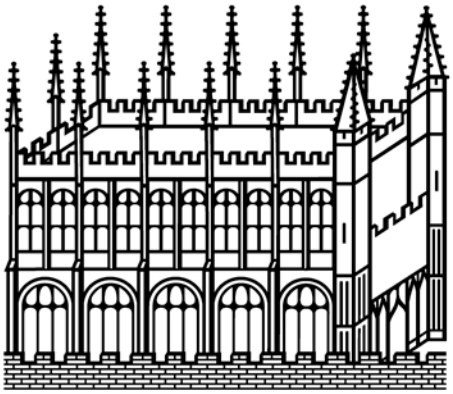


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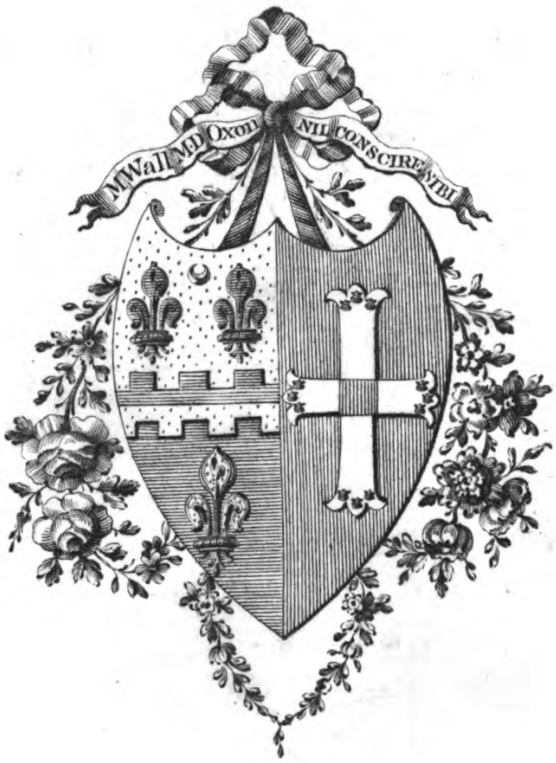
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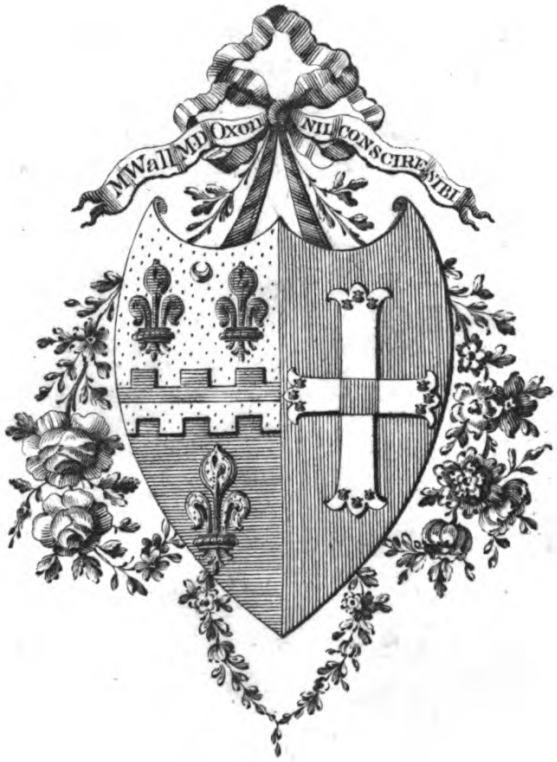


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MEDICAL

AND

PHILOSOPHICAL

COMMENTARIES.

By a SOCIETY in EDINBURGH.

Dignitas vero artis medicae, niſi eventa promiſſis reſpondeant, etiam oſtentatione minuitur; cum verus honos illos tantum ſequatur, qui virtutem ſuam et ſalutis publicae ſtudium re et opera demonſtrarunt. JOH. DAV. HAHN.

VOLUME FIFTH.

PART I.

LONDON:

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W. CREECH, C. ELLIOT, and
M. DRUMMOND, *Edinburgh*;

M,DCC,LXXVII.



THIS VOLUME

OF THE

MEDICAL COMMENTARIES

IS HUMBLY INSCRIBED TO

THE RIGHT HONOURABLE

JAMES MONTGOMERY,

LORD CHIEF BARON of his MAJESTY'S Court of Exchequer in Scotland,

By his Lordſhip's moſt obedient Servants

THE AUTHORS.

Vidimus adverſus amicos benignum, adverſus inimicos temperatum; et publica et privata ſancte ac religioſe adminiſtrantem; non deeſſe ei et in his quae toleranda erant patientiam, et in his quae agenda prudentiam. SENECA.

PREFACE.

WE may, with good reaſon, preſume, that our readers, in general, are now well acquainted with the nature of this work. Since, therefore, it is not at preſent our intention to make any alteration on the plan which we have hitherto followed, a prefatory addreſs may be conſidered as unneceſſary. We cannot, however, begin a new volume, without returning thanks for the aſſiſtance we have already received, and ſoliciting future aid.

Although we are unqueſtionably to be conſidered as leſs impartial judges of the merit of this work than moſt of our readers, yet, it may be preſumed, that we are neither ignorant of its utility, nor blind to its imperfections. Even a very moderate degree of induſtry and judgment, employed in the collection and choice of intereſting materials, muſt render ſuch a publication

of real value to many practitioners. Yet, the moſt indefatigable exertions from the compilers themſelves, cannot poſſibly give it all the value which it is capable of obtaining. The moſt uſeful medical improvements will ever be the reſult of experience and obſervation. And, if the free communication of diſcoveries be neceſſary for the perfection of any art, it is particularly ſo for that of medicine. From the aid of others, then, our work muſt derive its chief excellence. And we cannot help thinking, that thoſe who are actuated by an earneſt deſire for the improvement of medicine, will conſider it as a duty, to take an early opportunity of communicating to the public the reſult of their obſervations, when they contradict doctrines generally received, or confirm aſſertions before doubtful.

On this ground we have already been favoured with many intereſting remarks, and flatter ourſelves with the hopes of future aid. And, while our work continues to be ſupported by valuable communications from others, we may venture to promiſe attention and induſtry from ourſelves.

It cannot be imagined, that every article of a work of this nature will ſuit the taſte of every reader; yet, there is no one to whom it may not convey

convey uſeful inſtruction. As long as this is the caſe, we have little doubt that our labours will continue to meet with a favourable reception from the public. And, although the honour of thoſe diſcoveries or improvements, a knowledge of which is more generally diffuſed by this publication, be due to others, yet, we truſt, that every candid reader will at leaſt give us ſome credit for our intentions.

EDIN. 1ſt OCT.
1777.

MEDICAL COMMENTARIES.

SECT. I.

An Account of Books.

I.

Firſt Lines of the Practice of Phyſic, for the uſe of Students in the Univerſity of Edinburgh, by William Cullen, M. D. Vol. 1. 8vo, Edinburgh.

IN an introduction to this work, Dr Cullen explains the general plan of a ſyſtem of phyſic; and, on the ſubject of the cure of diſeaſes, he obſerves, that this is chiefly, and almoſt unavoidably, founded in the knowledge of their proximate cauſes. This requires the knowledge of the

the inſtitutions of medicine, of which the doctrines are ſtill incompleat, in many reſpects doubtful, and have been often involved in miſtake and error. On this account, the Doctor acknowledges, that the doctrine of proximate cauſes muſt be frequently precarious and uncertain; and therefore, he propoſes to admit of thoſe doctrines only, as a foundation of practice, which are ſimple, obvious, and certain; and, for the moſt part, to admit, as proximate cauſes, thoſe only which are eſtabliſhed as matters of fact, rather than as deductions of reaſoning. When this cannot be done, the judicious and prudent phyſician will have recourſe to *experience* alone; always, however, aware of the hitherto incomplete and fallacious ſtate of empiriciſm.

The work before us will probably extend to ſeveral volumes, one of which only is yet publiſhed. This volume is divided into two books, in the firſt of which the author treats of fever. He introduces the ſubject with an enumeration of the phenomena of fever. He takes the paroxyſm of an intermittent fever as exhibiting all the phenomena eſſentially neceſſary to, and properly conſtituting the nature of fever. Theſe phenomena, therefore, he deſcribes more minutely

nutely and fully than has been done before; but the detail is too long to be admitted here.

In the ſecond chapter, Dr Cullen conſiders the proximate cauſe of fever.

As the hot ſtage of fever is ſo conſtantly preceded by a cold ſtage, it is preſumed, that the latter is the cauſe of the former; and therefore, that the cauſe of the cold ſtage is the cauſe of all that follows in the courſe of a paroxyſm. In the cold ſtage, he ſuppoſes, with Dr Hoffman, that a ſpaſm is formed on the extreme veſſels every where, and that this ſupports the hot ſtage till the extreme veſſels are again relaxed; and ſo far his explanation of the phenomena of fever is the ſame with that of Dr Hoffman. But Dr Cullen adds, that the foundation of fever is laid in a debility of the whole ſyſtem, and particularly in an atony of the extreme veſſels. After a detail of many facts, in proof of his ſeveral poſitions and reaſonings, he concludes, in the xlvi. paragraph, as follows. ‘ Upon the whole, our ‘ doctrine of fever is explicitly this; the remote ‘ cauſes are certain ſedative powers applied to ‘ the nervous ſyſtem, which, diminiſhing the ‘ energy of the brain, thereby produce a debi- ‘ lity on the whole of the functions, and parti-

‘ cularly

'cularly in the action of the extreme veſſels. 'Such, however, is at the ſame time the nature 'of the animal oeconomy, that this debility 'proves an indirect ſtimulus to the ſanguiferous 'ſyſtem; whence, by the intervention of the 'cold ſtage, and ſpaſm connected with it, the 'action of the heart and larger arteries is in-'creaſed, and continues ſo till it has had the ef-'fect of reſtoring the energy of the brain; of 'extending this energy to the extreme veſſels; 'of reſtoring, therefore, their action; and there-'by eſpecially overcoming the ſpaſm affecting 'them; upon the removing of which, the ex-'cretion of ſweat, and other marks of the re-'laxation of excretories, take place.'

The author, having declared his own, proceeds to examine ſome other opinions that have prevailed on this ſubject. He argues againſt the ſuppoſition of a lentor or viſcidity of the blood as the cauſe of the cold ſtage of fevers, and, in this, his concluſion will be readily enough admitted. But he proceeds to a more bold undertaking, which will probably meet with more oppoſition. He rejects the opinion of a morbific matter, ſo far as it is the foundation of the common doctrine of *concoction* and *criſis*. 'A-'nother

'nother opinion,' ſays the Doctor, 'which has 'been very univerſally received is, that a noxi- 'ous matter introduced into, or generated in 'the body, is the proximate cauſe of fever; and 'the increaſed action of the heart and arteries, 'which makes ſo great a part of the diſeaſe, is 'an effort of the vis medicatrix naturae, to ex- 'pell this morbific mattter, and particularly to 'change or concoct it, ſo as to render it either 'altogether innocent, or, at leaſt, fit for being 'thrown out of the body. This doctrine, how- 'ever, although of as great antiquity as any of 'the records of phyſic now remaining, and al- 'though it has been received by every ſchool of 'medicine, yet appears to me to reſt upon a 'very uncertain foundation. There are fevers 'produced by cold, fear, and other cauſes, with 'all the eſſential circumſtances of fever, and ter- 'minating by ſweat; and yet, at the ſame time, 'without any evidence or ſuſpicion of morbific 'matter. There have been fevers ſuddenly 'cured by an haemorrhagy, ſo moderate as can- 'not carry out a matter diffuſed over the whole 'maſs of blood; nor can we conceive how the 'morbific matter could be collected, or deter- 'mined to paſs off, by ſuch an outlet as in that

'caſe

'caſe is opened. Even ſuppoſing a morbific 'matter were preſent, there is no explanation 'given in what manner the concoction of it is 'performed, nor is it ſhewn that any ſuch change 'does in fact take place. In certain caſes, it is 'indeed evident, that a noxious matter is intro-'duced into the body, and proves the cauſe of 'fever; but, even in theſe caſes, it appears, that 'the noxious matter is thrown out again with-'out having ſuffered any change; that the fever 'often terminates before the matter is expelled; 'and that, upon many occaſions, without wait-'ing the ſuppoſed time of concoction, the fever 'can be cured, and by remedies which do not 'ſeem to operate upon the fluids, or produce 'any evacuation. While we thus reaſon againſt 'the notion of fevers being an effort of nature 'for concocting and expelling a morbific matter, 'we by no means intend to refuſe, that the cauſe 'of fever frequently operates upon the fluids, 'and particularly produces a putreſcent ſtate of 'them. We acknowledge that this is frequent-'ly the caſe; but, at the ſame time, we maintain, 'that ſuch a change of the fluids is not com-'monly the cauſe of fever; that very often it is 'an effect only; and that there is no reaſon to

'believe

'believe the termination of the fever to depend 'upon the expulſion of the putrid matter.'

A third opinion, pretty generally prevailing, the Doctor alſo takes notice of. An unuſual quantity, and perhaps peculiar quality of the bile, has been conſidered as the cauſe of intermittent fevers. Doctor Cullen obſerves, that the circumſtances of the cold ſtage of fever favour an increaſed ſecretion of bile; that the influence of warm climates and ſeaſons, diſpoſes the bile to paſs off in unuſual quantity by its ſecretories, and perhaps changed in its quality, as appears from the diſeaſe of cholera, common in warm ſeaſons, and which frequently occurs without fever. He thinks that he will render it ſufficiently probable, that intermittents ariſe from another cauſe, viz. marſh effluvia. The marſh effluvia commonly operate moſt powerfully in the ſame ſeaſon that produces the change of the bile. It is not, therefore, ſurpriſing, that autumnal intermittents ſhould be attended with effuſions of bile. From all this, he concludes, that bile is not the cauſe of intermittent fevers, but a circumſtance only concurring with them from the ſtate of the ſeaſon in which they ariſe.

In

In the third chapter, Dr Cullen treats of the difference of fever, and its cauſes.

In entering on this ſubject, Dr Cullen remarks, that every fever, of more than one day's continuance, conſiſts of repeated paroxyſms; and that the difference of fever appears in the different ſtate of paroxyſms, and in the different circumſtances of their repetition. He farther remarks, that the repetition of paroxyſms depends upon the circumſtances of paroxyſms already formed; for, it had been formerly obſerved, in deſcribing the phenomena of fever, that the longer paroxyſms are protracted, they are the ſooner repeated; and, therefore, the cauſe of the frequent repetition is to be ſought for in the cauſe of the protraction of paroxyſms. The length of a paroxyſm depends chiefly on the duration of the hot ſtage; during which, the *re-action*, the term which the Doctor employs for the vis medicatrix naturae, is operating to take off the ſpaſm formed in the cold ſtage. It is, therefore, probable, that the duration of the hot ſtage is owing either to the obſtinacy of the ſpaſm, or to the weakneſs of reaction. One cauſe of the obſtinacy of ſpaſm, is a diatheſis phlogiſtica prevailing in the body; and, as continued fevers are in many caſes attended

tended with the diatheſis phlogiſtica, it is concluded, that, in many caſes, this is the cauſe of their continued form.

In many fevers, however, where no cauſe of conſiderable ſpaſm appears, Doctor Cullen imputes the protraction of paroxyſms to the weakneſs of re-action; becauſe, in fevers, wherein the ſeparate paroxyſms are the moſt protracted, and the moſt difficultly obſerved, we find the moſt conſiderable ſymptoms of a general debility. Theſe principles apply to the diſtinction of intermittents, as they are more purely ſuch; and Doctor Cullen thinks it alſo agreeable to obſervation, and to the principles he has laid down, to diſtinguiſh continued fevers, according as they ſhow either an inflammatory irritation, or a weaker re-action. This diſtinction is the ſame with that of fevers into the *inflammatory* and *nervous*, the diſtinction at preſent moſt generally received in Great Britain. To the firſt, our author gives the name of *ſynocha*, to the latter, that of *typhus*. But, as the moſt common form of continued fever, in this climate, ſeems to be a combination of the two genera mentioned, he has given ſuch a genus a place in his Noſology, under the title of *ſynochus*.

The typhus ſeems to be a genus comprehending ſeveral ſpecies. Theſe, however, are not well aſcertained; and many of the caſes obſerved do not imply any ſpecific difference, but ſeem to be merely varieties ariſing from a different degree of power in the cauſe; from different circumſtances of the climate or ſeaſon in which they happen; or, from different circumſtances in the conſtitution of the perſon affected.

Some of the effects ariſing from theſe circumſtances, Doctor Cullen thinks proper to explain.

One is, an unuſual quantity of bile appearing in the courſe of the diſeaſe. This abundance of bile may poſſibly attend ſome continued fevers, ſtrictly ſo called; but, in this caſe, as in that of intermittents, the Doctor conſiders it as a coincidence only, owing to the ſtate of the ſeaſon, producing no different ſpecies, or fundamental diſtinction, but merely a variety of the diſeaſe. Another circumſtance varying the appearance of typhus, is a putreſcent ſtate of the fluids. Fevers have been diſtinguiſhed both by the antients and moderns, as *putrid* and *non-putrid*; and, there is no doubt, that a real putreſcency of the fluids does take place in fevers. This putreſcency, however, often attends intermittents, as well

as

as continued fevers; and, of the continued kind, both the ſynochus and typhus, and all of them in very different degrees; ſo that whatever attention it may deſerve in practice, there is no fixing ſuch limits to it, as to admit of eſtabliſhing a ſpecies under the title of *putrid*.

Doctor Cullen, in the fourth chapter, proceeds to conſider the remote cauſes of fever.

As fevers are ſo generally epidemic, it is probable, that ſome matter floating in the atmoſphere, and applied to the bodies of men, ought to be conſidered as the remote cauſe of fevers. Theſe matters, preſent in the atmoſphere, and acting upon men, may be conſidered either as *miaſmata* or *contagions*. From the many obſervations now made, there is no doubt of the miaſma ariſing from marſhes, or moiſt ground, acted upon by heat, being a general cauſe of fever, nor of its being very univerſally the cauſe of intermittent fevers in all their different forms. The ſimilarity of the climate, ſeaſon, and ſoil, in which intermittents ariſe, and the ſimilarity of diſeaſes ariſing in different regions, concur in proving, that there is one common cauſe of theſe diſeaſes, and that this is the marſh miaſma. Contagions have been ſuppoſed to be of great variety.

But Doctor Cullen is diſpoſed to controvert this opinion. He obſerves, that the number of genera, and ſpecies of contagious diſeaſes, of the claſs *pyrexiae*, at preſent known, is not very great; and, with reſpect to continued fevers, he thinks he can render it probable, that there is one principal, perhaps one common ſource, of the contagion producing them. To this purpoſe, he obſerves, that effluvia, ariſing from the living human body, long retained in the ſame place, acquire a ſingular virulence, and, in that ſtate, applied to the bodies of men, become the cauſe of a fever which is very contagious. The late obſervations on jail and hoſpital fevers, ſufficiently prove the exiſtence of ſuch a cauſe; and, it is ſufficiently obvious, that the ſame virulent matter may be produced in many other places. At the ſame time, the nature of the fevers ariſing, renders it probable, that the virulent ſtate of human effluvia is the common cauſe of ſuch fevers, as they differ only in the ſtate of their ſymptoms, which may be imputed to the circumſtances of ſeaſon, climate, &c. concurring with the contagion, and modifying its force. After thus mentioning miaſmata and contagion as the chief, he obſerves, that there are other remote cauſes com-

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monly ſuppoſed to have at leaſt a ſhare in producing fevers, and which cannot, with certainty, be excluded. The moſt remarkable of theſe, is the power of cold applied to the human body. Cold operates upon the living body differently, in different circumſtances. It has a ſedative, a ſtimulant, an aſtringent, and tonic power. In what circumſtances theſe different powers of cold take place, it is difficult to determine. But its morbid effects may be obſerved to be of four kinds; one is a general inflammatory diatheſis of the ſyſtem; a ſecond is a catarrhal affection; a third is gangrene; and a fourth is proper fever. In producing this laſt, the operation of cold generally concurs with marſh, or human effluvia.

Beſides cold, there are other powers which ſeem to be the remote cauſes of fever, as fear, intemperance in drinking, and in venery, and other cauſes which evidently weaken the ſyſtem. But, whether any of theſe ſedative powers be alone the remote cauſe of fever, or if they operate, either as they concur with the operation of marſh or human effluvia, or as they give an opportunity to the operation of cold, are queſtions not to be poſitively anſwered.

In the fifth chapter, Doctor Cullen delivers the prognoſis of fever. As fevers conſiſt both of morbid and ſalutary motions and ſymptoms, the tendency of the diſeaſe to a happy or fatal iſſue, or the prognoſtic in fevers, has been eſtabliſhed by marking the prevalence of thoſe motions and ſymptoms. But the operation of the re-action, or ſalutary efforts of nature, is ſtill involved in ſo much obſcurity, that it cannot be applied to the forming prognoſtics. Theſe, our author thinks, may be better eſtabliſhed, by marking the ſymptoms which ſhew the tendency to death in fevers. In order to this, we muſt be acquainted with the cauſes of death in general, and in fevers more particularly. The cauſes of death, in general, are either direct or indirect. The firſt are thoſe which directly attack and deſtroy the vital principle, as lodged in the nervous ſyſtem, or deſtroy the organs immediately connected with it. The ſecond are thoſe which interrupt ſuch functions as are neceſſary to the circulation of the blood, and thereby neceſſary to the due continuance and ſupport of the vital principle. Of the general cauſes, thoſe which operate more particularly in fevers, ſeem to be, firſt, the violence of reaction, which, either by repeated

repeated violent excitements, deſtroys the vital principle itſelf, or, by its violence, the organization of the brain, neceſſary to the action of the vital principle; or, by the ſame violence, deſtroys the organization of the parts more immediately neceſſary to the circulation of the blood. *Secondly*, The cauſe of death in fever may be a poiſon, that is, a power capable of deſtroying the vital principle. This poiſon may either be the miaſma or contagion, which was the remote cauſe of the fever, or it may be a putrid matter generated in the courſe of the fever. In both caſes, the operation of ſuch a power appears, either as acting chiefly on the nervous ſyſtem, inducing the ſymptoms of debility, or as acting upon the maſs of blood inducing a putreſcent ſtate in it, and in the fluids derived from it.

