemed to be struggling to express its delight. When its father stopped to arrange the chords of the instrument, it as suddenly stopped its movements; and when, after continuing an hour in this state, it ceased with the music, the system was apparently almost exhausted with the effort.

About a year since, this child, without any premonition, was seized with an attack of coughing, which continued a whole afternoon, and left it very feeble. Soon after, it was attacked with canker in the bowels, from which it was not entirely freed for a fortnight. It never recovered its wonted state of health, but began to lose flesh immediately, and continued to fail until it died,—an object of extreme emaciation.

Post-mortem Examination.

Dr. Hale assisted me in the examination of the body after death. The *larynx* being opened, we found not only much *redness* of the mucous membrane, but a considerable quantity of purulent matter was observed. This appearance of the *larynx*, was a satisfactory cause of death, when the previous debility of the patient was considered: but, anxious to ascertain the causes of those derangements which had been perceived for so long a time in the system, the examination was continued. The *lungs* and *heart* presented no unusual appearances. The peritoneum was unusually tense, and completely undetached from the muscles

above it. The stomach was very much distended with flatus, and contained three or four ounces of a dark-colored fluid. *Small intestines* extremely contracted in their appearance, and entirely empty. The *large intestines* were much distended in some points, and as unusually contracted in others. The rectum contained several small balls of hardened feces, of a similar character to those above described. All the intestines presented this peculiarity,—an uncommon degree of *transparency*, and an *uniform absence of color*. The mesenteric vessels, however, were finely injected: the *glands* of the mesentery seemed slightly enlarged. The bladder was not opened, as the peculiarity of the color of the urine, was not learned until after the examination.

In removing the integuments from the *CRANIUM*, we were struck with their slight adhesions to it, or rather with the great flaccidity, which enabled us to remove them without inconvenience. The *dura mater* adhered with much firmness to the cranium throughout its whole extent. In removing the cranium, several ounces of water were lost. The vessels of the *pia mater* were crowded with blood. The posterior lobe of the right hemisphere of the cerebrum, exhibited the peculiar appearance you may now perceive,—*a considerable loss of substance*. [Dr. S. here exhibited the right hemisphere of the brain, in the posterior lobe of which was a cavity about the size of an English walnut. Across this cavity was stretched a thick membrane, through which the Doctor had made an incision.] The vessels

of the membrane covering this part were extremely injected with blood, giving the whole a florid color; and the membrane enclosed within it a considerable quantity of coagulable lymph. The medullary portion of the *left ventricle*, when cut into, presented innumerable red points. The ventricles were filled with a fluid, which in a few moments coagulated. The surface of the cerebellum presented the same appearance as that of the cerebrum.

The *nerves* presented this peculiar appearance;—their surfaces were covered with small vessels much injected, giving a reticulated appearance. The vessels accompanying the nerves were also greatly injected. The medulla oblongata seemed much contracted, and the nerves arising from it presented the same peculiar appearance as those at the base of the cerebrum.

Boston, Jan. 1830.

SKETCHES OF PERIODICAL LITERATURE.

MEDICAL RESPONSIBILITY.

WE remarked, in one of our late numbers, on the cruelty and injustice of making medical men answerable, in civil or criminal courts, for the success of their practice, or the correctness of their diagnoses. We then noticed that this odious feature of legislation is not peculiar to our own country, and we now see, with some surprise, that the same principle is inculcated in a court of justice in France, as recognised by her laws. To explain the proceedings alluded to, we translate four articles from the published codes of that country, which have been made to bear upon the interests of the medical profession.

Code Civil. Act 1382.—Every act of a man by which injury is occasioned to another, obliges him through whose fault the injury has happened to repair it.

1383.—Each one is responsible for the damage he has occasioned, not only by his act, but also by his negligence or his imprudence.

Code penal. Act 319.—Whoever, by want of skill, imprudence, inattention, negligence, or violation of rules, shall have involuntarily committed a homicide, or have been involuntarily the cause of one, shall be punished by imprisonment from three months to two years, and a fine of fifty to six hundred francs.

320.—If, from this want of dexterity or caution, have resulted only wounds or other injuries, the imprisonment shall be from six days to two months, and the fine from sixteen to an hundred francs.