From all this, our author thinks the ſymptoms, ſhewing the tendency to death in fevers, may be diſcovered, by their being either the ſymptoms of violent re-action, of great debility, or of a ſtrong tendency to putrefaction in the fluids.

On the ſubject of the prognoſtic, Doctor Cullen takes notice of the *critical days*, and is

of opinion, in oppoſition to many moderns of no inconſiderable authority, that the doctrine of the antients, and particularly that of Hippocrates, on this ſubject, was well founded; and that it is juſt and true, with reſpect to the fevers of our climate; *firſt*, becauſe he obſerves, that the animal oeconomy is readily ſubjected to periodical movements, both from its own conſtitution, and from habits which are readily produced in it. *Secondly*, Becauſe he obſerves periodical movements to take place in the diſeaſes of the human body, with great conſtancy and exactneſs, as in the caſe of intermittent fevers, and many other diſeaſes.

The critical days, on which he ſuppoſes the termination of continued fevers more eſpecially to happen, are the *third*, *fifth*, *ſeventh*, *ninth*, *eleventh*, *fourteenth*, *ſeventeenth*, and *twentieth*. After endeavouring to ſupport theſe as the critical days marked by Hippocrates, and to explain them upon the principle of the tendency of the oeconomy to obſerve a periodical movement, and the prevalence of the tertian and quartan period in fevers, he adds his own obſervations, with regard to them, in the following words. 'Our own obſervations amount to this, that fe-

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'vers with moderate ſymptoms, generally caſes
'of the ſynocha, frequently terminate in nine
'days, or ſooner, and very conſtantly on one or
'other of the critical days that fall within that
'period; but it is very rare in this climate, that
'caſes of either the typhus or ſynochus, termi-
'nate before the eleventh day; and, when they
'do terminate on this day, it is, for the moſt part,
'fatally. When they are protracted beyond
'this time, I have very conſtantly found, that
'their terminations were upon the fourteenth,
'ſeventeenth, or twentieth day. In ſuch caſes,
'the ſalutary terminations are ſeldom attended
'with any conſiderable evacuation. A ſweat-
'ing frequently appears, but is ſeldom conſide-
'rable; and I have ſeldom ſeen critical and de-
'ciſive terminations attended with vomiting, e-
'vacuations by ſtool, or remarkable changes in
'the urine. The ſolution of the diſeaſe is chief-
'ly to be diſcerned from ſome return of ſleep
'and appetite, the ceaſing of delirium, and an
'abatement in the frequency of the pulſe. By
'theſe ſymptoms, we can often mark a criſis of
'the diſeaſe; but it ſeldom happens ſuddenly and
'entirely; and, it is moſt commonly from ſome

'favou-

'favourable ſymptoms on one critical day, that 'we can anounce a more intire ſolution on the 'next following.'

In the ſixth chapter, Doctor Cullen enters upon the cure of fevers; and, in the firſt ſection, he delivers the cure of continued fevers. Agreeably to the doctrine laid down on the ſubject of the prognoſtic, our author forms three general indications.

1*ſt*, To moderate the violence of reaction.

2*d*, To remove the cauſes, and obviate the effects of debility.

3*d*, To obviate or correct the tendency of the fluids to putrefaction.

The remedies propoſed for fulfilling theſe indications, and the accurate arrangement of them, will be beſt learned from the following table, which we tranſcribe from the work itſelf.

In the Cure of CONTINUED FEVERS,

The INDICATIONS are,

I. To moderate the violence of re-action, which may be done, by

1, Diminiſhing the action of the heart and arteries, by

A. Avoid-

A. Avoiding or moderating thoſe irritations which are almoſt conſtantly applied to the body, as,

a. The impreſſions made upon our ſenſes, particularly,

α. Increaſed heat, whether ariſing from

αα. External heat, or,

ββ. The accumulation of the heat of the body.

b. The exerciſe of the body,

c. The exerciſe of the mind,

d. The taking in of aliments,

e. Particular irritations, ariſing from

α. The ſenſe of thirſt,

β. Crudities, or corrupted humours in the ſtomach,

γ. The preternatural retention of foeces,

δ. A general acrimony of the fluids,

B. Employing certain ſedative powers, as

a. Cold,

b. Refrigerants, the chief of which are,

α. Acids of all kinds,

β. Neutral ſalts,

γ. Metallic ſalts.

C. Diminiſhing the tenſion and tone of the arterial ſyſtem, by

a. Blood letting,

b. Purging.

2. Taking off the ſpaſm of the extreme veſſels, by

A. Internal means, which are

a. Thoſe

a. Thoſe remedies which determine to the ſurface, as,

α. Diluents,

β. Neutral ſalts,

γ. Sudorifics,

δ. Emetics.

b. Thoſe remedies named Antiſpaſmodies,

B. External means, as

a. Bliſtering,

b. Warm bathing.

II. To remove the cauſes, or obviate the effects of debility, by

1. Supporting and encreaſing the action of the heart and arteries, by

A. Tonics, as

a. Cold,

b. Tonic medicines, which are either

α. Foſſil, as

αα. Saccharum ſaturni, &c. or,

β. Vegetable, as,

αα. Peruvian bark.

B. Stimulants, as,

a. Aromatics, &c.

b. Wine.

III. To obviate or correct the tendency of the fluids to putrefaction, by

1. Avoiding the application of putrid or putreſcent matter, by

A. Re-

A. Removing the patient from places filled with corrupted air,

B. Avoiding the accumulation of the patient's own effluvia, by

a, A conſtant ventilation,

b. Frequently changing the bed-cloaths and body-linen.

C. Removing carefully and ſpeedily all excremental matters,

D. Avoiding animal food.

2. Evacuating the putrid or putreſcent matter already preſent in the body, by

A. Evacuating frequently the inteſtines,

B. Supporting the excretions of perſpiration and urine, by

a. Diluents,

b. Neutral ſalts.

3. Correcting the putrid or putreſcent matter remaining in the body, by

A. Diluents,

B. Antiſeptics.

4. Reſiſting farther putrefaction, or obviating its effects, by

Supporting the tone of the veſſels, by

Tonic remedies.

5. Moderating the violence of re-action, as in II. A. conſidered as a means of increaſing putrefaction, as in I, C.

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The novelty, the ingenuity, and chaſteneſs of thought diſplayed in our author's account of ſome of theſe particular means of cure, will be a ſufficient apology for our enlarging upon ſome of them.

I. 1. A. *Avoiding or moderating, as much as poſſible, thoſe irritations which are almoſt conſtantly applied to the body, namely, the impreſſions made upon our ſenſes, the exerciſe of the body and mind, and the taking in of aliment.*

In avoiding or moderating theſe, conſiſts what is properly called the *antiphlogiſtic regimen*, proper to be employed in almoſt every continued fever. Of the impreſſions made upon the ſenſes, none is to be more carefully guarded againſt than that of external heat; and every other means of increaſing the heat of the body is to be carefully ſhunned, except in circumſtances where a determination to ſweating is neceſſary, or where the effects of heat may be compenſated by their producing a relaxation and revulſion.

With reſpect to avoiding impreſſions of all kinds, he ſays, an exception is to be made only in the caſe of a delirium coming on, when the preſenting of accuſtomed objects may interrupt and

and divert the irregular train of ideas then ariſing in the mind.

The preſence of recent aliment in the ſtomach is always a ſtimulus to the ſyſtem. A total abſtinence, therefore, from food, for ſome time, may be of ſervice; but, as this cannot be long perſiſted in with ſafety, we muſt chooſe aliment which gives the leaſt ſtimulus. Doctor Cullen imagines, that alimentary matters are more ſtimulant, according as they are more alkaleſcent; and this leads to avoid all animal, and to uſe only vegetable food.

Beſides theſe irritations, there are other ſtimulant powers, which, though occaſional only, yet, as they commonly accompany fevers, muſt be attended to.

A ſenſe of thirſt, a powerful ſtimulus in one way or other, ought always to be avoided.

Crudities, or corrupted humours in the ſtomach, give another ſtimulus, which is to be removed by vomiting, dilution, or the uſe of acids.

A third ſtimulus frequently ariſes from the preternatural retention foeces; theſe are to be removed by means of laxative glyſters. A fourth ſtimulus, to be conſtantly ſuſpected in fevers, is a ge-

a general acrimony of the fluids, as produced by an increaſe of motion and heat, joined with an interruption of the excretions. This acrimony is to be obviated or removed by the taking in of large quantities of mild antiſeptic liquors.

I. 1. B. a. *The application of cold.* When the generating power of heat in the ſyſtem is increaſed, as is commonly the caſe in fevers, it is neceſſary not only to avoid all farther means of increaſing it, but it ſeems proper alſo to apply air of a cooler temperature, or at leaſt to apply it more entirely and freely than in a ſtate of health. Some late experiments in the ſmall pox, and in continued fevers, ſhow, that the free admiſſion of cool air to the body, is a powerful remedy in moderating the violence of re-action; but what is the mode of its operation, to what circumſtances of fever it is peculiarly adapted, or what limitations it requires, Dr Cullen does not venture to determine.

I. 1. C. a. *Blood-letting.* When the violence of re-action, and a phlogiſtic diatheſis, are ſufficiently evident; when theſe conſtitute the principal part of the diſeaſe, and may be expected to continue through the whole of it, as in the caſes of ſynocha, then blood-letting is the principal remedy,

remedy, and may be employed as far as the conſtitution of the patient will bear, and the ſymptoms of the diſeaſe may ſeem to require. It is, however, to be attended to, that a greater evacuation than is neceſſary, may occaſion a ſlower recovery, may render the patient more liable to a relapſe, or may bring on other diſeaſes.

There are other caſes of fever, as the ſynochus, and even ſome caſes of typhus, in which a violent re-action and phlogiſtic diatheſis appear, and prevail during ſome part of the courſe of the diſeaſe; while, at the ſame time, theſe circumſtances do not conſtitute the principal part of the diſeaſe, nor are to be expected to continue during the whole courſe of it; and we know, that, in many caſes, the ſtate of violent re-action is to be ſucceeded, ſooner or later, by a ſtate of debility, from the exceſs of which, the danger of the diſeaſe is chiefly to ariſe. It is therefore neceſſary, that, in many caſes, blood-letting ſhould be avoided; and even although, during the inflammatory ſtate of the diſeaſe, it may be proper, the evacuation ſhould not be ſo large as to increaſe the ſtate of debility which is to follow.

The employing, therefore, of blood-letting, in certain fevers, requires much diſcernment and

ſkill, and is to be governed by the conſideration of the following circumſtances.

1. The nature of the prevailing epidemic.

2. The nature of the remote cauſe.

3. The ſeaſon and climate in which the diſeaſe occurs.

4. The degree of phlogiſtic diatheſis preſent.

5. The period of the diſeaſe.

6. The age, vigour, and plethoric ſtate of the patient.

7. The patient's former diſeaſes, and habits of blood-letting.

8. The appearance of the blood drawn out.

9. The effects of the blood-letting, that may have been already practiſed.

I. 1. C. b. *Purging.* It is obvious, that a very great evacuation can be made by purging. But, it is to be obſerved, that, as the fluid drawn from the excretories opening into the inteſtines is not all drawn immediately from the arteries, and what is even more immediately drawn from theſe is drawn off ſlowly, ſo the evacuation will not, in proportion to its quantity, occaſion ſuch a ſudden depletion of the red veſſels, as blood-letting does; and, therefore, cannot operate ſo powerfully in taking off the phlogiſtic diatheſis of

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the ſyſtem. At the ſame time, the evacuation may induce a conſiderable degree of debility; and therefore, in caſes where a dangerous degree of debility is likely to occur, purging is to be employed with a great deal of caution, and this caution is more difficult to obſerve than in the caſe of blood-letting. Further, as it is of great importance, in the cure of fevers, to reſtore the determination of the blood to the veſſels on the ſurface of the body, ſo purging, as counteracting this determination, ſeems to be an evacuation not well adapted to the cure of fevers. If, notwithſtanding theſe doubts, and if, upon occaſion, a moderate evacuation, by purging, has appeared uſeful, Doctor Cullen alledges, that it has only proved ſo, by taking off the irritation of retained foeces, or by evacuating corrupted humours which happen to be preſent in the inteſtines. And, for both theſe purpoſes, he thinks frequent laxatives may be properly employed.

I. 2. A. a. γ. *Sudorifics.* On this ſubject, Doctor Cullen enters fully into the queſtion concerning the propriety of ſweating in fevers.

After mentioning the arguments which may be employed on either ſide of the queſtion, and marking particularly the abuſes which had enter-

ed into the practice of ſweating, he gives this concluſion.

Though the doubts ſtarted above may be admitted, and the miſtaken practices are certainly to be rejected, it ſtill remains true,

1ſt, That ſweating has certainly been found uſeful in preventing the acceſſion of fevers, when the times of it have been certainly foreſeen, and a proper conduct employed.

2d, That, even after fevers have, in ſome meaſure, come on, ſweating has interrupted their progreſs, when properly employed, either at the very beginning of the diſeaſe, or during its approach and gradual formation.

3d, That, even after pyrexiae have continued for ſome time, ſweating has been ſucceſsfully employed in curing them, as in the caſe of rheumatiſm.

Theſe inſtances, however, in favour of ſweating, give no general rule with regard to it. This muſt be left to further experience. In the mean time, if the practice of ſweating is to be attempted, Doctor Cullen lays down the following rules with regard to it. 1. That it ſhould be excited without the uſe of ſtimulant, or inflam-

matory

matory medicines. 2. That it ſhould be excited with as little external heat, and with as little increaſed heat of the body, as poſſible. 3. That, when excited, it ſhould be continued for a due length of time, not leſs than twelve hours, and ſometimes for twenty-four, or forty-eight hours; always, however, ſuppoſing, that it proceeds without increaſed external heat, or increaſed heat of the body. 4. That, for ſome part of the time, and as long as the perſon can eaſily bear, it ſhould be carried on without admitting ſleep. 5. That it ſhould be rendered univerſal over the body, and therefore, particularly, that care be taken to bring the ſweating to the lower extremities. 6. That the practice ſhould be rendered ſafer by moderate purging excited at the ſame time. 7. That it ſhould not be ſuddenly checked by cold any how applied to the body.

When attention is given to theſe rules, the ſweating may be excited, 1. By warm bathing, or a fomentation of the lower extremities. 2. By frequent draughts of tepid liquors, chiefly water, or this rendered more grateful by the addition of a light aromatic, or more powerful by that of a ſmall quantity of wine. 3. By giving ſome doſes of neutral ſalts. 4. Moſt effectually, and

perhaps moſt ſafely, by a large doſe of an opiate, joined with a portion of neutral ſalts, and of an emetic.

I. 2. A. a. δ. *Emetics.* The uſe of theſe has now become frequent in practice; and here Doctor Cullen gives a peculiar explanation of their operation and effects. After conſidering the many and various effects of vomiting, he confines himſelf here, to conſider that effect only of its determining to the ſurface of the body. This effect he imputes to the particular operation of emetics upon the muſcular fibres of the ſtomach, whereby they excite the action of the extreme arteries on the ſurface of the body. For this purpoſe, emetics are adminiſtered, either with a view to full vomiting, or in ſuch doſes as to excite ſickneſs and naufea only. It is ſeldom that full vomiting is found to produce a final ſolution of fevers; and, at the ſame time, the operation of full vomiting is tranſitory, and often proves a debilitating power. For theſe reaſons, when fevers are fully formed, phyſicians adminiſter emetics in naufeating doſes only. In this way, they excite the action of the extreme veſſels; their operation is more permanent, and rendered more ſafe, by their commonly producing ſome evacuation

tion by ſtool. With reſpect to the choice, he obſerves, the emetics at preſent employed are, ipecacuanha and antimony. The firſt, given even in ſmall doſes, is more liable to excite vomiting; and there is reaſon to ſuſpect, that its effects are leſs permanent, and leſs powerfully communicated from the ſtomach to the reſt of the ſyſtem, than thoſe of antimony.

Of the various preparations of Antimony, Doctor Cullen thinks it ſufficient to take notice of the *calx antimonii nitrata*, and the *tartar emetic* of the Edinburgh Pharmacopoeia. The former, we believe, he conſiders as the ſame with the celebrated James's powder; and, from ſeveral conſiderations, he is inclined to give the preference to the latter. The time of the acceſſion, or a little before it, is the moſt proper for exhibiting theſe antimonials, when it can be certainly known. The adminiſtration of the calx nitrata, conſiſts in giving as much as is thought a proper doſe at once, and no more till the next acceſſion. Tartar emetic is to be given in ſmall doſes, not ſufficient to excite vomiting; and theſe doſes are to be repeated after ſhort intervals, for ſeveral times, till ſickneſs, nauſea, and ſome, but not much, vomiting come on. With

reſpect to both, the repetition is to be made at the times of acceſſion, but not very often; for, if the firſt exhibitions, duly managed, have little effect, it is ſeldom that the after-exhibitions have much; and it ſometimes happens, that the repeated vomiting, and eſpecially repeated purging, do harm, by weakening the patient.

I. 2. B. a. *Bliſters.* On the ſubject of bliſters, Doctor Cullen rejects the opinion of their acting, by inducing a change on the conſiſtence of the maſs of blood. He alſo refuſes the notion of their operation, in any conſiderable degree, as ſtimulants and evacuants. The evacuation, however, produced by bliſters, although it does not affect the ſyſtem in general, is ſo conſiderable as to affect the neighbouring veſſels; and the manifeſt utility of bliſtering near the part affected, in inflammatory diſeaſes, leads us to think, that bliſtering, by deriving to the ſkin, and producing an effuſion there, relaxes the ſpaſm of the deeper ſeated veſſels. Analogous to this, Doctor Cullen is of opinion, that the good effect of bliſtering in continued fevers, ariſes from its relaxing the ſpaſm of the extreme veſſels, by a communication of the bliſtered part with the reſt of the ſkin; and this, he obſerves, is illuſtrated by the effect

of

of bliſtering in cholic and dyſentery. Our author imagines, that *ſinapiſms*, and *rubefacientia*, from their effect in rheumatiſm, act in a manner analogous to what he has ſuppoſed of bliſtering.

I. 2. B. b. *Warm Bathing*. The practice of warm bathing in fevers, was frequently uſed by the antients, but has been, till very lately, neglected by modern phyſicians. It ſeems to be a ſafe ſtimulus, and well ſuited to take off the ſpaſm affecting the extreme veſſels. Doctor Cullen, from much experience, has learned, that moſt of the purpoſes of warm bathing can be obtained by fomenting the legs and feet, if properly adminiſtered, and continued for a due length of time, not leſs than an hour. The marks of the good effects of ſuch a fomentation are, the patient's bearing it eaſily, its relieving delirium, and inducing ſleep.

In the other parts of the method of cure, there is nothing very new; and the merit of it conſiſts in the arrangement and full enumeration. On the ſubject of Peruvian bark, Doctor Cullen rejects the notion of ſpecific power, and refers its operation entirely to its tonic power in obviating debility.

In

In the cure of intermittents, which occupies the ſecond ſection of this chapter, the various remedies are more fully enumerated than elſewhere. Here the Doctor brings a ſtrong proof, that the bark acts by its tonic power, as ſo many other tonics anſwer the ſame purpoſe. Theſe other tonics are enumerated in this order;

1. Aſtringents alone.
2. Bitters alone.
3. Aſtringents and bitters conjoined.
4. Aſtringents and aromatics conjoined.
5. Certain metallic tonics; and,

Laſtly, Opiates.

From this analogy, Doctor Cullen draws a particular proof of his doctrine, that a ſtate of debility and atony is the fundamental circumſtance in fevers.

We ſhall conclude our account of this part of the volume before us, with a quotation from the preface; in which, Doctor Cullen, with all the candour and modeſty which accompany true learning, expreſſes much diffidence on entering upon an undertaking of this kind; and informs us, that his duty as a profeſſor, and the impoſſibility of confining his publication to the hands

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of thoſe who hear his lectures, have laid him under the neceſſity of offering his book to the public in its preſent form. 'At the ſame time,' ſays he, 'I cannot offer it, without requeſting, 'that, in judging of a work, from its very na-'ture conciſe, the learned will proceed with re-'ſerve, and will not condemn my opinions, till 'they be certain that they fully comprehend my 'meaning, and ſhall be acquainted with the 'proofs I can adduce to confirm my doctrines.'

II.

Diſſertatio Medica de Rabie Canina, auctore Joanne Heyſham. 8vo, Edinburgi.

THE dreadful diſtemper which is the ſubject of this diſſertation, has hitherto baffled the ſkill of the moſt eminent practitioners in almoſt every inſtance. A ſafe and efficacious remedy for this affection, muſt therefore be conſidered as a moſt valuable diſcovery. Such a remedy, the author of the preſent publication thinks he has here been able to communicate to the public. And, although his opi-

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nion remains yet to be confirmed by the teſt of future experience, yet, ſuch evidence is adduced in ſupport of it, that it well merits a trial.

The author introduces his ſubject by ſome judicious ſtrictures on the definitions which have been given of this affection by the beſt noſological writers. After this, he defines rabies canina in the following manner. An averſion and horror at liquids, as exciting a painful convulſion of the pharynx occurring at an indetermined period, after the canine virus has been received into the ſyſtem. Having thus characteriſed the affection of which he propoſes to treat, he enumerates, at conſiderable length, the different ſymptoms which attend this diſeaſe, as occurring, both among the canine tribe, and with the human ſpecies. Diſſections, he obſerves, even by the moſt induſtrious anatomiſts, Morgagni, Bonetus, and others, have thrown no light on the nature or cauſe of this diſeaſe. In ſome inſtances, a ſlight degree of inflammation has been obſerved on the fauces, and ſuperior parts of the pharynx and larynx. But, in others, theſe have been entirely wanting. From which, he concludes, that ſuch appearances are to be conſidered, rather as the

effect

effect than the cauſe of the moſt alarming ſymptoms.

As he maintains that this diſeaſe never takes its origin from the human race, ſo he concludes, that there are no cauſes which can, with them, be conſidered as giving prediſpoſition to it. He enumerates, as the chief cauſes which have been ſuppoſed to operate, as inducing it with the canine tribe, great heat, putrid aliment, want of water, worms lodged in different cavities or viſcera, and, *laſtly*, a worm under the tongue.

To the ſuppoſition of its being induced by heat, he urges as an objection, that the diſeaſe is totally unknown in South America. He remarks, that putrid aliment, to a very great extent, is often taken by dogs without inconvenience; and that, with little probability, it is aſſigned as a cauſe of madneſs, ſince, in this ſtate, it ſeems to be moſt agreeable to them. Reſpecting the want of water, he obſerves, that the diſeaſe has been found to originate with dogs plentifully ſupplied with it, while it has not taken place with others long deprived of it. He conſiders the ſuppoſition of worms in different cavities producing the affection, to be even deſtitute of probable evidence. The ſuppoſition of a worm being

being lodged under the tongue of the dog, is at leaſt as old as the days of Pliny. Later diſſections, however, particularly thoſe of Doctor Brodie, ſerve to demonſtrate, that what was ſuppoſed to be a worm, is, in reality, a gland. And, on this ſuppoſition, it has been imagined, that there may be ſome truth in the common opinion, that, if a dog deprived of this ſubſtance under the tongue, becomes mad, he is incapable of communicating the diſeaſe. This, it has been ſaid, may depend on that gland being neceſſary for the ſeparation of the poiſon at the mouth. But, although Doctor Heyſham neither adopts this theory, nor conſiders the practice of removing this ſubſtance as one that is by any means to be neglected, yet he concludes, that it can never be conſidered as the cauſe of the diſeaſe, ſince numberleſs dogs, from whom it is never removed, yet continue to enjoy the moſt perfect health. He concludes, therefore, that none of the cauſes commonly enumerated can be conſidered as giving origin to this affection, and that, probably, it depends on ſome peculiarity with which we are yet unacquainted.

But, whatever may firſt produce the diſeaſe with dogs, he conſiders as the univerſal occaſional

nal cauſe with the human ſpecies, a certain ſubtile and powerful poiſon attached to the ſaliva, and, probably, alſo to the other fluids of a mad animal. Many different conjectures have been entertained reſpecting the nature of this poiſon, for which, probably, there is but little foundation. On this ſubject, our author preſents us with a conjecture, which, he thinks, is corroborated by ſeveral circumſtances. He obſerves, *1ſt*, That this virus is unqueſtionably preſent in the ſaliva. *2dly*, That, in its nature and effects, it differs from all other contagions with which we are yet acquainted. *3dly*, That its properties are very foreign from thoſe of putridity. *4thly*, That it cannot be ſo united with air as in that manner to give the infection to the human ſyſtem. *5thly*, That it is ſo far of a fixed nature, that the ſaliva is capable of giving the infection after the thinner parts have been evaporated by expoſure to the open air. And, *laſtly*, That amputation of the member bit, or complete extirpation of the part, are the only certain prophylactic yet diſcovered, by which we are able to counteract the influence of this poiſon. This aſſertion, which is here taken for granted, the author endeavours to prove, in an after part of his

his publication. From theſe different circumſtances, but eſpecially the laſt, Doctor Heyſham thinks there is ſome probability, that the virus of rabies is of an acid nature. This acid, he ſuppoſes to operate, as inducing what may be called the proximate cauſe of the diſeaſe, in conſequence of its action on the nervous ſyſtem. From the ſedative nature of the poiſon, he accounts for the languor, laſſitude, proſtration of ſtrength, and other ſigns of debility, which manifeſt themſelves in the beginning of the diſeaſe; and he aſcribes the ſpaſms, convulſions, and other ſucceeding ſymptoms, to the high degree of irritability thus induced.

After theſe obſervations on the nature of this diſeaſe, the author next proceeds to treat of the cure. Here, he obſerves, that the attention of a practitioner ought chiefly to be employed in endeavouring to prevent the diſeaſe from taking place after infectious matter has been applied. With this view, two objects are to be aimed at. 1*ſt*, To expel the poiſon from the ſyſtem as ſoon as poſſible. And, 2*dly*, Where this cannot be done, to deſtroy the activity of the virus.

Many of the moſt eminent practitioners, both antient and modern, have directed, that, as ſoon

as poſſible, the part wounded ſhould either be completely cut out, or that, after large and deep ſcarifications, cupping glaſſes ſhould be applied to it. After which, they direct all the parts to be carefully waſhed with different ſaline lotions. Others recommend the application of mercurial ointment, cauſtics, or even actual cautery. Doctor Heyſham does not deny, that, from theſe meaſures, the poiſon may either be removed or deſtroyed. Yet, he imagines, that there are circumſtances in which all of them may either be inadmiſſible or ineffectual. On the uſe of frequent cold bathing, which ſome have conſidered as a prophylactic, he thinks, that no dependence can be put. And, of all the internal remedies which have been recommended as antidotes to this poiſon, from thoſe mentioned by Galen and Oribaſius, to the preſent times, he thinks, that there is no one of any efficacy, excepting a remedy which has lately been introduced with the moſt happy ſucceſs in the weſtern parts of England.

This remedy, which is ſold in different parts of the country, as prepared by Mr Hill of Ormſkirk, our author tells us, conſiſts of the following

articles. Powder of chalk, half an ounce; armenian bole, three drachms; allum, ten grains; powder of elecampane root, one drachm; oil of aniſe, ſix drops. Such a doſe is to be taken every morning, repeated to the ſixth time, in a glaſs of water, with the mixture of a ſmall proportion of freſh milk. If this doſe, however, taken at once, does not ſit eaſily on the ſtomach, it may be divided and taken at different times. Reſpecting the mode in which this medicine operates, he obſerves, that, if the conjecture formerly thrown out, reſpecting the nature of the poiſon, be well founded, this muſt be ſufficiently obvious. And, with regard to its efficacy, he remarks, that this has now been ſo thoroughly eſtabliſhed by experience, that there can be no room to doubt it. Among other inſtances he mentions, that an ingenious friend of his, Mr Joſeph Stonney, adminiſtered this medicine to twenty-ſix hounds, all of whom had been bit by a dog with evident ſymptoms of madneſs, of which he ſoon afterwards died. Of theſe, not one was affected with the diſeaſe.

Doctor Heyſham, indeed, admits, that there are two inſtances upon record, in which, although

though the medicine was properly adminiſtered, it failed of ſucceſs. But he adds, that there are inſtances alſo, in which opium has failed to produce ſleep, tartar emetic vomiting, mercury ſalivation, or the like; and he is diſpoſed to hope, that this remedy will be found as rarely ineffectual.

After theſe obſervations on the prophylaxis, he next makes ſome remarks on the cure. When the meaſures already recommended have either been neglected, or too long delayed, ſome means of cure may be uſed, although with little probability of ſucceſs, after the ſymptoms of the affection have already manifeſted themſelves. Here Doctor Heyſham thinks, that the great object to be aimed at, is to combat the ſpaſms and convulſions, which conſtitute the greateſt part of the diſeaſe. With this view, he recommends copious bleeding; the frequent uſe of emollient and laxative injections; opium in large doſes, either by the mouth, or in the form of injection; and mercury. Beſides theſe, and ſome other remedies which have been frequently employed, he imagines alſo, that recourſe may be had, with advantage, to the vitriolic aether, and to muſic.

Doctor Heyſham concludes this diſſertation, by relating thoſe experiments from which he infers that the remedy which he has mentioned is the ſame with that of Mr Hill. Theſe experiments are five in number, and were made chiefly by the addition of water, of nitrous acid, and of vitriolic acid. From the effects of theſe different fluids, there can be little doubt, that the baſis of the remedy is chalk. And, that there may be no room for ſuſpicion reſpecting the accuracy of the experiments, we are informed, that, when they were repeated by Doctor Black, the reſult was the ſame as had been found by Doctor Heyſham. Yet, although theſe may give probability, it is evident, that they cannot afford certain evidence. And the author concludes his diſſertation with a wiſh, that Mr Hill, poſtponing his own private intereſt to the public good, may, for the ſatisfaction of mankind, publiſh the formula which he employs.

III.

III.

Pharmacopoeia Edinburgenſis, additamentis aucta ab Erneſto Godof. Baldinger, *Phil. et Med. D. Ord. Med. Got. Sen. et Prax. Med. Prof. Ordin. Acad. Imp. Nat. Curioſ. Adj. Reg. Soc. Boruſ. Viadrin. Elect. Acad. Sci. Mogunt. et Soc. Priv. Dramſt. Socio.* 8vo, Bremae.

THE Edinburgh Pharmacopoeia is here reprinted verbatim from the edition which was publiſhed at Edinburgh in 1774.

Of this part of the preſent work we have already ſpoken. It is now, therefore, our intention only, to give ſome account of the moſt important additions which are made in the preſent impreſſion. Although the learned editor of this edition is willing to allow much merit to the compilers of the original work, yet, he is very far from conſidering it as free from errors and imperfections. And his obſervations every where demonſtrate ſo much candour and judgment, as to deſerve ſerious conſideration. His additions conſiſt of three parts. The firſt contains a liſt

of the materia medica; the ſecond conſiſts of animadverſions on particular articles of the Edinburgh Pharmacopoeia; and the laſt exhibits ſelect examples of efficacious formulae.

In the liſt of the materia medica, Doctor Baldinger has beſtowed much labour on the arrangement. And, beſides diſtributing the whole into three claſſes, as taken from the foſſil, vegetable, or animal kingdom, he refers to ſeparate ſections, the roots, herbs, flowers, fruits, &c. He diſtinguiſhes thoſe articles which he conſiders as the moſt highly efficacious; and, to thoſe which are leſs generally known, he ſubjoins the title of the beſt diſſertation that has been written reſpecting them.

In the ſecond part, he firſt points out thoſe vegetables retained in the Edinburgh Pharmacopoeia, which he conſiders as ſuperfluous. Of this kind are atriplex foetida, balſamum Tolutanum, flores caryophylli, convallaria, cornu cervi uſtum, viola, and urtica. Theſe he conſiders as either in no degree poſſeſſing the virtues aſcribed to them, or being inferior to others which may be employed to anſwer the ſame intentions with greater ſafety.

Of

Of the preparations, he thinks, that the tinctura roſarum may be conſidered as a ſuperfluous formula, as he imagines that the virtue, in no degree, depends upon the roſes, but wholly on vitriolic acid.

He objects to the potio cretacea, from the apprehenſion, that this earthy matter, inſoluble in the fluids of the human body, would form an incruſtation on the inteſtines, which might be highly prejudicial to the ſyſtem.

He conſiders the vinum millepedatum as an improper formula, from the ſuppoſition, that wine is a menſtruum which will deſtroy the medical virtues of theſe animals.

To the balſamum ſulphuris, he objects, that it very ſoon becomes rancid, and that it is of little uſe, either externally or internally; and he therefore thinks, that it may be wanting without inconvenience.

He is of opinion, that the ſyrupus e rhamno, is a medicine of ſuch a draſtic nature, that it ought to be rejected; and he thinks, that the pulvis antilyſſus is totally inefficacious. To the pulvis e jallapa compoſitus, he objects, that vegetable purgatives are very apt to loſe their ac-

tivity from being kept. He thinks, therefore, that it would be better to mix the jallap and cream of tartar occaſionally. And he is alſo of the ſame opinion with reſpect to the pulvis e ſcammonio compoſitus.

Although Doctor Baldinger acknowledges, that, in his younger days, he had written in praiſe of the metallic preparation of copper and ſilver, as medicines, yet, he remarks, that he had never ventured to employ theſe in practice; and, on this ſuppoſition, he entertains doubts as to the uſe of the pilulae caeruleae of the Edinburgh Pharmacopoeia.

Our author conſiders the form of trochiſci to be fit only either for children, or for alleviating ſymptoms of diſeaſe. And he is of opinion, that the Pharmacopoeia may eaſily want trochiſci of any kind.

He concludes this ſecond part of his work with obſerving, that it has been a general complaint, from the moſt eminent of the profeſſion, that the number of plaſters and ointments was very great. And, he thinks, that the college of Edinburgh have much merit in having retained only ſome ſelect formulae of this kind.

The

The third and laſt part of this work conſiſts of examples of particular compoſitions, which our author conſiders as highly efficacious medicines. Under the head of emulſions, he recommends that impregnated with camphor, in the proportion of a drachm to a pound, in fevers where a critical eruption has diſappeared. And, in chronical nervous affections, ſuch, for inſtance, as paralyſis, he thinks, that it may be of advantage to add to this emulſion, beſides the camphor, two grains of tartar emetic.

Doctor Baldinger conſiders the mercurial ſolution recommended by Mr Plenck, as a very uſeful anthelmintic, particularly againſt the lumbrici. He recommends, as an emetic, in caſes of remittent and intermittent fever, a watery infuſion of ipecacuanha, to be prepared according to the following receipt.

℞. Pulv. rad. ipecac. ʒiſs.
Aurant. curaſs. ʒij.
Cream tart. ʒſs. ebul. cum
Aq. font. ℥iv. Colat. adde
Oxym. ſcill. ℥ſs.

This medicine gradually thrown in by ſpoonfuls, not only diſcharges by vomiting the contents

tents of the primae viae, but likewiſe operates powerfully, we are told, as a diuretic. He adds, alſo, that, in jaundice, it is often attended with the beſt effects; and that, in recent caſes, he has frequently been ſurpriſed with the efficacy of it. He recommends, as an excellent remedy in dropſical affections, the following vinous infuſion of ſquills.

℞. Rad ſcil. recen. ʒi.
Cort. aurant.
Calam aromat. āā ʒii. Infunde cum vin. alb. ℔. ij. Digere per dies tres, et colat. adde
Oxym. ſcill. ʒii.

He beſtows very high praiſes on the ſtomachic elixir propoſed by Doctor Whytt, which is prepared according to the following preſcription.

℞. Pulv. cort. Peruv. opt. ʒiv.
Rad gent. rub.
Flav. cort. aurant. āā ʒiſs.
Sp. vin. Gal. ℔. iv.
Digere per ſex dies balneo arenae, et cola.

He conſiders this medicine not only as a panacea for hypochondriaſis, but as being alſo of the higheſt virtue in other ſtomachic complaints. In

complaints

complaints of a ſimilar nature alſo, he recommends very much the following formula.

℞. Pulv. flav. aurant. cort.
Rad. rhei. opt.
Tart. tartar $\overline{aa}$ gr. xx. M. pro doſi.

By the repeated uſe of this powder alone, he tells us, that many of the ſymptoms of hypochondriaſis may be entirely removed; particularly, as deſtroying rancid bile and acid on the ſtomach; as proving a gentle purgative; and, as reſtoring the periſtaltic motion.

In phthiſical affections, which have not gone a great length, he recommends the uſe of the ſaccharum myrrhatum Hoffmanni, which conſiſts of the watery extract of myrrh, united with white ſugar.

For removing offuſcations on the cornea, he tells us, that, in numberleſs inſtances, he has ſeen the moſt happy effects from the following powder.

℞. Sach. alb.
Bol. alb. vel rub.
Cream tart. $\overline{aa}$ par pondus M. f. pulv. ſubtil.

This powder muſt be gently applied to the eye without irritation, and particularly without being blown

blown into it. In this manner, it is ſo far from inflaming the eye, that it often even removes inflammation when preſent. And, by perſiſting in the uſe of it for a ſufficient length of time, he affirms, that he has often obſerved cures, that ſeemed even miraculous, in caſes where he thought he could do no ſervice.

After obſerving that he is at a loſs to conjecture why the college of Edinburgh have, in the laſt edition of the Pharmacopoeia, omitted a formula for the pilulae ſcilliticae, which he conſiders as a very uſeful medicine; he propoſes the following, as one which he imagines is well ſuited to the intention propoſed by theſe pills.

℞. Gum. ammon.

Scil. recent. ſing. ℥ſs. Contunde ſimul in mortario, et adde.

Cardam. min. trit. ʒſs. f. pil. cum.

Balſ. copaiv. q. ſ.

He adds, however, that the following formula, to which he gives the title of the pilulae phyſagogae Ludolffi, has alſo a very powerful effect as a diuretic, while, at the ſame time, in proper doſes, it does not prove draſtic.

℞. Pulv.

℞. Pulv. rad. ſcil. ℥ſs.
Sulp. antimon. aur. tert. praecip.
Sal. vol. ſuccin. ā 3i.
Extract. elater. ℥ſs.
Ol. deſtil. aniſ. qt. aliquot. f. c. ſucc. liquir. pil. gr. i.

The doſe of theſe pills is from five to ten grains. They were firſt introduced into practice in the armies of his Pruſſian majeſty; and our author informs us, that, as a diuretic, he has often employed them with advantage in very deſperate caſes.

For ſpungy gums, attended with looſeneſs of the teeth, he recommends the following liniment.

℞. Ter. catech.
Sang. dracon. ā. p. ae.
Spir. cochlear. q. ſ. ut leni digeſtione ſolvi poſſint, et f. linim. ſpiſſior. conſiſt. cum penicillo applicand.

Theſe different preſcriptions Doctor Baldinger mentions as examples of ſelect formulae which he has found to be very efficacious. He concludes the preſent treatiſe, with promiſing to communicate to the public, on ſome future occaſion, an epitome of the rules of medical preſcription,

ſcription, a branch of the healing art which he ſtill conſiders to be in an imperfect ſtate.

IV.

Pharmacopoea Suecica, cum gratia et privilegio, S: æ R: æ Majitis. 8vo, Holmiae.

OF all the different branches of the medical art, there is, perhaps, no one which has, of late years, undergone greater alteration than that which reſpects the preparation and compoſition of medicines. Beſides which, the articles employed as medicines have alſo undergone conſiderable alterations. Some articles, at one time conſidered as powerful and efficacious medicines, are at another exploded as totally uſeleſs. And daily experience diſcovers uſeful properties in articles, which were never before employed for medical purpoſes. Of theſe aſſertions, the preſent Pharmacopoeia, as well as ſeveral others of recent date, affords indubitable evidence. From the nature of the work, however, it is impoſſible for us to give ſuch an analyſis as can convey any proper

proper idea of it. Yet, we may obſerve, that, throughout the whole, this publication bears evident marks of its being the work of intelligent practitioners. And we have little doubt in giving it as our opinion, that it is to be conſidered as, perhaps, the beſt Pharmacopoeia yet extant.

After a reſpectful dedication to his Swediſh Majeſty, and a ſhort preface, in which they explain their weights and meaſures, they deliver a few general pharmaceutical rules. They adviſe, that herbs, flowers, and the like, ſhould be quickly dried at a ſlow fire. With reſpect to powders, they obſerve, that what is firſt obtained, is, in general, the beſt. And they direct, that, in ipecacuanha, the woody part ſhould not be uſed. Yet, they allow, that, in the caſe of thoſe woody ſubſtances abounding with gums and reſins, as jallap, Peruvian bark, and the like, the powder firſt obtained is much inferior to what is got afterwards. They recommend, that gums and gummi-reſinous ſubſtances, ſhould chiefly be pounded during froſt. And, in the preparation of compound powders, they give it as a general direction, that the articles ſhould firſt be pounded, each ſeparately, and then intimately mixed.

To

To theſe rules follows the catalogue of the materia medica, containing thoſe articles which they direct to be kept in the ſhops, and which ſhould not be prepared by the apothecary himſelf.

Theſe articles are arranged in alphabetical order, and to each is ſubjoined a character, which, although ſhort, ſerves to give a very clear idea of the ſubſtance employed. A few examples will better explain the manner in which they have acquitted themſelves in this part of their work, than any account of it.

ABROTANUM. *Herba.*

Artemiſia abrotanum. CAROLI A LINNE. Spec. plant. edit. 2. *Planta hortenſis ſuffruticoſa.*

ACACIA VERA. *Succus e fructu.*

Mimoſa Senegal. L. *Africana arborea.*

ÆRUGO. *Cuprum muſto vini corroſum.*

ALCANA. *Radix.*

Anchuſa tinctoria. L. *Exotica, Europae auſtralis, Perennis.*

ALOE. Cabalina, hepatica, ſocotrina.