The question how far the responsibility here recognised was applicable to medical men in the discharge of their profession, has been made the subject of considerable discussion abroad. It does not appear that any prosecution against medical men took place under these acts until recently; and as the individual accused was acquitted of mal-practice, the question of the applicability of the law itself to medical men, is yet

undetermined. In a pamphlet published at Paris by M. Reynault, Advocate at the Cour Royale, this applicability is maintained as respects the articles of the civil code, while that of the others is admitted to be doubtful or untenable. On the other hand, it is asserted, with more show of reason, that these provisions all stand upon the same ground. In truth, the idea of any such liability is utterly at variance with every principle of justice. If the medical man is to be answerable in damages for the result of his practice, who is there, with anything to lose, that will incur such a hazard? No one surely will risk his fortune in a series of speculations, where he has continually the chance of utter ruin on the one hand, with nothing to counterbalance it but the chance of a fee. If it is answered that ill success and mal-practice are not identical,—how, we ask, is the distinction to be made? Are men out of the profession to be constituted the judges of the correctness of medical treatment? Even if reference is had to individuals in the profession, they cannot be supposed capable of estimating fairly the circumstances under which the defendant acted. Besides, some may be prejudiced against particular modes of practice, though perfectly justifiable in themselves, and others attached to the dogmas of a particular sect or school. There would, in fine, be but one criterion, and that the criterion of success. If this ground was taken, every case would be condemned; if not, all would be acquitted. It may be said that there are instances of such gross mal-

practice, that all would join in imputing them to stupidity or ignorance. Even such instances, however, are not subjects for legal cognisance, or offences deserving fine or imprisonment. The good intention of the offender,—his intention of conferring benefit and not inflicting injury,—ought to shield him from these; and the disgrace which public opinion visits on him will be more than sufficient, without adding to it the loss of his hard-earned fortune, or the incarceration of his person.

ADULTERATION OF MILK.

WE have abridged, for the entertainment of our readers, an account of some curious researches into the method of detecting this species of fraud, made by a Mr. Barruel, in Paris. It will serve to show that, Mr. Accum to the contrary notwithstanding, the French are not materially behind their English neighbors in the art of poisoning their customers.

As milk is sold very high in Paris, it has been a great object to the venders to reduce its quality. For this purpose, they have employed water, obviating the diminution of flavor by adding sugar, and the change of color by moistened wheat flour. To prevent the deposition of the flour, which usually took place in about two hours, they previously boiled the mixture, which process enabled it to remain longer suspended. But the discovery of iodine, by furnishing the means of detecting the minutest quantities of starch, again foiled their hopes. A substance was

then to be sought which was capable of increasing the quantity without changing the color of milk, and the presence of which could not be detected by chemical agents. For this purpose, most of them have employed an emulsion of sweet almonds; while some, less scrupulous, have prepared a substance from the seeds of hemp.

The ingredient of milk which is known to maintain its proportion to the whole with the greatest uniformity, is the curd. It was therefore thought that to determine the fact and amount of adulteration, the proportion of this article would serve as a guide. To ascertain the truth of this supposition, four different specimens of milk said to be pure, and one *known* to be so, were treated with vinegar, with the aid of heat, and the curd carefully and thoroughly separated. The weight of this ingredient was, with little variation in any of the cases, one tenth of the whole weight of milk analysed. To equal quantities of pure milk, were then added certain definite proportions of water; the analysis was repeated with these, and the curd obtained was still one tenth of the pure milk contained in the mixture. The inference then was, that where pure milk has been weakened by water, the amount of the adulteration can be ascertained by very simple means, and with great exactness.

The next question was, how to obtain, from milk adulterated with water, the quantity of sugar which had been added to restore its taste. For this purpose, the last experiment was repeated, after having added to

the milk and water a small quantity of sugar. The amount of curd obtained was the same as before. The serum or whey being evaporated to the consistence of an extract, treated with boiling alcohol, filtered, and again evaporated, yielded the sugar which had been added in a separate state.

It then remained to discover another alteration of milk, namely, that which resulted from the emulsion of almonds. For this purpose, equal parts of milk and emulsion were mixed, the compound liquid coagulated, and the curd carefully removed. Its proportion to the pure milk was a little more than one tenth. Another mixture being made with one part of milk to two of emulsion, the milk furnished one tenth of its weight in curd.