Aloe perfoliata. L. *Exotica Indica.*

ANETHUM. *Herba Seminea.*

Anethum graveolens. L. *Hortenſis annua.*

ARNICA.

ARNICA. *Folia, flores.*
Arnica montana L. Suecica, perennis.

ASSA FOETIDA. Gummi-reſina.
Ferula aſſa foetida. L. Aſiatica, perennis.

BDELLIUM. Gummi-reſina.
Obſcura. Arabica, palma.

CASTOREUM: *Et ejus axungia.*
Caſtor Fiber. L. s. N. *Europae ſeptentrionalis.*

CERUSSA: In laminis. *Plumbum aceti vapore corroſum.*

Theſe few examples, ſelected from the beginning of the catalogue, will give ſome idea of the method which is followed throughout the whole, both with reſpect to ſubſtances from the vegetable, foſſil, and animal kingdoms. With regard to this catalogue, we may farther obſerve, that, although the Stockholm college have rejected many articles which ſtill retain a place in other foreign Pharmacopoeias, yet their catalogue is much more numerous than that of the Edinburgh College. And it contains above an hundred and twenty articles which are not now to be found in that work. Some of theſe which have of late been recommended as uſeful remedies, on the authority of practitioners of credit, have never had a place in the Edinburgh Phar-

macopoeia. Of theſe, the following ſeem to be the chief.

Arnica montana,
Auripigmentum,
Botrys *Chenopodium Botrys L.*
Cajeput,
Camphorata. *Camphoroſma Monſpelica.*
Cicuta viroſa.
Culilavan. *Laurus Culilavan L.*
Faba Ignatii.
Inula dyſenterica.
Quaſſia.
Salicaria.
Vanilla.

After the liſt of ſimple medicines, or rather of the materia medica, they proceed to the prepared and compounded medicines. The order which they have here followed, is the arranging the whole in an alphabetical liſt. And, although this method be not altogether without diſadvantages, yet it is, perhaps, preferable to moſt others. Of the various alterations and improvements which are propoſed through this part of the work, we cannot pretend to give an account.

They propoſe that an acetum concentratum ſhould be prepared by freezing. And they give

it

it as the ſtandard of ſtrength, that one dram of it ſhould ſaturate a ſcruple of the ſalt of tartar.

They direct the preparation of an ærugo cryſtallizata, by pouring vinegar upon verdigrize, and after maceration and decantation, ſubjecting the tranſparent fluid to evaporation and cryſtallization. This preparation of the verdegrize is afterwards employed in the preparation of the aqua caerulea, or aqua ſaphirina, and for ſeveral other purpoſes.

They point out a proceſs for the purification of camphor by means of quick lime.

They give the following formula for the preparation of a ceratum labiale.

℞. Butyri recentis, inſulſi, libram ſemis
Paſſalarum exacinatarum, conſciſſarum,
Pomorum Borſdorfienſium exacinatorum et conſciſſorum,
Cerae flavae, ſingulorum uncias duas
Radicis alcannae drachmas duas

Coque leniter in vaſe figulino donec humiditas evaporata ſit, ſeu guttula carboni candenti immiſſa crepitum non edat. Maſſa fervens forti expreſſione coletur in vas aqua roſarum plenum, et refrigerata ab aqua hac liberetur.

They direct the preparation of a cremor Saturni, by uniting equal parts of the acetum ſaturninum and ſuccus citri, from briſk agitation in a glaſs mortar.

For the preparation of an electuarium e manna, we are preſented with the following formula.

℞. Mannae electae,
Sacchari albiſſimi, ſingulorum uncias duas
Aquae foeniculi, uncias duas cum dimidia
Solutionem cola cum expreſſione, et ei admiſſae Radicis Iridis Florentinae, in ſubtiliſſimum pulverem tritae, drachmam unam.
Olei amygdalarum dulcium recenter expreſſi unciam unam, fiat electuarium.

They propoſe an elixir anthelminticum, conſiſting of jallap, baſtard ſafron, ſcammony and gamboge; rectified ſpirit of wine being employed as the menſtruum.

Their emplaſtrum pro cereis medicatis, is made in the following manner.

℞. Cerae flavae leni igne liquefactae, libram unam.
Aceti ſaturnini, unciam ſemis, mixtis, et ab igne remotis, immerge telas tenues ex quibus fiant l. a. cerei.

They

They propoſe the preparation of a gelatina pomorum, by expreſſing the juice of apples, adding to it a fourth part of its weight of white ſugar, and then evaporating to the conſiſtence of a jelly.

They obtain an oleum animale by diſtillation from calcined hartſhorn, to which is added half the weight of the oil of hartſhorn. They prepare hydragogue pills from compounding gum ammoniac, ſquills, aloes, gamboge, and elatarium.

They introduce two preparations of the fixed foſſil alkali, under the titles of ſoda depurata, and ſoda tartarizata. They introduce a ſpiritus formicarum, obtained by the diſtillation of ants with ſpirit of wine and water. For purifying the terra Japonica, they recommend, that it ſhould firſt be diſſolved in water, and that then, this ſolution, after ſtraining, ſhould be evaporated to dryneſs. To this they give the title of ſuccus Japonicus depuratus; and, unqueſtionably, the name of terra Japonica, which is ſtill retained in the Edinburgh Pharmacopoeia, is with great impropriety applied to a vegetable extract.

Beſides theſe, we might take notice of many other articles, which are either peculiar to the Pharmacopoeia, and are, at the ſame time, valuable

formulae, or which may juſtly be conſidered as improvements on ſimilar preſcriptions contained in thoſe of other colleges. But we ſhall conclude our remarks on this work, with obſerving, that it terminates with a very uſeful table, ſhewing the proportion of opium, mercury, emetics, and purgatives, which enter into different compounds.

V.

An account of the Tenia, or Long Tape Worm, and of the Method of Treating it, as practiſed at Morat in Switzerland. 8vo, London.

OUR readers will recollect, that we cloſed the ſhort account we gave of the French edition of this work, in our third volume, by promiſing them a farther analyſis of it in ſome future number. Different occurrences, however, have prevented us from fulfilling our engagement, on this head, ſo early as we could have wiſhed. But we are not ſorry for the delay, as we are now able to anounce it to them in an Engliſh dreſs. The public is indebted for this edition to Doctor Samuel Foart Simmons, who has enriched it with a preface and notes.

Doctor

Doctor Simmons ſets out with obſerving, that, of the different worms which are occaſionally met with in the human body, the tenia is by far the moſt dangerous, not only on account of the ſymptoms it excites, but of the difficulty with which it is expelled. It is indeed true, that 'phyſicians, in all ages, have complained of this formidable enemy, as yielding, with certainty, to no known remedy.' He obſerves, that the curioſity of the public has long been excited with reſpect to the Morat method of treatment; that a Swiſs phyſician of the name of Herrenſchwand, more than twenty years ago, acquired no little celebrity by diſtributing a compoſition, of which he ſtiled himſelf the inventor, and which was probably of the ſame nature as Madam Nouffer; and that ſeveral very eminent men, as Tronchin, Hovius, Bonnet, Cramer, and others, have written concerning the effects of this remedy.

Doctor Simmons then proceeds to point out the different methods that have been uſed in theſe caſes, all of which, he obſerves, have been too often ineffectual. He next delivers ſome obſervations on the ſtructure of the Tenia lata, and Tenia cucurbitina. It is remarkable, he ſays, that the latter of theſe has been confounded with the

Greeks, and recommended from time to time by phyſicians of the firſt diſtinction, it had fallen, together with many others, into oblivion, and even contempt, becauſe it had not always been given with equal ſucceſs. This difference in the reſult ſeems to have ariſen, on the one hand, from the ſpecific itſelf, and the manner of adminiſtering it not having been deſcribed with ſufficient care; and, on the other, from phyſicians having deviated too much from the practice of the fathers of medicine, without conſidering ſo much as they ought to have done, that changes the moſt favourable in appearance, will often render remedies of no uſe, although former experience may have proved them to be poſſeſſed of conſiderable efficacy.

In an appendix to this work, we find two particular receipts, which were often uſed by Madam Nouffer in worm-complaints. Into one of theſe, there enters a conſiderable proportion of ceruſſe or white lead. To this formula Doctor Simmons has thought it right to add a note. 'The obſervations of the learned and in-'genious Sir George Baker, Bart. and Doctor 'Percival,' ſays he, 'do not permit me to give 'the preſent formula to the Engliſh reader, 'with-

'without cautioning him, at the ſame time, a-
'gainſt the uſe of it. Ceruſſe, when taken in-
'to the ſtomach, will be liable to produce the
'moſt deleterious effects; and the doſe of it here
'preſcribed is by no means a ſmall one, the Pa-
'ris dram being of ſeventy-two grains.' For many other obſervations, we beg leave to refer our readers to the work itſelf, which contains eighty pages, ſeventeen of which are of preface. It is likewiſe enriched with three very accurate engravings repreſenting the tenia lata, the tenia cucurbitina, and the male fern.

VI.

Thoughts on General Gravitation, and views thence ariſing as to the State of the Univerſe. 4to, London.

IN a preface to this ſhort treatiſe we are informed, that the thoughts it contains took their riſe in a philoſophical converſation, about the beginning of the preſent year. They are therefore preſented to the public as the work of more

more than one author. And they are intended to draw the attention of philoſophers to a new and curious field of ſpeculation, and to promote a ſpirit for farther reſearches into the grand ſcheme of nature.

The authors introduce their conjecture, by obſerving, that the laws of motion, with regard to all bodies, are laid down by Sir Iſaac Newton in four general propoſitions. The three firſt he lays down as axioms; but the fourth, commonly called the law of gravitation, he proves by a large and particular induction, founded on the phaenomena of our planetary ſyſtem. And the diſcovery of the law of univerſal gravitation will ever be regarded as one of the nobleſt exertions of the human faculties.

That gravity, which is indiſpenſable to the condition of every individual world, does, in reality, extend to the greateſt aſſignable diſtances, is the great hinge of the Newtonian philoſophy, and is therein fully evinced by the moſt perfect induction. The authors of this treatiſe conclude, that ſuch an extenſion of the power of gravity is incompatible with any ſyſtem of bodies in a quieſcent ſtate. For, were they in this condition, as ſoon as gravitation began to act, they would

begin

begin mutually to approach, and univerſal deſtruction would enſue.

In conſequence of an admirable contrivance, introduced by means of projectile forces, combined with thoſe ariſing from general gravitation, the planets revolve round the ſun, and neither have a continual approach to it, nor to each other. Our authors, therefore, conclude, that as gravity is eſſential to the conſtitution of all great bodies in the univerſe, periodical motion muſt be neceſſary to the permanency and order of every ſyſtem of worlds whatſoever. And, as projectile force is fitted to counteract the tendency of general gravitation in a ſmall ſyſtem, ſo they conjecture, that it will have effect alſo in the grand ſyſtem of the univerſe, round whoſe centre they ſuppoſe, that this ſolar ſyſtem of ours, and an inconceivable number of others like to it, revolve according to the law of gravitation. On this idea, in place of apprehending diſorder and confuſion from its general influence, it leads us to contemplate an endleſs number of harmonious motions, all of which loudly proclaim the ſuſtaining hand of the Deity.

The conjecture thus attempted to be eſtabliſhed by reaſoning, is, we are informed, in ſome meaſure

meaſure proved by facts. For, our authors obſerve, that, agreeably to what has been ſaid, certain proper motions of the ſtars begin actually to be diſcovered by the nicety of modern obſervations. Sirius, Caſtor, and ſeveral others, are found to be moving through abſolute ſpace, with incredible velocity. They add, that the whole fixed ſtars of the firmament are ſuſpected to do ſo by the firſt aſtronomers of this age. And they conclude, by ſaying, that poſterity muſt determine how far the obſerved laws of theſe celeſtial motions ſhall favour theſe hints of one grand univerſal ſyſtem.

SECT.

SECT II.

Medical Obſervations.

I.

The Hiſtory of a Caſe, in which the Left Arm of a Child was torn off by a Miln, without any ſucceeding Haemorhage. *By* Mr James Carmichael, *Surgeon at Port-Glaſgow, communicated to* Doctor Monro.

OCTOBER 7. 1776, a healthy girl, three years and a half old, was entangled, with an apron pinned about her ſhoulders, by the ſpindle of a barley-miln, going at its full career, and twiſted round with it with equal velocity. The father did not perceive her, till her legs ſtruck

ſtruck him behind. He inſtantly threw the water off the miln; ran down one pair of ſtairs, and removed the wedge which keeps the miln-ſtones aſſunder, before the miln could be fully ſtopped. On getting back, his child was thrown to a conſiderable diſtance, was motionleſs, and the left arm tore from her. She recovered a little, was ſenſible, and ſpoke readily.

In leſs than an hour from the accident, I found her, though loſing no blood, to all appearance dying. The extremities were cold; pulſe very low and tremulous; convulſions over the whole right ſide of the body and face; ſymptoms I attributed to loſs of blood, as well as to irritation on the ſyſtem; but I was aſtoniſhed, when I was told ſhe had not loſt a ſpoonful of blood. The left arm was off an inch and a half above the elbow. The ſtump had a ſhocking appearance. All the ſoft parts were mangled and torn, and ſtripped from the humerus up to the joint, which was in view. Several lacerations went beyond the joint, through the muſcles and common integuments. The body of the deltoid muſcle was divided up to the clavicle. The pectoral muſcle was conſiderably injured; its tendons were detached from the humerus. A third laceration

ſtretched

ſtretched backwards and downwards, terminating on the inferior coſta of the ſcapula.

In this alarming caſe, no other ſurgeon at hand, nor any proper aſſiſtant, I heſitated to attempt any operation, being affraid the child would expire under my hands. Certain death, however, ſeemed the conſequence of not doing it. I therefore determined to take off the remaining part of the humerus at the joint, and to leave no more of the muſcles and ſkin, than barely ſufficient to cover the glenoid cavity, dreading the violent inflammation which would enſue upon parts ſuſtaining ſo great injury.

Two arteries in the axilla, which were diſtinctly felt, were tied. The capſular ligament was then divided ſome length. In endeavouring to diſlocate the bone, a large artery ſprung, which, at the firſt ſtitch, was taken up, juſt at its exit from below the clavicle: No farther interruption happened during the operation. The child ſhowed no ſenſe of pain. Warm wine was poured over its throat; and, after waiting ſome time to ſee if all the blood-veſſels were ſecured, the wound was dreſſed in the uſual way.

The child's right leg had ſtruck againſt the hopper, a large wooden box, and knocked it to

a diſtance, by which both bones were fractured, with large contuſion. The eighteen tailed bandage, with long ſplints, were applied. The convulſions abated, and went entirely off in four hours. The ſymptomatic fever was milder than could have been expected. The wound digeſted well. The cure was compleated in little more than two months, the child enjoying the perfect uſe of all its ſenſes.

It is evident, the axillary artery was injured above the place where it was firſt tied, and probably would have burſt open very ſoon, from its giving way upon the firſt motion induced on the parts. The uncertainty how high ſuch injury might reach, was the reaſon why the artery was ſecured as high as poſſible. This laſt ſtich was gradually protruded, till, ſome days before it came away, it hung down a full half inch more than at firſt, which can only be accounted for, by the artery being elongated and reproduced in a correſponding length.

On accurate calculation, I found the ſpindle of the miln fly round 140 times in a minute, when working with its full force.

To what cauſe are we to aſcribe the total abſence of haemorrhagy in this caſe? Will the contorſions

torſions and convolutions which the coats of the arteries neceſſarily underwent, before a ſolution of continuity took place, ſufficiently account for not a drop of blood enſuing on this diviſion?

There was no hurt on the part of the arm that was torn away: At the point of ſeparation, the ſoft parts were cut as compleatly circular, down to the bone, as if done with the knife, except a large nerve which hung from it, four inches long. The bone projected very little.

II.

An Account of the Effects of Electricity in removing a fixed Contraction of the Fingers. By Dr Alexander Eaſon *of the 18th Regiment of Dragoons. Communicated to* Dr Duncan.

A Lady, in the county of Corke, had the misfortune to break her arm. In the uſual time after the accident, the bandage was taken off, and the arm was found to be perfectly ſtraight; but her fingers were ſhut in the palm of the hand, and could not be ſtretched out, or forced open. Stupes, and every relaxing method,

was tried ; but in vain. She went to Bath, had it pumped, and rubbed with the ſlime of the water ; but to no purpoſe.

About ten months from the time that ſhe met with the accident, ſhe came to Liſmore to viſit her ſiſter. As ſhe deſpaired of ever being better, ſhe was eaſily perſuaded by Mr Eels (an excellent electrician) to try an electric blow. He loaded his bottle pretty highly, and diſcharged it through the courſe of the flexor muſcles. In a moment the fingers flew open ; and, ever ſince, ſhe has had the proper uſe of them.

In this caſe, the nerves were not probably in fault; and the electric ſhock ſeemed to act like a force, by diſengaging the muſcles.

III.

The Hiſtory of a Convulſive Diſorder, treated by the Uſe of the Flowers of Zinc. By Dr Patrick Dugud, *Phyſician at Durham. Communicated to* Dr Duncan.

JANE HEDLEY, aged nine years, of a relaxed habit of body, and delicate conſtitution, was ſuddenly, about two years ago, without

without any previous indiſpoſition, ſeized with a violent convulſive fit; during which, the whole muſcular ſyſtem was affected with irregular ſpaſmodic contractions. Her countenance became pale and contracted; her eyes rolled wildly; the muſcles of the mouth were thrown into a convulſive grin; her knees were almoſt brought to touch the ſternum; whilſt her feet, with the toes diſtorted inwards, ſeemed to reach the anus. Upon undreſſing her, there was obſerved, immediately below the falſe ribs of the left ſide, a round and circumſcribed ſwelling, ſoft, and yielding to the touch; which, in this, and all the ſubſequent paroxyſms, no ſooner began to diminiſh, than all the other ſymptoms vaniſhed; and ſhe was left in an abſolute ſtate of ſtupefaction, which generally terminated in a profound ſleep.

After this firſt attack, which laſted ſeveral hours, the ſame ſeries of ſymptoms continued, for ſix months, to return, at irregular intervals, three or four times a week. About this time, ſhe was ſeized with a fever, which had almoſt proved fatal. On her recovery from it, ſhe paſſed three large round worms, and had no return of the fit till two months after, when they again attacked her, with all their former violence; and increaſed ſo much in frequency, that, at the time I was de-

ſired to viſit her, ſhe generally had a fit every three hours; which, however, ſeldom exceeded twenty minutes in duration. I had often an opportunity of ſeeing the girl under the paroxyſm, and found that it literally anſwered the deſcription given me of the firſt attack. I was informed by her friends, that ſhe was naturally a girl of great ſenſibility, quick conception, and a retentive memory; but that her diſorder had ſo much impaired the faculties of her mind, that ſhe had forgot every thing ſhe had formerly learned, and hardly knew a ſingle letter of the alphabet.

As the girl formerly had paſſed worms, and continued to have ſeveral of the chief ſymptoms which are ſuppoſed to indicate their preſence in the inteſtinal canal, viz. foetid breath, ſlimy ſtools, grinding of the teeth, &c. I thought it more than probable that all her complaints originated from this cauſe; and therefore judged it proper to put her, for ſome time, upon a courſe of anthelmintics. But, on finding that, inſtead of alleviating the ſymptoms, they evidently aggravated the diſeaſe, I was naturally led to refer the whole phaenomena to a peculiar ſtate of mobility in the nervous ſyſtem; and, as the higheſt encomiums had been lately beſtowed by Gaubius,

bius, and others, on the flores zinci, in ſpaſmodic and convulſive diſorders, I reſolved to give them a trial. And, in order to preclude any chance of fallacy with reſpect to their effects, I laid aſide all other medicines, and, on the 24th of July 1776, preſcribed the following ſimple pill:

℞ Flor. zinc. ʒſs.
Extract. gentian. ʒiſs. ſyr. zingib. q. s. f. pilul. No. xxx. quarum duas ſumat omni m. et v.

I was ſent for in the afternoon, and informed that ſhe had ſcarcely taken the pills half an hour, when ſhe was ſeized with a ſevere headach, accompanied with reaching, vomiting, and gripes. I ordered for her a gentle laxative clyſter, and an anodyne draught, at bed-time; and was told next morning, that the nauſea and gripes had ceaſed on taking the opiate, and that ſhe had fewer fits in the night than uſual. On examining the flowers of zinc, I found them very ill prepared, and more like a corroſion of the zinc than a true calx. I therefore cauſed ſome to be procured, which I could depend on as genuine, and gave them under the form of a powder, as more a-

greeable to the girl, who had a difficulty in ſwallowing pills.

℞ Flor. zinc. gr. xxiv.
Sacchar. alb. ʒiſs. m. s. a. et. divid. in doſ. xii.
Cap. doſin omni m. et v.

On the 30th, ſhe began to uſe the powders, which ſat eaſily on her ſtomach; and ſhe had only taken them two days, when the return of the fits became ſenſibly leſs frequent.

On the 4th of Auguſt, I deſired that ſhe ſhould take three doſes of her medicines every day; and, from that period, the fits began to diminiſh ſo faſt in the frequency of their return, as well as to abate in the violence of their ſymptoms, that, in leſs than a week, they never recurred in the night, and not above thrice through the day. The flatulent ſwelling, (for ſuch I ſuppoſed it to be,) formerly obſerved to riſe in her ſide, became ſcarcely perceptible; the muſcular ſyſtem was now no more thrown into ſpaſtic and convulſive motions; nor was the paroxyſm, which had aſſumed the type of a common *ſyncope*, ſucceeded by any ſenſible degree of ſtupor or coma.

On the 11th, her medicine was increaſed to four dozes a day; after which the paroxyſm never

never returned oftener than once in the twenty-four hours, and rarely laſted above five minutes. She now began to recover the uſe of her reaſon and memory, to give pertinent anſwers when ſpoken to, and to recollect things which ſhe had learned by heart two years before. She was now, for the firſt time, allowed to go abroad without an attendant.

On the 14th, ſhe began to take gr. xii. of the zinc, and had not any return of the fits till the morning of the 18th, when, on being hurried out of bed, ſhe had a ſlight paroxyſm, which only laſted about three minutes. She was ſenſible of its approach, and, whilſt it continued, ſeemed nowiſe convulſed. As ſhe had experienced no inconveniency from gr. xii. of the zinc, I ventured to preſcribe gr. xv. a-day, which was attended with ſo happy an effect, that the fits entirely ceaſed; but ſhe continued to be affected with a ſudden tremor or ſtarting every morning, much about the ſame time that ſhe had been formerly wont to have a ſevere paroxyſm. Being, however, deſired to take every morning a a doſe of her medicine before ſhe got out of bed, this complaint, in a few days, entirely vaniſhed, and, with it, every other ſymptom of her diſorder,

diſorder, both of mind and body. But, as the girl was naturally of a relaxed and delicate habit of body, I thought there was ſtill ſome reaſon to apprehend a relapſe, and therefore recommended to her the uſe of ſea-bathing, as a ſafe and powerful tonic, and well calculated to remove that conſtitutional irritability of ſyſtem, which ſeemed to be the *prima mali labes*, and proximate cauſe of the diſeaſe.

In the latter end of Auguſt ſhe began to bathe, and perſevered in it for ſome weeks; after which ſhe was ſent into the country, where ſhe ſtaid near two months, and returned to town perfectly well in every reſpect. She continued in a ſtate of health till the 3d of December, when, having walked out, ſhe dropped down in a violent convulſion-fit; and was no ſooner out of one fit, than ſhe was taken with another. I did not ſee her till the 5th, when I found her in a ſituation, that left very little room to doubt of the event. Her pulſe was extremely quick and ſmall, and intermitted every third or fourth pulſation; her looks were wild and ghaſtly; her lower extremities were become paralytic; ſhe had ſubſultus tendinum, ſingultus, and all the

ſymptoms

ſymptoms of an approaching diſſolution; which accordingly happened next morning.

Tho' the above caſe terminated fatally, it, in my opinion, affords the moſt convincing proof of the powerful and ſalutary effects of the flowers of zinc in convulſive and ſpaſmodic diſeaſes. I have had an opportunity of uſing them in three other caſes of this nature; in two of which they were evidently attended with conſiderable advantage; but, in the third, they entirely failed.

SECT.

SECT. III.

Medical News.

IN the new edition of the Methodical Introduction to the Theory and Practice of Phyſic, by Dr David M'Bride, lately publiſhed at Dublin, among other additions which may be conſidered as entirely new, is a caſe of Angina Pectoris. This caſe, we are told, was communicated to Dr M'Bride by Dr Smyth of Dublin, who ſtill continues at the head of his profeſſion in that kingdom; a ſtation which he has deſervedly held for near thirty years.

As Dr Smyth ſeems to be the firſt who thought of a radical cure for this diſtemper, by means of iſſues and alteratives; and, as this practice may be inſtrumental in preſerving many uſeful lives,

we

we have little doubt that this caſe, extracted at full length, from the work we have mentioned, will be acceptable to our readers.

" *A. B.* a tall, well made man; rather large than otherwiſe; of healthy parents, except that there had been a little gout in the family; temperate; being very attentive to the buſineſs of his trade, (that of a watch-maker,) led a life uncommonly ſedentary; had, from his boyhood upwards, been remarkably ſubject to alarming inflammations of his throat, which ſeized him, at leaſt, once in the courſe of the year; in all other reſpects well.

In 1767, (then 48 years of age,) he was taken, without any evident cauſe, with a ſudden and very diſpiriting throbbing under the ſternum. It ſoon afterwards increaſed, and returned upon him every third or fourth week, accompanied with great anxiety; very laborious breathing; choaking; a ſenſation of fulneſs and diſtenſion in his head; a bloated and fluſhed countenance; turgid and watery eyes; and a very irregular and unequal pulſe. The paroxyſm invaded, almoſt conſtantly, while he was ſitting after dinner; now and then he was ſeized with it in the morning, when walking a little faſter than uſual; and was then obliged

obliged to ſtop, and reſt on any object at hand. Once or twice it came on in bed, but did not oblige him to ſit up, as it was then attended with no great difficulty in breathing. In the afternoon fits, his greateſt eaſe was from a ſupine poſture; in which he uſed to continue motionleſs for ſome hours, until, quite ſpent and worn out with anguiſh, he dropt into a ſlumber. In the intervals between theſe attacks, which at length grew ſo frequent as to return every fourth or fifth day, he was, to appearance, in perfect health.

"Thus matters continued for more then two years; and various antiſpaſmodics were ineffectually tried for his relief. In 1769, there ſupervened a very ſharp, conſtrictory pain, at the upper part of the ſternum, ſtretching equally on each ſide, attended with the former ſymptoms of anxiety, dyſpnoea, choaking, &c. and with an excruciating cramp, as he called it, that could be covered with a crown-piece, in each of his arms, between the elbow and the wriſt, exactly at the inſertion of the pronator teres; the reſt of the limb was quite free. The fits were ſometimes brought on, and always exaſperated, by any agitation of mind or body. He once attempted to ride o'horſeback during the paroxyſm; but the expe-

experiment was near proving fatal to him. The difference of ſeaſon or weather made no impreſſion upon him. Still, in the intervals, his health was perfectly good; except that his eyes, which, before his illneſs, were remarkably ſtrong and clear, were now grown extremely tender; and that his ſight was much impaired. He had no flatulency of ſtomach, and his bowels were regular.

"In this ſituation, Feb. 22. 1770, he applied to me for aſſiſtance. I had ſeen, I believe, eight or ten of theſe frightful caſes before. Two of the patients dropt dead ſuddenly. They were men between forty and fifty years of age, and of a make ſomewhat fleſhy. The fate of the others I was not informed of; or, at leaſt, cannot now recollect.

"Having found the total inefficacy of bliſters, and the whole claſs of nervous medicines in the treatment of this anomalous ſpaſm, I thought it right to attempt the correcting, or draining off, of the irritating fluid in the caſe now before us; to this purpoſe, I ordered a mixture of aq. calc. mag. c. with a little of the aq. junip. c. and an alterative proportion of Huxham's antimonial wine; I put the patient on a plain, light, perſpirable

ſpirable diet ; and reſtrained him from all viſcid, flatulent, and acrimonious articles. By purſuing this courſe, he was ſoon apparently mended ; but, after he had perſiſted regularly in it for at leaſt two months, he kept for ſome time at a ſtand. I then ordered a large iſſue to be opened in each of his thighs. Only one was made. However, as ſoon as it began to diſcharge, his amendment manifeſtly increaſed. The frequency and ſeverity of the fits abated conſiderably ; and he continued improving gradually until, at the end of eighteen months, he was reſtored to perfect health ; which he has enjoyed, without the leaſt interruption, till now, except when he has been tempted (perhaps once in a twelvemonth) to tranſgreſs rules, by making a large meal on ſalted meat, or indulging himſelf in ale, or rum-punch ; each of which never failed to diſorder him from the beginning of his illneſs ; and, even on theſe occaſions, he has felt no more than the ſlighteſt notion of his former ſufferings ; inſomuch, that he would deſpiſe the attack, if it did not appear to be of the ſame ſtock with his old complaint. No other cauſe has had the leaſt ill effect on him.

" Though rum was conſtantly hurtful, yet punch made with a maceration of black currants in

in our vulgar corn ſpirit, is a liquor that agrees remarkably well with him.

He never took any medicine after the iſſue began to diſcharge; and I have directed that it ſhall be kept open as long as he lives. The inflammations of his throat have diſappeared for five years paſt; he has recovered the ſtrength and clearneſs of his ſight; and his health ſeems now to be entirely re-eſtabliſhed.

* * * * *

Doctor Macbride, in a letter to Doctor Duncan, gives the following additional obſervations on the angina pectoris.

Within theſe few weeks I have, at the deſire of Doctor Smyth, viſited, three or four times, a very ingenious man who keeps an academy in this city, of about 34 years of age, who applied to the Doctor for his advice in January laſt.

I ſhall give you his ſymptoms as I had them from his own mouth, which appear to me to mark his caſe to be an angina pectoris, and as deplorable as any that I have read of. It was ſtrongly diſtinguiſhed by the exquiſite conſtricto-

ry pain of the ſternum, extending to each of his arms, as far as the inſertion of the deltoid muſcle; extreme anxiety; laborious breathing; ſtrangling; and violent palpitation of the heart, with a moſt irregular pulſe. The paroxyſms were ſo frequent, that he ſcarcely ever eſcaped a day, for ſix or ſeven years, without one. They were uſually excited by any agitation of mind or body, though ſlight. He had clear intervals of health between the fits. The diſtemper ſeemed hereditary in him, as he ſays his father was affected in the ſame manner ſome years previous to his death. He has a ſtrong gouty taint, which never ſhewed itſelf in his limbs; and he has led a life of uncommon ſedentarineſs, from intenſe application to mathematical ſtudies, attention of mind, and paſſion, even from his boyiſh years. Theſe circumſtances may, perhaps, account for his having been taken with this diſeaſe at ſo early an age as ſeventeen.

A large iſſue was immediately opened in each of his thighs. In a month afterwards, he began to mend, and has gone on improving gradually. He can now run up ſtairs briſkly, as I ſaw him do no latter than yeſterday, without hurt; can bear agitation of mind; and has no complaint, except-

excepting a ſlight oppreſſion of the breaſt, under the ſternum, which he feels ſometimes in a morning, immediately after dreſſing himſelf; and which, he thinks, is brought on by the motion uſed in putting on his cloaths; though, for a compleat week preceding the day on which I ſaw him laſt, he told me, that he had been entirely free from all uneaſineſs, and was exulting, that he had not had ſuch an interval of eaſe for theſe laſt ſeven years.

Doctor Smyth alſo ſhewed me, in his adverſaria, the caſe of a gentleman who had been under his care in 1760, which he had forgotten when my book went to the preſs, and which he was reminded of the other day, by a viſit from his patient. It was a genuine angina pectoris, brought on by a very ſedentary life, and great vexation of mind, clearly marked by the exquiſite pain under the ſternum, that extended acutely to the upper extremities, particularly along the left arm, together with the other ſymptoms of dyſpnoea, anxiety, palpitation of the heart, &c. recited in the caſe above. The diſorder went off in 1762, by large ſpontaneous diſcharges from the piles, but returned upon him ſeverely in 1765. Iſſues in his thighs were then recommended to

him, but not made. But, whether it was by the perſuaſion of ſome friend, or of his own accord, he went into a courſe of James's powder, in ſmall alterative doſes, combined with a little caſtor and aſſa foetida. This he perſiſted in for about ſix weeks; in the meanwhile, he had large acrimonious gleetings from the ſcrotum, and a plentiful diſcharge of ichor from the anus. From this time he began to find his complaints grow leſs and leſs diſtreſſing, and he has now been totally free from them for ſix years paſt.

Here, then, you ſee a perfect cure performed by an antimonial alterative, and a copious dram. The caſtor and aſſa foetida could have no ſhare in it; for the moſt powerful nervous medicines had been ineffectually uſed before in large doſes, ſo that the ſucceſs and efficacy of this practice appear to be now ſufficiently eſtabliſhed.

* * * * *

Mr Cruikſhank, in a letter to Doctor Duncan, has the following obſervations reſpecting oſſification.

Doctor Hunter uſed to ſend round, at lectures, a preparation of the patella, in which he demonſtrated,

ſtrated, that the oſſification of that bone began by the arteries oſſifying in the centre of the cartilage, which, in young ſubjects, ſupplies the place of bony patella. I have proſecuted that ſubject, from the firſt appearance of oſſifying artery, to the perfect formation of the patella. I ſuppoſed that the ſame thing took place in all other bones, and accordingly, have made preparations to demonſtrate it, in almoſt every bone in the body; and can ſhow, that oſſification is not only begun, but carried on by the oſſifying of the arteries.

* * * * *

It gives us particular pleaſure to be able to announce to our readers, the origin and progreſs of eſtabliſhments, calculated for extending to the indigent thoſe bleſſings which reſult from the medical art. This is eſpecially the caſe, when theſe eſtabliſhments are of ſuch a nature as muſt tend to the improvement of that art. And ſuch muſt be the conſequence of every inſtitution, which, while it furniſhes the means for the removal of diſeaſe, to thoſe whoſe narrow circumſtances cannot afford it, at the ſame time, leads medical

practitioners to pay minute attention to facts, and to record them with accuracy and fidelity. It is with great ſatisfaction, then, that we can now mention the progreſs which has been made by the Diſpenſary at Kelſo. We obſerved in a former number, that ſuch an eſtabliſhment was propoſed at that place. This propoſal is now carried into execution. And it has received the countenance and ſupport of the people of higheſt rank in that neighbourhood. His Grace the Duke of Roxburgh is choſen preſident, the right honourable the Earl of Hadington, the honourable Mr Baillie, and Colonel Pringle, are choſen vice-preſidents. Three phyſicians have undertaken the conduct of the medical department, and are to give attendance and advice without any expence to the charity. With ſuch ſupport, it can hardly fail to be a laſting bleſſing to the poor in that neighbourhood.

Although the Diſpenſary which has lately been eſtabliſhed at Edinburgh, has not yet met with the countenance of men of very high rank, yet the ſupport of generous and humane citizens has made ſome progreſs towards rendering it a permanent inſtitution. And the happy effects of which it has already been productive, will, it

is

is imagined, be the means of obtaining ſuch aid from the benevolent, as will perpetuate and extend its influence. Upwards of 200 patients, whoſe caſes were either of ſuch a nature as rendered them improper objects for admiſſion into the Royal Infirmary, or did not require confinement, have already been admitted to the benefits of this charity; and, when a larger fund can be procured, it will be much more extenſively uſeful.

A liſt of thoſe who have reaped the benefits of it, will ſoon be laid before the public, exhibiting a view of the commencement, termination, and event of each caſe. But, beſides this, the volume of medical caſes, ſelected from the records of this charity, which we formerly ſaid was preparing for publication, is now in the preſs. By this means, thoſe medical practitioners who dedicate any portion of their time to the ſtudy of their profeſſion, and who are not blinded by narrow minded prejudice, will be able to judge how far it has had any good effect, as affording a foundation for teaching, and even for improving the healing art.

We hear, with ſatisfaction, that a ſcheme is in agitation for eſtabliſhing a Diſpenſary at Dundee. And it is to be hoped, that the example which has been ſet by the people of higheſt rank in the neighbourhood of Kelſo, will be followed by the great and opulent in that part of the country. The expence of ſupporting an hoſpital, where patients muſt not only be provided with medicines, but with lodging, food, and proper attendance, muſt neceſſarily be great, if the benefits of it are to be extended to many individuals. But the ſingle object of furniſhing them with the moſt effectual remedies for the removal of their diſeaſes, may eaſily be obtained. Would it not then reflect honour on the profeſſion of medicine; would it not tend to the improvement of the art, if the practitioners in every large town, eſpecially in thoſe unprovided with hoſpitals where there is an eſtabliſhment for out-patients, were to uſe their endeavours to draw the attention of the great and the wealthy to a ſpecies of charity, which, perhaps, of all others, is the leaſt liable to abuſe, while it is highly advantageous to ſociety?

Doctor

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Doctor John David Hahn, profeſſor of medicine at Leyden, in a letter to Doctor Duncan, gives the following intelligence reſpecting ſeveral new books which will ſoon appear at that place.

Venerabilis noſter Gaubius curavit nuper editionem duorum libellorum, Gallice ſcriptorum ab amico ſuo illuſtri Sanches Archiatro Ruſſico, in quibus valde probabiliter docetur, luem veneream non ex America in Europam fuiſſe delatam. Si nondum ad vos pervenerint, mittam cum aliis diſſertationibus prima data occaſione. Nonnulla teſtimonia quae Ill. Sanches praetermiſit, ſupplere audet Cl. Henſlerus, medicus Altonenſis, qui in eo eſt ut verſionem Germanicam opuſculi Sancheſiani paret et notis augeat.

Schillingii medici Surinamenſis obſervationes de lepra et elephantiaſi, typis Luchtmannianis exſcribuntur et brevi edentur. Miſerat eas ad me auctor jam ante biennium. Curavi eas quoad potui, et praefatione comitabor proditurus, faciamque ut ad te ocius perveniant.

Beerenbrockius noſter in eo eſt ut verſionem Latinam operis Culleniani quam Edinburgi perfecit

cit typis Luzai exſcribendam curet; quo in negotio ſtrenuum virum quoad potero adjuvare ſtudebo.

* * * * *

Archibald Menzies, Eſq; of Culdairs, one of the commiſſioners of his Majeſty's revenue of cuſtoms, and one of the truſtees for improvements in Scotland, died lately in the neighbourhood of Edinburgh. While his family, friends, and acquaintance, are thus deprived of a moſt valuable man, Philoſophical Society, at the place of its reſidence, has loſt one of its greateſt ornaments. Improvement in ſcience, and in uſeful, as well as polite arts, had been the great objects of his attention, during the courſe of his travels, for ſeveral years, through different parts of Europe. And, after ſettling in his native country, it was his principal aim to employ the knowledge which he had acquired to the benefit of his fellow ſubjects. But, by the rapid progreſs of a fatal fever, occurring to him at the prime of life, his country is deprived of many advantages which it might have derived from him, and friendleſs merit has loſt a ſteady and diſintereſted patron.

SECT.

SECT IV.

Liſt of New Books.

FLORA Scotica, or a ſyſtematic arrangement in the Linnean method, of the native plants of Scotland and the Hebrides. By John Lightfoot, A. M. rector of Gotham in Notinghamſhire, and chaplain to the Ducheſs Dowager of Portland. 2 vols, 8vo, London.

Illuſtratio ſyſtematis ſexualis Linnaei, or an illuſtration of the ſexual ſyſtem of Linnaeus. By John Miller. 2 vols, folio.

A philoſophical eſſay concerning light. By Bryan Higgins, M. D. Vol. I. 8vo, London.

Reports of the humane ſociety, inſtituted in the year 1774, for the recovery of perſons apparently

parently drowned. For the year 1776. 8vo, London.

An eſſay on the theory and cure of the venereal gonorrhoea, and the diſeaſes which happen in conſequence of that diſorder. By John Andrée, ſurgeon to the Magdalen hoſpital, and teacher of anatomy. 8vo, London.

A letter from the celebrated Doctor Tiſſot to Doctor Zimmerman, on the morbus niger, including ſome oppoſite caſes, equally curious and intereſting. The whole illuſtrated with an account of the morbid appearances of diſſected bodies. Tranſlated from the French by John Burke, M. D. 8vo, London.

A letter to the Maſter, Wardens, and court of Aſſiſtants, of the corporation of Surgeons. By a member of the corporation. 8vo, London.

Philoſophical tranſactions of the Royal Society of London. Vol. 67. P. 1. 4to. London.

Flora Londinenſis, or plates and deſcriptions of ſuch plants as grow wild in the environs of London, with their places of growth and times of flowering; their ſeveral names, according to Linnaeus, and other authors; with a particular deſcription of each plant in Latin and Engliſh.

To

To which are added, their ſeveral uſes in medicine, agriculture, rural oeconomy, and other arts. By William Curtis, demonſtrator of Botany to the company of Apothecaries. Folio, London.

A compleat treatiſe of electricity, in theory and practice, with original experiments. By Tiberius Cavallo. 8vo, London.

A ſtrict and impartial inquiry into the cauſe of the death of the late William Scawen, Eſq; of Woodcote Lodge in Surry. To which is added, an account of accidental poiſons to which families are expoſed, with their antidotes, under the following general heads, viz. ſtings and bites, vegetables, minerals, fumes, and vapours. By Doctor Ingram. 8vo, London.

Inſtitutions des ſourds et muetes par la voie des ſignes methodiques; ouvrage qui contient le projet d' une langue univerſelle par l' entremiſe des ſignes naturels aſſujettis a une methode, 12mo, Paris.

Memoire pour ſervir au traitment d'une fivre epidemique, fait et imprimé par ordre de gouvernment. Par M. Maret, Docteur en medecine de l' univerſité de Montpellier, &c. 8vo, Dijon.

Obſer-

Obſervations ſur la nature, les cauſes, et le traitment de la maladie epidemique des chiens. Par M. Fournier, Docteur en medecine de la faculté de Montpellier, &c. 8vo, Dijon.

Deſcriptiones animalium, avium, amphibiorum, piſcium, inſectorum, vermium, quae in itinere Orientali obſervavit Petrus Forſkaal, poſt mortem autoris edidit Carſten Niebuhr. 4to, Havniae.

Flora Egyptiaco-Arabica Petri Forſkaal, edita a Carſten Niebuhr. 4to, Havniae.