Finally, a mixture resembling the last, to which a small quantity of sugar had been added, after having separated the serum by coagulation, was evaporated to the consistence of an extract. By treating this extract with boiling alcohol, it was found that the saccharine matter might easily be removed.

The curd obtained from the mixture of milk and emulsion may also be distinguished from that of pure milk by the following circumstance:—If left on the surface of white paper from one to two days, it communicates to it a greasy stain; whereas the curd from pure milk produces no such effect.

The ingenious author of this memoir concludes by recommending to the consideration of the public authorities the propriety of commis-

sioning three or four *pharmaciens*, for the different quarters of the city, with authority to examine the liquids offered for sale as milk whenever they might see fit. That such a system of inspection would there be attended with good effects, is by no means unlikely. Here we should probably find few *pharmaciens* willing to undertake so thankless and serious a responsibility, and fewer *laitéurs* willing to submit to it. Fortunately, the demand for such a surveillance with us is very small. Our milk, when adulterated at all, is generally mingled with pure pump water; and the mixture is neither very injurious to the health in its effects, or very embarrassing to the observer who seeks to detect its composition. We do not indeed believe that this species of fraud is very frequently practised, even on the poorest classes. We have as often had occasion to observe that the milk furnished to the poor was of excellent appearance and taste, as we have to suspect its deficiency; and we trust the good principles of our milk-dealers as effectually forbid their engaging in this nefarious traffic, as their general prosperity and success place them beyond the temptation.

STRABISMUS.

DR. ROSSI, of Turin, thinks that this defect of vision, when it is congenital, is owing to the form of the orbit, the axis of which, instead of being perpendicular to the face, forms with it an acute angle. He accounts, upon this theory, for the fact, that congenital strabismus is often spontaneously cured as the parts increase

by growth and acquire new proportions. Dr. R. has invented a kind of glasses which he thinks calculated to remedy this disease, when arising from other causes than the one just alluded to. The glass intended for the affected eye is rendered opaque by covering it with a black pigment. Two orifices are then made through it, one perpendicular to its surfaces, and the other crossing and bisecting the first, but at such an angle that its direction is parallel to the usual axis of vision of the distorted eye. The second perforation is not cylindrical, but diminishing towards the eye, and enlarging externally. The glasses are, of course, plane. The effect of this arrangement is readily conceived. The direct perforation affords a sufficient means to the eye of seeing objects in front, so that the utility of the organ is not diminished. The other forms a tube which, enlarging and becoming lighter toward its external part, attracts the notice of the eye, the axis of which is thus directed in a line the reverse of that of its usual diseased vision. The effect thus produced is continued until the morbid habit is overcome, and the eye is enabled to resume its appropriate functions.

PROTRACTED UTERO-GESTATION.

UNEQUIVOCAL proofs exist that the period of gestation has been prolonged for several weeks beyond the period usually assigned to it. From the many cases which have been adduced in evidence of this, we select the two following, which are not so remarkable for the amount of time by which the period was ex-

ceeded, as for having been accompanied by circumstances which determined exactly the time of impregnation. The cases are taken from the minutes of a meeting of the Westminster Medical Society, reported in the London Medical Gazette. The first occurred to Professor Desormeaux, of the University of Paris, who states it as follows :—

A lady, the mother of three children, became insane. Her physician considered that childbearing might have a beneficial influence on the mental disease, and permitted the husband to visit her, but under condition that it should be only once, and at the distance of three months, in order that, if conception took place, there might not be a chance of abortion, from the circumstance of any further intercourse. The physician and attendants made an exact note of the time when the husband was permitted to visit his lady.

When, at last, symptoms of pregnancy appeared, the visits were absolutely and totally discontinued. The patient was necessarily watched by the female attendants required for her malady, and was, moreover, a lady of the strictest principles of morality. She was delivered, at the termination of nine solar months and a fortnight, of a *small* child, and Professor Desormeaux delivered her.

The other case, which is related by Dr. Dewees, is as follows :—

The husband of a lady was obliged to absent himself from her, in consequence of embarrassment in his affairs. He returned one night clandestinely, and his solitary visit was only known to his wife, her mother, and Dr. Dewees. The consequence of this visit was conception, and the lady was delivered of a healthy child in nine months and thirteen days after that nocturnal visit.

BOSTON, TUESDAY, FEBRUARY 9, 1830.