Catachiſme de l'art des accouchemens pour les ſages-femmes de la campagne, fait par l'ordre et aux depens du gouvernment. Par M. Augier, du Fot, Docteur en medecine, &c. 12mo, Paris.

Abrégé de l'art des accouchemens a l'uſage des accoucheurs, des ſages-femmes, et des meres de famille de Montbeliard. Par M. Bardot fils, Doct. en med. conſeiller phyſicien adjoint de la principauté. 8vo, Baſle.

Le medecin miniſtre de la nature, ou recherches et obſervations ſur le pepaſme, ou coction pathologique. Par. M. Joſeph Francois Carrere, Cenſeur Royal, Docteur en medecine de l'univerſi-

verſité de Montpellier; de la Société Royale des ſciences de la meme ville, &c. 8vo, Paris.

Diſſertationes medicae inaugurales, quas ex auctoritate reverendi admodum viri Gulielmi Robertſon, S. S. T. P. Academiae Edinburgenae praefecti; nec non ampliſſimi ſenatus academici conſenſu, et nobiliſſimae facultatis medicae decreto, pro gradu doctoratus, ſummiſque in medicina honoribus et privilegiis rite et legitime conſequendis; eruditorum examini ſubjecerunt. Prid. Id. Septembris, 1777.

Edvardus Stevens, A. B. ex India Occidentali. De Alimentorum Concoctione.

Carolus Webſter, A. M. Britannus. De Vaſorum ſanguiferorum libramine.

Franciſcus Hopkins, A. B. Hibernus. De Schirro et Carcinomate.

Jacobus Proſſor, Hibernus. De Sanitate ad longevitatem tuenda.

Alexander Bertram, Britannus. De Phrenitide.

Thomas Nayſmith, Britannus. De Rachitide.

Henricus Haſkey, Britannus. De Ferro ejuſque in Morbis curandis Uſu.

Jacobus

Jacobus Ford, Anglus. De Fermentatione.

Thomas MacFarquhar, Britannus. De Typhi Flavi Symptomatis et Cauſis.

Columbus MacQueen, Britannus. De Mulierum Sanitate tuenda.

Thomas Cupples, Hibernus. De Hypochondriaſis Cauſis.

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MEDICAL

AND

PHILOSOPHICAL

COMMENTARIES.

By a SOCIETY in EDINBURGH.

Si quis verus medicus eſt, idem ſit, ut veritatis, ſic etiam temperantiae amicus; illudque intelligitur eundem eſſe methodi rationalis ſtudioſum, ut morborum quot genera ſint ſpecieſque cognoſcat; utque in ſingulis illis quo pacto ſumenda ſit indicatio remediorum intelligat. GALENUS.

M. Wall

VOLUME FIFTH.

PART II.

LONDON:

Printed for J. MURRAY, No. 32. Fleet-ſtreet;
W. CREECH, C. ELLIOT, and
M. DRUMMOND, *Edinburgh*;

M,DCC,LXXVIII.

W.M.W

MEDICAL COMMENTARIES.

SECT. I.

An Account of Books.

I.

Medical Inſtructions towards the Prevention and Cure of Chronic or Slow Diſeaſes peculiar to Women. *By* John Leake, M. D. *Phyſician to the Weſtminſter lying-in Hoſpital*, &c. London, 1777.

A Volume of Practical Obſervations on the *acute diſeaſes incident to women*, publiſhed by Dr Leake about four years ago, met with a very favourable reception. The Doctor has

thereby, we are told, been in ſome meaſure induced to favour the public with the work at preſent before us. In this and the former volume, he obſerves, tho' unconnected with each other, is contained the treatment of all ſuch maladies incident to women, whether acute or chronical, as are moſt dangerous and difficult of cure.

To examine and reject ſuch cuſtoms as tend to prejudice the underſtanding and injure health; to point out the dangerous abuſe of powerful medicines; and, to afford women an adequate idea of their own diſorders, as well as the moſt gentle and effectual methods of treating them, are the intentions, we are told, of theſe medical inſtructions.

Our author afterwards obſerves, however, that, although this work was principally intended for the female ſex, yet it conſiſts of ſuch doctrines as he has advanced in his public lectures on midwifery, and adopted with ſucceſs in the courſe of ſeveral years practice. He thinks, therefore, that it will afford uſeful and neceſſary information to all thoſe engaged in that branch of ſcience, or to ſuch as deſire a competent knowledge

ledge of the female conſtitution, and the true nature of its ſeveral diſeaſes.

After an introduction of conſiderable length, we are preſented, in the firſt book of the work itſelf, with many uſeful obſervations on the periodical diſcharge incident to women, in its ſeveral ſtates of health and diſeaſe, or the different diſorders that commonly ariſe in the decline of life from the ceſſation of that diſcharge.

Dr Leake does not attempt to inveſtigate the proximate cauſe of the monthly diſcharge in women. He only obſerves, that the ſuperfluous blood carried off by that evacuation, is certainly intended for the ſervice of the child; becauſe, both with pregnant women and nurſes who give ſuck, the menſes are naturally wanting. With the firſt, they are conſumed by the foetus in the womb; with the laſt, by milk drawn from the breaſts. No other reaſon, he obſerves, can be aſſigned, why they ſhould come on at the age of maturity, and ceaſe in the decline of life; or even why they do not appear in the infant ſtate, and continue periodically ever after till extreme old age, ſince the ſtructure of the womb, and diſtribution of its veſſels, are nearly alike in all theſe periods.

The common opinion, that an obſtruction of the menſes is almoſt the ſole cauſe of ill health in women, is conſidered by our author as very ill founded. He looks upon it to be much more frequently a ſymptomatic than a primary diſorder; and he obſerves, that, as an ill ſtate of health often occaſions ſuch obſtructions, ſo the menſes, like other evacuations natural to the body, frequently return, if health can be again reſtored.

As an *immoderate diſcharge* of the menſes ſeems moſt frequently to proceed, either from a weakneſs of the uterine veſſels, from a ſharp, thin blood, or from ſome cauſe which preternaturally increaſes its motion, thoſe things which give ſtrength to the ſolids, and balſam to the blood, with reſt of body and mind, are more eſpecially recommended by our author.

Dr Leake, when ſpeaking of the ceſſation of the menſes, obſerves, that more women die about this age, than at any other period during the years of maturity. For, as many conſtitutional infirmities, he remarks, are relieved by the firſt approach of the menſes, ſo they often return at the ceſſation of that diſcharge.

To aſſiſt the conſtitution during that critical change which happens at the ceſſation of the

the menſes, and to compenſate for the want of that long accuſtomed diſcharge, bleeding once a month, with the uſe of gentle laxatives, are particularly recommended, eſpecially in ſtrong habits, where there ſeems to be an abundance of blood. The patient is alſo deſired to leſſen the uſual quantity of animal food, and to live chiefly on vegetables, fiſh, and ſpoon-meats. When, however, the patient is delicate, ſubject to a female weakneſs, night ſweats, fluſhings in the face, and hectic fever, a very different courſe comes then to be proper. For ſuch patients, aſſes milk, jellies, and raw eggs, are recommended, together with a moderate uſe of old London porter, or Rheniſh wine.

Should the bleeding piles appear at this juncture, ulcerous ſores break out in the legs, or eruptions on the ſkin, the firſt ought not to be reſtrained, or the laſt dried up: For thoſe diſcharges, under ſuch circumſtances, are generally critical; and our author has obſerved, that, where they were ſuddenly ſuppreſſed, an acute rheumatiſm, hyſterics, convulſions, and even death itſelf, have been often the conſequence.

Doctor Leake obſerves, when treating of the fluor albus, that he has attended more patients labouring

terial facts and uſeful obſervations, we cannot, conſiſtently with the extent of our own undertaking, attempt to abridge the remainder of the volume, without curtailing the different parts of it ſo much, as might occaſion ſome riſks of the author's meaning being miſunderſtood. We think it better, therefore, merely to enumerate the titles of the different ſections, by which our readers will ſee what ſubjects are treated of, and any who would wiſh for farther information muſt apply to the work itſelf.

In the ſeventh ſection, the author treats of abortion and barrenneſs, and gives rules and cautions for the conduct and regimen of women during the ſeveral ſtages of pregnancy: In the eighth, of the haemorrhoids or piles, obſtruction or incontinence of urine, ſtrangury, and ulceration of the bladder: In the ninth, of diſeaſes of the ſtomach and bowels: In the tenth, of nervous diſorders, hyſteric affections, low ſpirits, and melancholy: In the eleventh, of conſumption, or inward decay: In the twelfth, of dropſy: In the thirteenth, of diſeaſes of the ſkin, and of glandular or cancerous ſwellings of the face, neck,

and

and breaſts: In the fourteenth, of the influence of the paſſions on the body and mind, and effects of climates or changes of weather on delicate conſtitutions. In the fifteenth, of the ſalutary power of air, diet, exerciſe, and ſimple medicines, in the prevention and cure of chronic diſeaſes.

There is likewiſe a ſupplement to the whole, containing inſtructions for thoſe who conſult a phyſician by letter, together with ſeveral ſimple forms of medicines, occaſionally referred to in the work. A remarkable fact related by our author, when treating of conſumptions, we cannot avoid mentioning, as it ſets, in a very ſtrong point of view, the fatal effects of that dreadful diſorder.

By the London yearly bills of mortality, it appears, that the number of thoſe carried off by conſumptions, makes nearly a fifth part of the whole dying by all diſeaſes put together. On examining the ſeveral bills of mortality for the laſt ſix years, the proportions ſtood thus:

Sum total of deaths from December 1770 to December 1771, 21780, of whom died of conſumptions 4809, being more than a fifth of the whole.

From

From the year 1771 to 1772, total of deaths 26053, of whom died of conſumptions 5179, being about a fifth of the whole. From 1772 to 1773, total of deaths 21656, of whom died of conſumptions 2825. From 1773 to 1774, total of deaths 20884, conſumptions 4242. From 1774 to 1775, total of deaths 20514, conſumptions 4452. From 1775 to 1776, total of deaths 19048, conſumptions 4508, being nearly a fifth of the whole.

From the above it appears, that nearly five thouſand people are annually cut off by conſumptions in the cities of London and Weſtminſter. And, our author obſerves, that, on a moderate computation, upwards of thirty thouſand people muſt die yearly in Britain of this deſtructive malady. Of theſe by far the greateſt part, we are told, are women, who fall victims to this diſeaſe in conſequence of irregularities peculiar to their ſex.

II.

Propoſals for the Recovery of People apparently drowned. *By* John Hunter. F. R. S. Vid. *Philoſophical Tranſactions*, Vol. LXVI. part II. 4to, London.

THE obſervations here communicated to the public, were committed to paper, we are told, at the deſire of a member of the ſociety, lately eſtabliſhed in London, for the recovery of perſons apparently drowned.

As Mr Hunter's ideas on this ſubject differ conſiderably from all thoſe who have formerly written upon it, in order to their being more clearly underſtood, he thinks it neceſſary to ſet out with ſtating ſome propoſitions.

Firſt, He affirms, that while an animal retains the powers, though deprived of the actions of life, the cauſe of that privation may frequently be removed; but, when the powers of life are deſtroyed, the action ceaſes to be recoverable. *Secondly*, Mr Hunter conſiders part of the living principle to be inherent in the blood; for a more particular

ticular account of this doctrine, a former number of our Commentaries may be conſulted. And, *laſtly*, He obſerves, that the ſtomach ſympathiſes with every part of an animal, and that every part ſympathiſes with the ſtomach; therefore, whatever acts upon the ſtomach as a cordial, or rouſes its natural and healthy actions, and, whatever affects it ſo as to produce debility, has an immediate effect upon every part of the body. Beſides this univerſal ſympathy between the ſtomach and all parts of the body, there are alſo peculiar ſympathies; thus, the heart ſympathiſes immediately with the lungs. If any thing is received into the lungs, which is a poiſon to animal life, ſuch as the volatile part in the burning of charcoal, volatile vitriolic acid, and many other well known ſubſtances, the motion of the heart immediately ceaſes, much ſooner than if the trachea had been tied; and from experiments, it appears, that any thing ſalutary to life, applied to the lungs, will reſtore the heart's action after it has been at reſt ſome time.

Violent deaths are divided, by Mr Hunter, into three kinds. The firſt is, where only a ſtop is put to the action of life in the animal, not, however, by any irreparable injury to a vital part. If this action

action be not reſtored in a certain time, it will be irrecoverably loſt. The ſecond is where an injury is done to a vital part. And the third is where abſolute death inſtantly takes place in every part, as is often the caſe in ſtrokes of lightning.

Now, the preſent conſideration is, which of the kinds of violent deaths does drowning come under? Mr Hunter thinks it comes under the firſt, and, on that ground, proceeds to conſider the ſubject.

The loſs of motion in drowning ſeems to ariſe from the loſs of reſpiration, and the immediate effects this has upon the other vital motions of the animal, at leaſt this privation of breathing, appears to be the firſt cauſe of the heart's motion ceaſing. It is moſt probable, therefore, Mr Hunter obſerves, that the reſtoration of breathing is all that is neceſſary to reſtore the heart's motion; for, if a ſufficiency of life ſtill exiſts to produce that effect, we may ſuppoſe every part equally ready to move the very inſtant in which the action of the heart takes place, their actions depending ſo much upon it. What makes it very probable that the principal effect depends upon air being thrown into the lungs, is, that children in the birth, when too much time has

been ſpent after the loſs of that life which is peculiar to the foetus, loſe altogether the diſpoſition for the new life. In ſuch caſes there is a total ſuſpenſion of the actions of life, the child remains to all appearance dead, and would die, if air was not thrown into its lungs, and the firſt principle of action by theſe means reſtored. To put this in a ſtill clearer light, Mr Hunter gives the reſult of ſome experiments made upon a dog in the year 1755.

A pair of double bellows were provided, conſtructed in ſuch a manner, as by one action to throw freſh air into the lungs, and by another to ſuck out the air which had been thrown in by the former, without mixing them together. The muzzle of theſe bellows was fixed into the trachea of a dog, and, by working them, he was kept perfectly alive. While this artificial breathing was going on, the ſternum was taken off ſo as to expoſe the heart and lungs; the heart continued to act as before, only the frequency of its action was greatly increaſed. Mr Hunter then ſtopped the motion of the bellows, and obſerved the heart become gradually weaker, and leſs frequent in its contraction, till it left off moving altogether; but, by renewing the operation, the heart

heart began again to move; at firſt very faintly, and with longer intermiſſions; but, by continuing the artificial breathing, the motion of the heart became again as frequent and as ſtrong as before. This proceſs was repeated upon the ſame dog ten times, ſometimes ſtopping for five, eight, or ten minutes. Mr Hunter obſerved, that every time he left off working the bellows, the heart became extremely turgid with blood, and the the blood in the left ſide became as dark as that in the right, which was not the caſe when the bellows were working. Theſe ſituations of the animal, our author remarks, appear exactly ſimilar to drowning.

When aſſiſtance is called in ſoon after immerſion, blowing air into the lungs, Mr Hunter obſerves, may, in ſome caſes, effect a recovery; but, when any conſiderable time has been loſt, he adviſes ſtimulant medicines, ſuch as the vapour of volatile alkali to be mixed with the air, which may eaſily be done, by holding ſpirits of hartſhorn in a cup under the receiver of the bellows. And, as applications of this kind to the olfactory nerves tend greatly to rouſe the living principle, and put the muſcles of reſpiration into action, it may probably, therefore, be moſt pro-

per to have air impregnated in that manner thrown in by the noſe. To prevent the ſtomach and inteſtines from being too much diſtended by the air ſo injected, the larynx is directed to be gently preſſed againſt the oeſophagus and ſpine.

While this buſineſs is going on, an aſſiſtant ſhould prepare bed-cloaths, carefully brought to a proper degree of heat. Heat our author conſiders as congenial with the living principle; increaſing the neceſſity of action, it increaſes action; cold, on the other hand, leſſens the neceſſity, and, of courſe, the action is diminiſhed; to a due degree of heat, therefore, the living principle, he thinks, owes its vigour. From experiments, he ſays, it appears to be a law in animal bodies, that the degree of heat ſhould bear a proportion to the quantity of life; as life is weakened, this proportion requires great accuracy, while greater powers of life allow it greater latitudes.

After theſe, and ſeveral other obſervations on the ſame ſubject, our author proceeds to more particular directions for the management of drowned people.

If bed-cloaths are put over the perſon, ſo as ſcarce to touch him, ſteams of volatile alkali, or

of

of warm balſams, may be thrown in, ſo as to come in contact with many parts of the body. And it might probably be advantageous, Mr Hunter obſerves, to have ſteams of the ſame kind conveyed into the ſtomach. This, we are told, may be done by a hollow bougie, and a ſyringe; but the operation ſhould be very ſpeedily performed, as the inſtrument, by continuing long in the mouth, might produce ſickneſs, which our author ſays he would always wiſh to avoid.

Some of the warm ſtimulating ſubſtances, ſuch as juice of horſe raddiſh, peppermint water, and ſpirits of hartſhorn, are directed to be thrown into the ſtomach in a fluid ſtate, as alſo to be injected by the anus. Motion poſſibly may be of ſervice; it may at leaſt be tried; but, as it has leſs effect than any other of the uſually preſcribed ſtimuli, it is directed to be the laſt part of the proceſs.

The ſame care in the operator, in regulating the proportion of every one of theſe means, is here directed, as were formerly given for the application of heat. For, every one of them, our author obſerves, may poſſibly have the ſame property of deſtroying entirely the feeble action which they have excited, if adminiſtered in too

great a quantity; inſtead, therefore, of increaſing and haſtening the operations on the firſt ſigns of returning life being obſerved, as is uſually done, he deſires they may be leſſened, and adviſes their increaſe to be afterwards proportioned, as nearly as poſſible, to the quantity of powers as they ariſe.

When the heart begins to move, the application of air to the lungs ſhould be leſſened, that, when the muſcles of reſpiration begin to act, a good deal may be left for them do.

Mr Hunter abſolutely forbids blood-letting in all ſuch caſes; for, as it not only weakens the animal principle, but leſſens life itſelf, it muſt, conſequently, he obſerves, leſſen both the powers and diſpoſitions to action. For the ſame reaſon, he is againſt introducing any thing into the ſtomach that might produce ſickneſs or vomiting; and, on the ſame principle, he ſays, we ſhould avoid throwing tobacco fumes, or any other ſuch articles up by the anus, as might tend to an evacuation that way.

The following is a deſcription of inſtruments recommended for ſuch operations by our author.

Firſt, A pair of bellows, ſo contrived, with two ſeparate cavities, that, by opening them, when

when applied to the noſtrils or mouth of a patient, one cavity will be filled with common air, and the other with air ſucked out from the lungs, and by ſhutting them again, the common air will be thrown into the lungs, and that ſucked out of the lungs diſcharged into the room. The pipe of theſe ſhould be flexible, in length a foot, or a foot and a half, and, at leaſt, three eighths of an inch in width. By this the artificial breathing may be continued, while the other operations, the application of the ſtimuli to the ſtomach excepted, are going on, which could not conveniently be done, if the muzzle of the bellows were introduced into the noſe. The end next the noſe ſhould be double, and applied to both noſtrils.

Secondly, A ſyringe, with a hollow bougie, or flexible catheter, of ſufficient length to go into the ſtomach, and convey any ſtimulating matter into it, without affecting the lungs. *Thirdly*, a pair of ſmall bellows, ſuch as are commonly uſed in throwing fumes of tobacco up by the anus.

Mr Hunter concludes his paper with wiſhing, that all employed in this practice, would keep accurate journals of the means uſed, and the de-

gree of ſucceſs attending them, that facts might be furniſhed ſufficient to allow of ſuch concluſions, as may hereafter be the foundation of a more certain practice.

III.

Andr. Weſtphal Diſſertatio de limitandis Laudibus Vomitoriorum ad curandas Febres Malignas. V. Sylloge Selectiorum Opuſculorum argumenta Medica practica. Edid. Ern. Godofr. Baldinger. Vol. II. 8vo. Gottingae.

FEVERS of all kinds, but more eſpecially thoſe which, from their inveteracy, are commonly denominated malignant, have at all times been ſo much dreaded, that no claſs of diſeaſes has ever obtained more attention from medical practitioners. But, as all ſuch diſorders may, and frequently do proceed from very different cauſes, very oppoſite opinions have accordingly been formed with reſpect to the medicines uſually had recourſe to for their removal. Thus, by many, emetics have been thought hurtful in febrile

brile diſorders, while, by the generality of practitioners, no ſet of remedies have been ſo much extolled.

From Hippocrates and Celſus downwards, fevers of the malignant kind have, by moſt writers, been ſuppoſed to depend upon, or to be connected with a morbid ſtate of the primae viae; and for this reaſon, among other evacuants, emetics are very commonly preſcribed. Our author, however, is of opinion, that a general uſe of vomits in ſuch caſes, may not only be frequently unneceſſary, but in reality is often prejudicial. Emetics, he obſerves, are indeed *a priori* indicated by many of the ſymptoms of fever, particularly by nauſea, cardialgia, foulneſs of the mouth, eructations, &c. Theſe, however, and many other ſimilar diſorders of the bowels, proceed, he thinks, more frequently from a ſpaſmodic affection of the ſtomach, than from any morbid matter contained in it. If this be the caſe, emetics, inſtead of proving ſerviceable, muſt, by their irritation, he ſays, in general, do harm.