USES OF THE ERGOT OF RYE.

It is somewhat surprising that the faculty in Great Britain are so much behind us in the knowledge and application of this remedy. They are in fact just beginning to find out its power over the muscular fibres of the uterus, and remain still in uncertainty respecting the proper restrictions under which it should be used ;—an uncertainty which has long since yielded, among physicians in this country, to definite and settled ideas of the good and bad effects it is capable of exerting on the parturient uterus.—In the previous peri-

ods of pregnancy, and in certain diseased actions of this organ, we want much more practical information. Under certain circumstances of menorrhagia, some have thought they have found it curative, whilst others extol its virtues as a remedial agent in amenorrhœa. In uterine hemorrhage, after abortion or in the latter months of pregnancy, some have given it with apparent success, whilst, in the hands of others, it has increased the discharge, and of still others, proved wholly inert. Thus great is the uncertainty existing *everywhere* respecting the entire capabilities of the *secale cornutum*. We

conceive however that, at the present day, no doubt can rest on the mind of any practitioner in this country, that ergot is an invaluable and perfectly safe accelerator of labor, when the presentation is natural, the os uteri fully dilated, the parts soft and in good condition, and the comparative dimensions of the fœtal head and the subpubal outlet such as to promise a natural passage, but the action of the womb is tardy.

Given about the time of the completion of labor, it will in all cases effectually promote the speedy and entire expulsion of the placenta, and with great certainty prevent undue uterine hemorrhage. So well are these facts established, that we should consider it unpardonable in a practitioner to neglect its administration to persons who have previously suffered from that hitherto ungovernable and alarming hemorrhage which immediately precedes or follows the delivery of the secundines. Thus used, the ergot has never done harm.

Given to a female in labor, previous to the stage above specified, or under less favorable prospects of a natural birth, it produces continuous as well as powerful action of the uterus, and will, in the majority of cases, destroy the life of the child, by preventing those timely intervals from cranial compression which nature has so wisely provided.

By such haste in its administration, it is capable of endangering the life of the mother as well as her child, by the effects of the violence done to the parts, and, if the walls of the womb be morbidly attenuated, by causing their laceration.

Thus far we may consider the practical use of ergot thoroughly established and permanently limited; and there are few ways of filling a page in any medical work so uselessly as in recording cases in which these rules have been illustrated;—a kind of illustration sufficiently needed, it appears, in Europe, to find a place in almost every journal we receive. An ample field is still open, however, in the purposes before alluded to, and it becomes the faculty to set forth their experience on the subjects mentioned, with freedom and fullness. For ourselves, we doubt much if this medicine has any power over the *unimpregnated* uterus, if indeed it has any over that organ at all, excepting after the actual commencement of labor. We shall be happy, by well described cases, to have these doubts dissipated; but until such cases appear, we cannot believe our scepticism groundless.

If it be true that a medicine which, at ordinary periods, passes through the body regardless, as it were, of this single organ, does, if given when this organ is in distinguished action, produce a modifying effect on that action,—if the influence of a medicine is drawn to this part by its activity, it becomes an inquiry, whether there are not other articles in our materia medica which might, at such a period, expend their power on this acting organ? This question has never, we believe, been proposed to the profession, and we have scarcely a hope that it may lead to any practical results. It may not be amiss, however, to state one or two facts by which it was originally suggested

to our own mind.—Attending on a female in whom most of the ordinary methods of inducing the uterus to expel the placenta proved unavailing, and desirous of testing the efficacy of different modes of practice, we administered, at the expiration of two days from the delivery of the child, a common dose of castor oil, hoping by its cathartic operation to excite the uterine efforts. In half an hour after giving the dose, and without any dejection from the bowels, the womb took on a vigorous intermittent action, and the secundines came away entire.

A few weeks after, we were called to Mrs. B., in labor. The pains were frequent, but not severe, and had continued so for several hours. Os uteri dilated to nearly the size of a dollar. After waiting an hour with no hope of immediate delivery, the patient was left with the usual directions. The second day the pains were about the same, and at 11 o'clock on the third day no alteration had taken place. For the purpose of stimulating the bowels, a spoonful of castor oil was ordered in a little molasses, and the patient was again left. In about half an hour, without any operation from the oil, the pains became suddenly more powerful and expulsive, but not continuous, and the child was born a little past 12, before we could reach the house.