That ſuch ſymptoms, he obſerves, do often occur merely as ſympathetic affections, we have frequent opportunities of obſerving in different diſeaſes, but particularly in calculous diſorders, apoplexy,

apoplexy, violent coughs, hyſteria, colics, &c. And, if they can ariſe from ſuch a cauſe, in ſuch a variety of diſeaſes, why may they not, in the ſame manner, occur in fevers?

Among the ſeveral reaſons given by our author againſt the uſe of emetics in fever, the moſt convincing is, that, in an epidemical malignant fever, which prevailed in Lower Hungary, vomits not only proved altogether ineffectual, but were frequently ſo far detrimental, as to be evidently the cauſe of death.

When, from a patient's having been accuſtomed to a crude viſcid diet, and when, from other concomitant circumſtances, the ſtomach evidently appears loaded with putrid bile, or other vitiated matters, we are then directed by our author, inſtead of having recourſe to emetics, to a plentiful uſe of diluents, ſuch as barley water, decoctions of althea, bardana, parietaria, &c.; and theſe, we are told, will, in general, anſwer the purpoſe better than more direct evacuants.

IV.

IV.

Experimental Inquiries, Part the Third; containing a Deſcription of the Red Particles of the Blood in the Human Subject, and in other Animals; with an Account of the Structure and Offices of the Lymphatic Glands, of the Thymus Gland, and of the Spleen. Being the remaining part of the Obſervations and Experiments of the late Mr William Hewſon, F. R. S. *By* Magnus Falconar, *Surgeon, and Teacher of Anatomy.* 8vo, London.

MR FALCONAR, in the preface to his book, very candidly acknowledges, that he has no farther merit in the preſent publication, than making known to the world ſome parts of the late Mr Hewſon's diſcoveries, which, as he had never publiſhed any account of them himſelf, might otherwiſe have been loſt. And there can be little doubt of Mr Falconar's being the moſt proper perſon for ſuch an undertaking, as, from his long intimacy with Mr Hewſon, and the connection that ſubſiſted between them in anatomical reſearches,

reſearches, he had thereby not only many opportunities of making himſelf perfectly acquainted with his ideas of the ſubject, but alſo of making and repeating many of the experiments relating to it.

As in the firſt, ſecond, and third volumes of Medical Commentaries, ſome accounts were formerly given of different parts of the diſcoveries contained in the work before us; it is not now intended to make any repetitions of theſe, but merely to abſtract ſuch parts from the book as have not been already mentioned.

In chapter ſecond, Mr Falconer gives a very particular account of the ſize, ſhape, and ſtructure of the lymphatic glands. Each gland, he obſerves, is a congeries of tubes, conſiſting of arteries, veins, lymphatic veſſels and nerves, connected by the cellular ſubſtance. Glands of this kind, he remarks, are nowhere to be found, but in the courſe of the larger lymphatic veſſels. Theſe veſſels, in their paſſage from the extreme parts of the body towards the thoracic duct, enter and paſs through the lymphatic glands in the following manner.

About a quarter of an inch before a lymphatic enters a gland, it divides into two, three, or four ſmaller

ſmaller branches, ſometimes into a greater number. Theſe enter the gland at the part fartheſt from the thoracic duct, and are then ſubdivided into branches, as ſmall as the ramifications of the arteries and veins which accompany them to every part of the gland. After being thus minutely divided, they reunite, and gradually become larger as they approach the oppoſite ſide of the gland, forming three or four branches, which are joined by other lymphatics that ariſe from the cells of the gland. All theſe branches unite together about a quarter of an inch from that part where they came out of the gland, and form a common trunk, larger than that below the gland, by the additional lymphatics it receives from the cells of the gland. An elegant engraving is given, exhibiting a view of the parts now deſcribed.

Although, in every lymphatic gland, very ſmall cells can be diſcovered by the microſcope, thoſe appearances in ſuch glands which have commonly been called cellular, are by no means of that nature, being only, our author obſerves, little eminences formed by the bending of one veſſel round another. On cutting into a freſh lymphatic gland, it is found, we are told, to contain a thickiſh, white, milky fluid; and if this fluid be

at the ſame time that he mentions a number of circumſtances, in ſupport of the late Mr Hewſon's opinion with reſpect to the uſe of that organ; viz. that it is a viſcus, in a great meaſure neceſſary for the formation of the red particles of the blood. But an account of theſe having been already given in different parts of our Commentaries, it is not now neceſſary to enter farther into any detail reſpecting them.

V.

Diſſertatio Phyſiologica Inauguralis, de Alimentorum Concoctione. Auctore Edvardo Stevens, A. B. 8vo, Edinburgi 1777.

THE ingenious author of this diſſertation very properly introduces his ſubject by ſome preliminary obſervations on the qualities of the different kinds of food employed by mankind, on their drink, ſaliva, and liquor gaſtricus. After this, he proceeds to examine the different theories on which authors have attempted to explain the function of digeſtion.

The different doctrines of heat, putrefaction, and trituration, having, for ſome time, been pret-

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ty generally rejected by philoſophers as the cauſes of digeſtion, our author does not, therefore, enter ſo fully into the conſideration of them. But, as the opinion with reſpect to fermentation being the ſole or principal agent in that operation, has lately, by many, been admitted, and, as Dr Stevens is of a contrary opinion, he therefore ſtates a variety of objections to the doctrine, which, to him, appear concluſive. Among other arguments made uſe of, the following ſeem to be the moſt remarkable.

1*ſt*, Bones and other hard ſubſtances, when ſwallowed by carnivorous animals, are digeſted in a much ſhorter ſpace of time than they poſſibly could be, if digeſtion depended on fermentation.

2*d*, Carnivorous animals cannot digeſt a variety of vegetables; and, on the contrary, thoſe that live commonly on vegetables cannot digeſt animal food; which would not be the caſe if digeſtion depended on fermentation.

3*d*, When the ſigns of fermentation in the ſtomach are ſtrong, digeſtion, our author aſſerts, always goes very ſlowly on.

From theſe, and many other arguments to the ſame purpoſe, Dr Stevens concludes, that dige-

ſtion does not depend on fermentation; and he afterwards proceeds to the conſideration of another doctrine on the ſubject, which is, that digeſtion depends upon a ſolution of the different articles taken into the ſtomach, effected by means of the liquor naturally ſecreted from the coats of that organ.

Independently of every kind of reaſoning that might be employed on the ſubject, Dr Stevens reſts the proofs of his opinion on the reſults of a number of experiments, which, with that view, were performed by him at Edinburgh not many months ago.

There are in all twenty-five experiments related by our author; of theſe the moſt remarkable ſhall be now ſelected.

EXPERIMENT I.

He provided a hollow ſilver globe, compoſed of two hemiſpheres ſcrewed together. It was divided by a partition into two cavities, and perforated by a great many ſmall holes of ſuch a ſize as to admit a ſmall pointed needle. Into one of the diviſions was put four ſcruples and a half of raw beef, and into the other five ſcruples of raw white fiſh. In this ſtate the globe was ſwallowed by the Hungarian who,

who, not long ago, amuſed many people in this country, by his ſwallowing a number of large ſtones. The globe was voided in about twenty-one hours from the time it was ſwallowed. On weighing the beef, it was found to have loſt thirty grains; and the fiſh was not ſo heavy by two ſcruples. Thoſe parts of them that remained in the globe were much ſofter than before, and did not emit any diſagreeable ſmell.

EXPER. III.

Suſpecting that a total diſſolution of the ſubſtances of Experiment I. was prevented by the holes in the globe being too ſmall, another globe was obtained, with a number of holes, each large enough to admit a crow quill. Both diviſions being filled with beef, the globe was ſwallowed as before, and, when diſcharged at the end of thirty-eight hours, the beef was found entirely diſſolved.

EXPER. IV.

A bit of raw pork, weighing twenty-eight grains, was put into one diviſion of the globe, and as much cheeſe into the other; when, at the end of forty-five hours from the time of being ſwallowed, both ſubſtances were found perfectly diſſolved.

EXPER. VII.

The ſame experiment as the preceding being tried with apples and turnips, both raw and roaſted, the ſame appearances were alſo obſerved, both ſubſtances being entirely diſſolved.

EXPER. VIII.

Several grains of wheat, barley, and rye, were put into one diviſion of the globe, and of peas and oats into the other, the huſks of all of them remaining entire. In this ſtate they remained, we are told, a great many hours in the alimentary canal; and, on being diſcharged, no ſort of change could be obſerved on any of them, farther than that the peas were ſomewhat ſwelled in conſequence of the moiſture they had imbibed.

EXPER. IX.

Into one diviſion of the globe was put a portion of the thigh-bone of a ſheep, and into the other a piece of the wing of a turkey. It was then ſwallowed by the Hungarian, and again diſcharged at the end of forty-eight hours. The bone had loſt no part of its weight; but the fleſhy part of the wing was not only diſſolved, but the ligaments of the joints ſo perfectly deſtroyed, that the bones were found entirely ſeparated.

EXPER. X.

The intention of this experiment was, to diſcover the effects of the gaſtric juices upon living bodies.

A leech was put into the globe with ſmall holes, and, on being ſwallowed, was diſcharged at the uſual time. On opening the globe, nothing was diſcovered, excepting a dark viſcid matter, which evidently appeared to be the remains of the leech. The ſame experiment was afterwards repeated with the common earth-worm, and the reſult proved exactly ſimilar.

In a note, referring to theſe experiments, the author obſerves, that the leech was probably killed by confinement before it was diſſolved.

A number of experiments, to the ſame purpoſe with thoſe enumerated, were intended to have been made by our author; but the Hungarian's departure from Edinburgh prevented their being put in practice in the human ſubject. In place, therefore, of theſe, the following, among others, were tried on dogs and other animals.

EXPER. XIII.

Four ivory globes, with a great many ſmall holes in each, which had been uſed in ſome preceding experiments, were alſo made uſe of in the

preſent. In one was included a bit of mutton weighing ſixteen grains; in another the ſame quantity of boiled fiſh; in a third as much boiled potatoes; and, in a fourth, an equal weight of boiled carrots. The ſeveral globes were then given to a dog, and in eight hours thereafter he was killed. On examining the ſtomach, the ivory globes were found greatly changed, and ſo far diſſolved, and the weight of all the four, which at firſt amounted to three ſcruples and ſixteen grains, was now no more than twenty-one grains. The mutton and fiſh were entirely digeſted. The potatoes had loſt eleven grains; but the carrot was not in any reſpect changed.

EXPER. XIV.

Three pieces of the thigh-bone of a ſheep were given to a dog, who had for ſeveral hours been kept from food. At the end of ſeven hours the dog being killed, and the ſtomach laid open, one piece of bone was found to have loſt ſeven grains, another nine grains, and the third twelve grains of its original weight. The loſs of ſubſtance in all of them occurred chiefly in the internal ſurfaces of the bones, in ſo much, that

that their ſeveral cavities were evidently enlarged to a conſiderable degree.

EXPER. XV.

Ivory not being found ſufficient to reſiſt the operation of digeſtion, cylindrical tubes of tin were prepared, with a number of ſmall holes in each of them. To a dog who had not got food for twelve hours, four of theſe tubes were given; in one was contained ſixteen grains of roaſted beef, in another as much veal, in a third the ſame quantity of tallow, and in a fourth as much wheat-bread. The dog being killed at the end of ten hours, the beef and bread were found entirely diſſolved; the veal had loſt only ten grains, and the tallow eight grains of their original weight. The tubes were not in the leaſt affected.

EXPER. XX.

Four of the cylindrical tin tubes were given to a ſheep; the one contained ſixteen grains of raw beef, another as much ſalmon, a third the ſame quantity of turnip, and a fourth as much potatoes. On opening the ſtomach, ſix hours after the ſeveral tubes had been ſwallowed, the

fiſh and beef were not at all affected, whilſt the turnip and potatoes were entirely diſſolved.

The ſame experiment was afterwards repeated, with this difference, that the ſeveral articles were all boiled; and the reſult was exactly ſimilar, the vegetables being entirely digeſted, while the animal ſubſtances remained unimpaired.

EXPER. XXIII.

A piece of roaſted beef, weighing twelve grains, was put into a phial, with half an ounce of pure gaſtric juice, taken from the ſtomach of a dog that had faſted eighteen hours. Into another phial was put the ſame quantity of beef, with half an ounce of water. Both phials were then placed in a furnace heated to about the 102d degree of Fahrenheit's thermometer. In the ſpace of eight hours, the beef contained in the phial with the gaſtric juice of the dog, was entirely diſſolved, while that mixed with the water had not ſuffered any change. At the end of twenty-four hours both phials were removed from the furnace that with the gaſtric juice emitted a rancid, pungent, though by no means a putrid ſmell; while the other appeared perfectly putrid, and afforded a very ungrateful ſmell.

Although

Although the phial containing the beef and gaſtric juice was very diligently attended to, yet no air-bubbles, or any other ſign of fermentation, was at all obſerved.

Theſe appear to be the moſt material experiments enumerated by Dr Stevens: And, from the reſults of which he concludes, that digeſtion is neither performed by the effects of heat, trituration, putreſcency, nor fermentation; but is ſolely effected by the liquor which is naturally ſecreted from the coats of the ſtomach. This liquor, our author obſerves, is different in different animals, and is probably always adapted to the particular kind of food intended by nature for the nouriſhment of each diſtinct ſpecies of animals.

VI.

Diſſertatio Inauguralis Medica, exhibens Obſervationes Medico-practicas et Chirurgicas. Auctore Joann. Frid. Wilhelm. Nev. Goettingae. 1776.

WE are favoured by the author of theſe obſervations with a collection of caſes, both

both medical and chirurgical, which, in the courſe of practice, had occurred to himſelf. Such of them as appear moſt remarkable ſhall be here related.

Haemoptyſis Peruviano Cortice ſanata.

Mr Nev, we are told, was himſelf the ſubject of the firſt obſervation. Of an irritable conſtitution and plethoric habit, and having been frequently liable to diſcharges of blood from the noſe, and to catarrhal diſorders of the lungs, he was, at laſt, in the year 1771, ſeized with a ſpitting of blood. This ſymptom firſt occurred when on horſe-back, attended with a violent cough and ſevere pain of the ſide; and to theſe, ſucceeded heat, thirſt, head-ach, with other ſymptoms of fever. By the uſe of blood-letting, and cooling laxatives, the febrile ſymptoms were, in due time, got the better of; but the ſpitting of blood ſtill remaining, with a view to its removal, the Peruvian bark was at laſt reſolved upon; and, by a continued uſe of this remedy, firſt in decoction, and afterwards in ſubſtance, the diſorder was not only carried off for the time, but any return of it, which might otherwiſe have happened, effectually prevented.

A caſe, in many reſpects ſimilar to the above, is afterwards related, in which the uſe of bark was likewiſe attended with the beſt effects. A Woman aged 32 years, of an irritable habit of body, laboured at the ſame time under a remittent fever, a ſpitting of blood, and profluvium menſium. Laxatives, nitrous, and other colling medicines having been preſcribed with no advantage, the patient was, at laſt, put under the care of our author. The conſtitution being by this time greatly impaired, by the continuance of the diſorder, bark was immediately ordered, and with ſuch ſingular good effects, that, in the courſe of a few weeks, a perfect cure was obtained.

Febris intermittens tertiana, cum Amauroſi, Cortice Peruviano ſanata.

An old man aged 75, of a plump robuſt habit, was ſeized, about the vernal equinox, with a remittent fever, which, together with the uſual ſymptoms of ſuch diſorders, was likewiſe attended with blindneſs. Emetics, laxatives, and chamomile bitters, were all preſcribed, but with no advantage; the diſorder, however, was entirely got the better of by the uſe of Peruvian bark, conjoined with valerian. Another inſtance is related by our

our author, of a quartan intermittent, with a concomitant amauroſis, both cured by Peruvian bark.

Singultus Cortice Peruviano ſublatus.

A man aged 44 years, who had been much given to drink, became frequently liable to violent hiccough, on any thing cold being received into the ſtomach. Opiates, and all the uſual remedies, were preſcribed, but with no great advantage; and, at length, our author, reflecting upon the great efficacy of bark in all ſuch caſes as appear to be attended with irritability of the nerves, was, in this caſe, likewiſe induced to have recourſe to it. Six drams of the medicine were exhibited daily, and, in the ſpace of three weeks, a perfect cure was obtained.

Mania Tartaro tartariſato ſanata.

Mr Nev was called to a man of a ſlender make, when in the 44th year of his age, who, about ten years before, had been ſeized with mania. He immediately ſuſpected that the diſeaſe aroſe either from ſome obſtructions in the liver, or from a vitiated ſtate of the bile, the belly being remarkably

ably coſtive, the praecordium hard, and the countenance tinged with a yellow hue. The patient was put upon a courſe of tartarus tartariſatus, diſſolved in penny-royal water, with an equal quantity of honey; in leſs than three months, a complete and permanent cure was obtained.

In the following year, a ſimilar caſe to the above occurred, we are informed, to our author, and the ſame remedy was again preſcribed, with equally good effect.

Tumores Scrophuloſi Tartaro tartariſato reſoluti.

The ſubject of this caſe was a man of thirty-eight years old, who, for a conſiderable time, had laboured under ſcrophulous indurations in the ſubmaxillary and parotid glands. A variety of remedies were employed, particularly mercury in different forms, and Peruvian bark; different external applications were alſo preſcribed; but, during the uſe of theſe, the diſorder, inſtead of yielding, ſeemed rather to gain ground, and the patient's conſtitution became greatly impaired.

In this ſituation, a courſe of tartarized tartar was ordered, which, in the ſpace of four months, not only effected a diminution of the ſeveral ſwellings,

ſwellings, but alſo a total re-eſtabliſhment of the patient's health and ſtrength.

Caries Oſſium Mercurio ſublimato corroſivo ſanata.

There are four different caſes of obſtinate ulcers here related by our author, in three of which carious bones likewiſe took place. After all the uſual remedies both external and internal had been preſcribed with no advantage, cures in all of them were obtained, by a continued uſe of the ſolution of corroſive ſublimate, in the form recomended by Van Swieten.

SECT.

SECT. II.

Medical Obſervations.

I.

The Hiſtory of two Caſes from the poiſonous Effects of the Seeds of the Thorn Apple, communicated to Dr Duncan by Mr Thomas Fowler, *Member of the Medical Society of Edinburgh.*

AT nine o'clock in the morning, October 12th 1777, I was ſent for by one of the two well known charitable ladies near the Abbey, Edinburgh, to ſee Margaret Shaw, daughter of Andrew Shaw ſtarch-maker in that neighbourhood.

She was near ſix years of age, and of a healthy conſtitution. I found, upon inquiry, that, between twelve and one o'clock the day before, ſhe

ſhe had, from a childiſh diſpoſition, ſwallowed three fourth parts of the ſeeds of a freſh, ripe, middle ſized thorn apple, the Stramonium of the Edinburgh Diſpenſatory, and the Datura ſtramonium of Linnaeus.

About two o'clock in the afternoon, ſhe began to look ſtupid, ſeemed to forget herſelf, and gave incoherent anſwers. At three o'clock they gave her ſome bread and milk, which ſhe attempted to ſwallow, but could not; upon which they laid her down upon the bed, where ſhe ſeemed to ſleep for about half an hour; but, when ſhe awaked, her belly, tongue, face, and eyes, were obviouſly ſwelled, and the two latter were alſo very red. Theſe laſt ſymptoms abated about ſix o'clock; but, from half paſt three till ſeven, ſhe ſeemed to ſit like a perfect idiot.

About ſeven o'clock ſhe ſeemed to have a motion to ſtool, and paſſed a living lumbricus teres, 14 inches long, with a little water, but without any foeces, or relief of ſymptoms; for, ſoon after, ſhe began to grow worſe, biting a man's hand, ſometimes crying out that ſhe ſaw cats, dogs, and rabbits, at the top, ſides, and middle of the room; at other times, with great eagerneſs, catching at imaginary objects with her hands,

hands, and declaring that ſhe ſaw many people who were not preſent. She ſuffered a continuance of theſe ſymptoms with little variation, and totally without reſt, from eight o'clock in the evening till ſix o'clock this morning, being all that time reſtrained in bed by force in a raving and maniacal ſtate.

At half paſt eight laſt night, ſhe took about half an ounce of ipecacuan wine, and, about half an hour after, that not operating, the parents were adviſed by the lady already mentioned to give her about eight grains of powder of ipecacuan; but they, imprudently, only gave the child half that quantity; ſo that neither of them produced any ſenſible operation. Towards morning ſhe had a ſmall coſtive ſtool. About eight o'clock ſhe drank near an Engliſh pint of milk, and was become ſomewhat more compoſed, but ſtill not rational.

At nine, (the time at which I firſt ſaw her) I found her a little come to herſelf, but ſtill frequently incoherent, and looking rather ſtupid. Her pulſe was about 100 ſtrokes in a minute, and her breathing not difficult. I gave her immediately a powder, compoſed of four grains of calomel and eight of jalap, as an

evacuant, and in half an hour's time it made her throw up once very freely; upon which ſhe immediately fell into a ſound ſleep, and did not awake till near one o'clock, when ſhe was perfectly ſenſible and compoſed, and made no complaint but of a pain of her head.

October 13. The purgative ſeemed to operate freely yeſterday afternoon. She had three looſe ſtools before five o'clock, two more in the night, and four or five to-day. Since the operation, ſhe has had a tolerable appetite, ſlept well, and has no complaint but the remains of the head-ach. Pulſe 96.

October 15. The remains of the head-ach went off yeſterday, and ſhe is now entirely free from complaints.