The idea that in these cases the oil might have been the instrument of the changes described, could not but have glanced across the mind, and a few days after, meeting with a case lingering like the last, it was

administered as before; and it so happened, that in half an hour afterwards the pains became severe. We were sent for in haste, and reached the patient just in time to receive the infant.

These coincidences are related as an apology for suggesting the question above mentioned, and not as evidence that the affirmative of that question may be maintained. It is certainly a subject worthy of investigation, whether there is not in nature some article capable of invigorating the contractions of the uterus, and which does not, at the same time, render these contractions continuous.

THE SIAMESE AND SIR ASTLEY.

THE following is part of the account given by Dr. Reece of the visit paid to these twins by the great Lion of British Surgery, and other distinguished members of the Faculty.

The exhibition in a short time filled our mind with subjects for philosophical reflection; but our attention was soon diverted from it by the most amusing (often ludicrous) questions and observations of the physicians and metaphysicians, who thought themselves entitled to take a lead in the investigation. Some really supposed, that although each has a brain, there is only one sensorium;—that there is a vascular connection between the two hearts by means of the band;—that nutrition is conveyed from one to the other, and consequently that it is only necessary for one to take food. Some were of opinion that a division of the cord in the centre would be attended with no risk; while others considered the band in the light of an umbilical hernia, and consequently that a division would necessarily prove fatal.

When Sir Astley Cooper entered

the room, all crowded around him on tiptoe to hear *his* opinion. Sir Astley, after carefully examining the band, observed that it consisted chiefly of cartilage and skin. Mr. Thomas, the President of the College, with a significant smile, emphatically observed, "I am sure, Sir Astley, *you* would not hesitate to divide the band." Sir Astley smilingly replied, "Indeed I do not say that:—the partnership seems to be going on prosperously, and a dissolution of it would prove ruinous to their trade." After Sir Astley had acted his part, Sir Henry Hallford,* the President of the College, advanced to *look* at the band; but not one person attended him, or seemed desirous to hear *his* opinion. The only physiological observation he made was, that he thought his Majesty would like to see them! Sir Anthony Carlisle gave his opinion that the membrane lining the abdomen (peritoneum) extends through the band, and therefore a division of it would endanger life. Dr. Haslam seemed to contemplate their physiognomical and phrenological characters, and expressed regret that he could not ascertain their mental powers by conversation, in consequence of their being unacquainted either with the English, Greek, Latin, or the Hebrew language. All seemed to view the phenomenon with astonishment. The pleasing docility,—*strong* attachment to each other,—and the power of observation

they evinced on examining the furniture &c. of the room, and the delight they seemed to experience in answering interrogatories, gave such general satisfaction, that all seemed to feel a great interest in their welfare.

IODINE IN DROPSY.

THE effect of this new medicine on the absorbents has been recently demonstrated by its agency in restoring to health a patient laboring under ovarian dropsy. The existence of the disease was proved by the previous evacuation, by paracentesis, of seven quarts of albuminous and purulent fluid. The tincture of iodine was then given, to the extent of thirty-six drops three times a day. The tumefaction rapidly subsided, and the patient was thoroughly cured.—This case is reported by Dr. Thompson, of London, and the disease was of three years standing.—We have given this tincture to a boy, in doses of 120 drops a day for several weeks, with no other effect than a gradual amendment of the general health, and a progressive healing of the scrofulous ulcers, for the cure of which it was prescribed.

Death of Dr. Armstrong.—This distinguished lecturer and medical author recently died at his residence in London. Thus has he been arrested in the prime of life, and in the midst of the most successful professional career.

* Sir Henry is Physician to the King.

WEEKLY REPORT OF DEATHS IN BOSTON, ENDING JANUARY 29.

Date.	Sex.	Age.	Disease.	Date.	Sex.	Age.	Disease.
Jan. 22.	M.	18 mo	lung fever		M.	4 yrs	dropsy in the head
	F.	2 yrs	consumption		F.	27	childbed
23.	M.	2	old age		F.	18	consumption
	M.	4 mo	lung fever	26.	F.	2	measles
	F.	70 yrs	old age	27.	F.	3	unknown
	M.	54	liver complaint		M.	42	disease of the stomach
24.	F.	45	intemperance		M.	56	consumption
	F.	26	apoplexy		F.	35	do.
25.	F.	3	lung fever		F.	3 w	infantile
	M.	29	unknown	28.	M.	13 mo	dropsy on the brain
	M.	43	do.	29.	M.	34 yrs	consumption
Males, 11,—Females, 11.				Total, 22.			

ADVERTISEMENT.

NEW MEDICAL BOOKS.

JUST published, and for sale, by CARTER & HENDEE,—Malaria; an Essay on the Production and Propagation of this Poison. By JOHN McCULLOCH, M.D. F.R.S., &c. &c.

An Essay on the Diseases of the Internal Ear. By I. A. SAISSY, M.D. Translated from the French, by NATHAN R. SMITH, M.D., Professor of Surgery in the University of Maryland; with a Supplement on Diseases of the External Ear, by the Translator.

Observations on the Utility and Administration of Purgative Medicines, in several Diseases. By JAMES HAMILTON, M. D., Fellow of the Royal College of Physicians, &c. &c. From the Fifth Edinburgh Edition.

A Treatise on Pathological Anatomy. By WILLIAM E. HORNER, M.D., Adjunct Professor of Anatomy in the University of Pennsylvania, Surgeon at the Infirmary of the Philadelphia Almshouse, Member of the American Philosophical Society, &c.

Elements of Operative Surgery. Translated from the French of A. TAVERNIER, Doctor of Medicine of the Faculty of Paris, &c., with copious Notes and Additions. By S. D. GROSS, M.D.

A Treatise on the Nature, Cause and Treatment of Contagious Typhus. From the German of J. VAL DE HILDENBRAND, Imperial and Royal Counsellor, Professor of the Practice of Medicine in the University of Vienna, &c. &c. By S. D. GROSS, M.D.

An Essay on the Morbid Sensibility of the Stomach and Bowels. By JAMES JOHNSON, M.D.

Examinations in Anatomy, Physiology, Practice of Physic, Surgery, Chemistry, Materia Medica, and Pharmacy. For the Use of Students. By ROBERT HOOPER, M.D. Dec. 22.

MEDICAL SCHOOL OF MAINE.

THE MEDICAL LECTURES at BOWDOIN COLLEGE will commence on TUESDAY, February 23, 1830. Theory and Practice of Physic, by JOHN DELAMATTER, M.D. Anatomy and Surgery, by J. D. WELLS, M.D. Midwifery, by JAMES McKEEN, M.D.

Chemistry and Materia Medica, by P. CLEVELAND, M.D.

The ANATOMICAL CABINET is extensive, and very valuable.

The LIBRARY, already one of the best Medical Libraries in the United States, continues to be every year enriched by New Works, both foreign and domestic.

Every person becoming a member of this Institution, is required to present satisfactory evidence that he possesses a good moral character.

The amount of fees for admission to all the Lectures is \$50. Graduating fee, including diploma, \$10. There is no matriculating fee. The Lectures continue three months.

Degrees are conferred at the close of the Lecture term in May, and at the following Commencement of the College in September. A systematic course of instruction, embracing Recitations in all the branches of Medical Science, Demonstrations, and Lectures, will be given by the Professors, during the interval between the annual courses of Lectures.

Boarding may be obtained in the Commons Hall at a very reasonable price.

Brunswick, Dec. 4, 1829.

Dec. 15.—4teop.

DEWEES' PRACTICE.

JUST published and for sale by CARTER & HENDEE, A PRACTICE OF PHYSIC, comprising most of the Diseases not treated of in "Diseases of Females" and "Diseases of Children." By William B. Dewees, M.D., Adjunct Professor of Midwifery in the University of Pennsylvania, etc. etc.

"We live in an age in which the fear of debility causes a prodigal use of stimulants; and this too often at the expense of the health and the life of the patient."—*Broussais Phleg Chron. Vol. 2, p. 82.*

"Had I dared to bleed freely, and especially by means of leeches, the patient might have been saved; but I was afraid of debility. But who is to blame?"

Feb. 2.

AN ENGRAVING,

REPRESENTING the Perfect and Imperfect Cow Pox and the Chicken Pox, during their course, by J. D. Fisher, M.D. This day published and for sale by CARTER & HENDEE, cor. of Washington and School sts. Price 62 1-2 cts. Jan 26.

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

RARE

PER