* * * *

October 12. 1777. Grizzle Bruce, near the Abbey, aged nine, in a good ſtate of health, alſo ſwallowed one-fourth part of the ſeeds of a thorn apple, along with the former patient, Margaret Shaw, being play-fellows; but was not at all affected with either idiotiſm or mania.

About

About three o'clock in the afternoon, ſhe found herſelf affected with conſiderable head-ach, and a hiccup and ſwelling of her face; but theſe ſymptoms went off by the uſual time of going to bed; nevertheleſs ſhe had but a troubleſome night, awaking three or four times with ſickneſs and vomiting.

This morning ſhe roſe free from ſymptoms, except a ſlight head-ach; but, as ſhe did not appear to be open in her belly, I gave her alſo a purgative about nine o'clock, which has ſince given her ſeveral looſe ſtools.

October 15. Two days ago the head-ach went quite off, and ſhe has been free from complaints ver ſince.

N. B. I procured a number of the thorn apples from the place where the children got them, and found, that the whole ſeeds of one of middle ſize weighed juſt two drams and ſix grains; ſo that it would appear that Margaret Shaw ſwallowed at leaſt a dram and a half, whilſt Grizzle Bruce, who was three years older, only ſwallowed about half a dram; which circumſtance may well account for the difference of the ſymptoms in the two patients.

It is ſaid, that ſome authors have mentioned a ſtrange kind of delirium or mania laſting for 24 hours, as a principle ſymptom in the hiſtory of the poiſonous effects of the ſeeds of this plant; and the former of theſe caſes would ſeem, in ſome meaſure, to confirm this circumſtance.

II.

Miſcellaneous Practical Obſervations; being Extracts of a Letter from Dr Percival *of Mancheſter to* Dr Duncan.

FLOWERS OF ZINC.

SEVERAL years ago I was conſulted by a young gentleman, about 19 years of age, who laboured under a deep cough, attended with a hoarſeneſs. He was returning from Liverpool, the place of his apprenticeſhip, to paſs ſome time with his friends in the eaſtern part of this county. I recommended a milk diet, gentle exerciſe, country air, and a decoction of the ſeneka root and liquorice. How long he purſued this plan I am uncertain, as I never ſaw him afterwards. But my friend Dr Dobſon informed me that he came back to Liverpool, and was put under

der his care. Dr Alcock was alſo called to his aſſiſtance, and many judicious remedies were preſcribed, but with no laſting good effect. Dr Dobſon now began to ſuſpect that his cough was ſpaſmodic, and directed for him the flowers of zinc. This remedy, in a few weeks, produced a perfect cure; and the young gentleman has ever ſince, I believe, remained free from his diſorder. The communication of this account firſt induced me to make trial of zinc in various pulmonary affections; and I ſhall relate a few inſtances of the ſucceſs which has attended the exhibition of this remedy.

Mrs P. aged 28, a lady whoſe conſtitution had been much impaired by frequent child-bearing, was attacked with a ſevere aſthma of the nervous kind, in the winter of the year 1776. The aſthma was cured by the uſual methods of treatment, but left behind it a deep convulſive cough, the ſucceſſions of which were no leſs frequent than violent. Gum ammoniacum, paregoric elixir, ſp. nitri dulcis, and other remedies, were ſucceſſively tried. Little or no relief being obtained, I had recourſe to the flowers of zinc, beginning with half a grain twice in the day, and gradually increaſing the doſe to a grain and a half. The beneficial effects of this antiſpaſmodic

were ſoon viſible, and in eight or ten days the patient was freed from her cough. A relapſe afterwards occurred from cold. The ſame medicine was repeated, and the cough again yielded to it as before.

T. B. P. A youth about ten years of age, had a deep hoarſe cough, without any expectoration. The ſound of it was very unuſual, and not to be deſcribed; and it was attended with a quick, but feeble pulſe, fluſhings in the face, and pain in the breaſt. Every morning, about two o'clock, the cough recurred with great violence, and continued almoſt without intermiſſion till four or five. There was reaſon to ſuſpect worms, and I had been careful to cleanſe the primae viae on the firſt attack of the diſorder. A ſolution of ſperma ceti and gum ammoniac, with a few drops of tinct. thebaic. having no effect, I had recourſe to the flowers of zinc. Half a grain was given at noon, and the ſame doſe repeated at bed-time. The night paſſed with only a ſlight return of the cough; and, by continuing the uſe of this remedy, the youth perfectly recovered in a few days.

Mrs B. laboured under a phthiſis pulmonalis during the whole period of pregnancy. The violence of her cough occaſioned a premature de-

livery,

livery, and continued after that event without abatement. Opiates never failed to afford relief; but they ſometimes affected her head ſo much, that ſhe intreated me to try ſome other remedy. She was of an irritable habit, and was troubled with ſpaſmodic pains in various parts of her body. I preſcribed the flowers of zinc, which ſoon mitigated her cough, and eaſed her wandering pains. This medicine was continued only two days; but the cough remained moderate more than double that ſpace of time. It recurred, however, with ſeverity, and I had again recourſe to the zinc. The beneficial effects of this remedy were not now ſo great, or ſo immediate as before; however, they were ſufficiently apparent to encourage perſeverance in the uſe of it. In a few days, a truce from the violence of the cough was again obtained; and the patient was enabled to diſcharge great quantities of phlegm with facility, and without pain; for her expectoration was always moſt free and copious, when the cough was gentle and moderate. This evacuation, with the hectic fever which accompanied it, gradually waſted her fleſh and ſtrength; and there was no further occaſion for a repetition of the flowers of zinc: For, in the laſt ſtage of a pulmonary conſumption, it often happens,

that the ſymptoms of the diſorder, by degrees, grow leſs painful and violent, as the patient approaches nearer and nearer to the termination of life. I have known the pulſe to ſink gradually in frequency from 130 to 70 ſtrokes in a minute, and to continue about this number during ten or twelve days preceding death. Nor will this fact ſeem wonderful, when we reflect, that the functions of the brain are no leſs injured by inanition, than by plenitude; and, that the ſenſibility and irritability of the heart and blood-veſſels muſt be regulated by, and dependent upon the ſtate of the nervous ſyſtem.

FIXED AIR.

Since the publication of my experiments on the lithontriptic powers of fixed air, I have had the fulleſt and moſt incontrovertible evidence that this remedy alleviates the ſymptoms both of the ſtone and gravel; that it acts as a powerful diuretic; diſcharges ſabulous concretions; heals the ulcerations in the urinary paſſages; invigorates the organs of digeſtion; and ſtrengthens the whole ſyſtem. In ſaying ſo much I am warranted by my own experience, which has been confirmed by ſimilar obſervations, tranſmitted to me from various parts of England. But, you muſt

be

be ſenſible how difficult it is to aſcertain the ſolution of a ſtone in the bladder, by any medicine; and you will not, therefore, be ſurpriſed that I have yet ſeen no deciſive caſe, in the circle of my practice, of the compleat efficacy of this new ſolvent. A phyſician of eminence in London has, however, been more ſucceſsful; having brought away (to uſe his own words, in a letter to me) in ſmall fragments, and in a whitiſh chalk-like ſubſtance, a ſtone from the urinary bladder, by adminiſtering fixed air to his patient, during the ſpace of a few weeks. The hiſtory of this caſe is now laid before the public, and may be ſeen at the end of Dr Hulme's *Oratio de re medica*.

I have ſeen the progreſs of a moſt alarming mortification, which began above the ankle, and extended to the middle of the thigh, ſpeedily checked, and a good digeſtion produced by the internal uſe of fixed air. A fever, and anaſarca of the lungs, precluded the uſe of the Peruvian bark; and the patient took, every two hours, in the act of effervescence, half a dram of the ſalt of woormwood, with a ſufficient quantity of the juice of lemons. He was directed alſo to drink freely

freely of Seltzer water. In twenty-four hours the putrid ſtench from the mortification was corrected; and, in forty-eight hours, the ſores began to diſcharge good matter; ſenſibility was reſtored to the whole leg and thigh; freſh granulations ſucceeded; and the part healed gradually and kindly.

When fixed air is employed as a diſſolvent of the ſtone in the bladder, the uſe of it muſt generally be continued many months. Relief is often obtained by it in a ſhorter time; but few caſes will occur like the one recorded by Dr Hulme, in which the calculus appears to have been of a remarkably ſoft and friable texture. The reputation of the moſt efficacious remedies is frequently injured by the unwarrantable expectations of mankind concerning them. And in chronic diſorders many a cure is deſpaired of, which might be accompliſhed by more patience in the ſick, and greater perſeverance in the practitioner.

COLIC.

In violent colics, attended with vomiting and an obſtinate conſtipation of the bowels, it has been

been the common practice amongſt phyſicians to give opiates in conjunction with purgatives. This method of treatment has been lately improved by adminiſtrating the opiate firſt, and the purgative an hour or two afterwards. But I take the liberty of ſuggeſting to you another mode, which, as far as my own experience extends, has proved the moſt ſucceſsful. I direct three or four ounces of a ſtrong decoction of poppy-heads, with 20, 30, or 40 drops of *tinctura thebaica*, to be injected into the inteſtines, and retained as long as poſſible. If it be ſpeedily diſcharged, the clyſter is repeated till the pain is relieved, and the vomiting ceaſes. A doſe of calomel and jalap, or of any other briſk cathartic, is then adminiſtered; and its operation quickened by the uſe of ſenna tea, of a ſolution of the neutral ſalts, or of caſtor oil. By this proceſs, evacuations are procured with more eaſe, certainty, and expedition, than by any other which I have tried. For opium, when given in a clyſter, does not check the periſtaltic motion of the inteſtines, nor counteract the operation of any purgative ſo powerfully as when received into the ſtomach. And, in this way it is moſt efficacious in alleviating the ſickneſs, and in putting a ſtop to the violent reachings

ings with which colics are often attended. The taſte of laudanum is ſo nauſeous, that it is often rejected as ſoon as ſwallowed. And, if the extractum thebaicum be given in a ſolid form, time muſt be allowed for its ſolution, before any effect can be expected from it.

HYDROCEPHALUS INTERNUS.

The fatality of the hydrocephalus internus has been acknowledged and lamented by the moſt experienced and intelligent phyſicians. The late Dr Whytt of Edinburgh has recorded twenty caſes which baffled all his ſkill and judgment; and a phyſician of the higheſt reputation, in his excellent remarks on this diſorder, candidly confeſſes, that it is not in his power to ſuggeſt any probable means of curing it, and that it has hitherto diſappointed all his attempts, both when confided in alone, and in conſultation with the ableſt of the faculty. See the Medical Obſervations and Inquiries, Vol. V. page 40.

About ſix weeks ago, the ſame very ingenious friend whom I mentioned to you under the article of zinc, acquainted me, that he had ſucceſſfully adminiſtered mercury in ſuch quantity as to ſalivate, in one inſtance of the hydrocephalus internus.

ternus. As the caſe appeared to be clear and indubitable, and the efficacy of the remedy ſufficiently probable, I determined to avail myſelf of ſo important a diſcovery, on the firſt occurrence of the diſeaſe in my circle of practice. This has lately happened, and I ſhall give you a minute hiſtory of it, copied verbatim from my regiſter.

September 4. 1777. Maſter H. a child at the breaſt, aged ſeven months, has laboured about a fortnight under a ſlow irregular fever. His eyes have been now and then a little diſtorted; he has been affected with ſome degree of ſtupor; his gums have been inflamed and tender; and his mouth uncommonly dry. No tooth has yet made its appearance. An emetic has been adminiſtered; a bliſter applied to his back; and his belly has been kept ſoluble by repeated ſmall doſes of magneſia. During the action of the bliſter, he was thought to be much better, but he ſoon relapſed into his former ſtate.

About three o'clock this morning, he was convulſed; at nine, I ſaw him, and, from his countenance, inſtantly ſuſpected a dropſy of the brain. The ſymptoms confirmed my apprehenſions. His ſkin was hot, yet his pulſe beat only 78 ſtrokes in a minute, which were irregular. The pupils of his

his eyes were conſiderably, but unequally dilated; nor did they contract much when a lighted candle was ſuddenly held before them. He often ſquinted, eſpecially with the right eye, and ſeemed to take no notice of any object around him. He refuſed the breaſt, and ſeldom ſwallowed till the lips and tongue had been ſtimulated with a feather. During ſeveral days paſt, he had been frequently obſerved to rub the end of his noſe, when his hand was at liberty. And, notwithſtanding his ſtupor, he had been uncommonly watchful. I examined his head, and found a manifeſt tumour of the bregma, which had never before been noticed. Convinced by all theſe circumſtances, that the child laboured under the hydrocephalus internus, and that he was now in the ſecond ſtage of that diſorder, I directed ten grains of the unguentum mercuriale mitius to be rubbed into his thighs every three hours, till the mouth ſhould be affected; and a tea-ſpoonful of the following mixture to be given whenever the convulſive ſymptoms recurred.

℞ *Salis ammon. vol.* ℈i. *Succi Lemon.* ʒvi. *Moſch. opt. Mucilagine G. Arabic. ſolut.* gr. vi. *Sacch. alb.* q. ſ. *ad gratiam. M.*

Small

Small bliſters were applied on each ſide of the head, juſt below the bregma, and a folded rag, frequently moiſtened with brandy, was laid upon the tumour, to promote abſorption. An emetic had been given early in the morning, before I ſaw the child, by which a large quantity of bile was diſcharged; and a veſicatory had alſo been applied to his leg.

September 5. nine o'clock. The child has had frequent convulſions in the night; his right eye is much diſtorted; and it has been remarked, that he ſeldom moves the right-hand. The pulſe beat 120 ſtrokes in a minute. Two ſcruples of the mercurial ointment have been uſed, and he has taken five grains of muſk. A large diſcharge of ſerum has been produced by the bliſters. Five o'clock, P. M. the tumor of the head is ſenſibly diminiſhed; the child's mouth is now moiſt, and often filled with ſaliva; and his tongue appears to be ſwolen. His pulſe beat 146 ſtrokes in a minute. I directed another bliſter to be applied to the head.

September 6. His convulſions have been much ſlighter; his eye is leſs frequently diſtorted; and the pupils of each are more contracted. The ſtupor is conſiderably abated;

ted; the child ſeems to take ſome notice, diſtinguiſhes taſtes, and ſwallows freely. The muſk has been continued; and half a dram more of the mercurial ointment has been conſumed. A clyſter was injected laſt night, but ineffectually. I therefore preſcribed a grain of jalap, mixed with an equal quantity of ſugar, to be given every three hours till a motion to ſtool ſucceeded.

September 7. The child has paſſed the night more comfortably, but not free from convulſions. His head has ſweated profuſely, and the bliſters have run much. The tumour of the bregma is conſiderably reduced. The jalap operated gently laſt night and the mercurial unction has been twice repeated. There is an evident mitigation of all the ſymptoms.

September 8. About eleven o'clock laſt night, the child was attacked with ſevere convulſions, which recurred frequently till ſix o'clock this morning. He has had a ſhort ſleep, and is now compoſed. His pulſe beats 140 ſtrokes in a minute; his heat is moderate; and his ſkin ſoft and perſpirable. The mercurial ointment has been again uſed; but, though his gums and tongue are ſore and very moiſt, his breath is not offenſive. I directed a grain of Calomel to be imme-

immediately given, to procure a ſtool; and a bliſter to be applied to the occiput.

September 10. A diſtant call from Mancheſter prevented me from viſiting the child yeſterday. He has paſſed two nights almoſt entirely free from convulſions. Ten grains of the mercurial ointment have been again rubbed into his thighs. The doſe of calomel occaſioned three very offenſive ſtools; and directions are given to repeat it, as he is again coſtive. The bliſter applied to the occiput, like the others, has produced a very copious diſcharge. The tumour of the head is now ſcarcely perceptible. Pulſe 120.

September 12. At twelve o'clock laſt night, the convulſions recurred with greater violence than ever, and ſtill continue. Two teeth have almoſt protruded through the upper, and the ſame number through the lower gum. Pulſe 160, tremulous, aud irregular. I directed that the child ſhould be immediately put into a warm bath, and that the following remedies ſhould be adminiſtered.

℞ *Infuſi. rad. Valer. fortiſſimi* ℥ii.
Aſſaefoetid. electae ℈6. M. f. *Enema ſtatim injiciendum.*

℞ *Tinct Valer. volat.* ʒii. *Dentur guttae* jii. *Subinde e cochleari parvulo Infuſi rad. Valer. ſylv ſub forma Theae parati.*

The convulſions continued, but with leſs violence; and the child expired about one o'clock in the afternoon.

The deplorable caſe which I have related, appears to have originated from the irregular action produced in the ſyſtem by dentition, and from the want of a due ſecretion of ſaliva in the mouth, by which the fluid diſcharges were probably increaſed in the ventricles of the brain. That theſe diſcharges were diminiſhed, and that the extravaſated water was abſorbed by the powerful action of the mercury, may be preſumed from the mitigation of all the ſymptoms which ſucceeded the ſalivation. And, I am inclined to believe, that the convulſions under which the child expired, were more owing to the irritation of his gums, by the protruſion of four teeth, than to any remaining water in the brain; for the tumour of the head had entirely diſappeared; and, after death, there was a manifeſt depreſſion of the bregma. During the ſpace of a week, 110 grains of the unguentum mercuriale mitius, which contains about twenty-two grains of mercury, was conſumed,

conſumed, in the uſual way of friction. Perhaps half of this quantity might be abſorbed, and carreid into the courſe of circulation; to which may be added, part of the two grains of calomel adminiſtered internally. The ſymptoms of the ſalivation were not violent; and the effects of the mercury did not appear formidable or alarming, even to the parents of the child, who were appriſed of the nature of the diſorder, and fully approved of the trial of this new method of treating it. The death of my patient will not, I hope, diſcourage the farther uſe of the remedy which I employed, when it is recollected, that he was in the moſt irritable period of infancy; that he was ſtruggling under dentition; and, that a dropſy of the brain was not ſuſpected till the concluſion of its ſecond ſtage, when the nervous ſyſtem had been ſhocked by ſevere convulſions.

III.

The Hiſtory of a Diſcharge of blood to a great extent, by Tapping. In a Letter from a Gentleman of the iſland of Antigua, *to* Mr Samuel Athill, *communicated to* Dr Duncan.

A Man applied to us, on the 1ſt of January, on account of a pain in his ſtomach and

bowels, with which he had been troubled for about three weeks, before his application. An hardneſs was diſcovered on the right ſide, juſt below the cartilago enſiformis, which we imagined to be an abſceſs forming in that part. Proper medicines for this and his other complaints were ordered. Six days after, his belly began to ſwell, and, on the 14th, it was ſo much diſtended with water, as we imagined, that tapping became neceſſary. I accordingly performed that operation, and, to our great aſtoniſhment, we drew off, inſtead of water, eight pints of blood, reſembling that drawn by veneſection. He underwent the operation without being in the leaſt faint. After the blood ſtood about two hours, the ſerum ſeparated from the craſſamentum. I tapped him again three times, about ſixteen days between each; but the fluid drawn in theſe laſt was clear and like water. He died March 12th. And, upon diſſection, the appearances were as follows:

The thorax was full of water; the lungs had ſeveral ſmall white ſpots upon them; the heart was much ſmaller than natural; the liver was very full of hard ſchirrous tumors, one in particular, larger than the reſt, weighed ten ounces, when diſſected from the liver; the inteſtines were quite

quite deſtitute of fat, and the omentum entirely deſtroyed; the peritoneum was much thickened; and the ſtomach exceedingly ſmall. The ſpleen, kidneys, and gall-bladder, in their natural ſtate. From theſe appearances, I think their can be no doubt, that this man's diſorder originated from a diſeaſe of the liver. Upon a ſtrict and careful examination of the body, when opened, there was not the leaſt appearance of any veſſel ruptured or wounded; neither could any have been wounded while the operation for the paracenteſis was performing.

IV.

The Hiſtory of a Caſe in which obſtinate Affections of the Inteſtines were radically cured by the diſcharge of a great number of Subſtances reſembling Hydatides, from the uſe of Purgatives. *By* Dr William Scott, *Phyſician at* Hawick, Roxburghſhire, *communicated to* Dr Duncan.

A Young gentleman between twenty-five and thirty years of age, for eighteen months was frequently ſubjected to colics, with flatulencies,

coſtiveneſs, racking pains through his bowels, eſpecially about the umbilical region, a low and creeping pulſe, and faintneſs, with a loathing and ſickneſs about the ſtomach. In that condition I ſaw him frequently, and found him always relieved by emolient and carminative injections, and anodyne juleps, taken by the mouth. After the pain ceaſed, a doſe of elixir ſacrum, was, in general, given him. But ſtill he had frequent returns, eſpecially upon catching cold, or eating any kind of windy food; they commonly went off in twelve or twenty-four hours, upon the uſe of theſe medicines. But, being again ſeized with one of them, which yielded but little to the medicines for four or five days, another phyſician was called, who ordered the following medicines.

℞. *Elix. proprietat. ſeſcunciam.*
Tinct. ad ſtomach. uncias quinque. M.

A table ſpoonful was directed to be taken every morning and afternoon, in a glaſs of white-wine. If it purged much, it was directed to be intermitted for a day or two. At the ſame time, he drank a tea-cupful of ſtrong chamomile tea every morning. This method was perſevered in near twenty days. The laſt week of that time, he began

began to void by ſtool, ſubſtances, of a brown colour, ſome about the ſize of nuts, and ſome as big as walnuts, which were bags that contained matter of a yellow hue, like pus, beſides a great many empty ones that had broken. I have ſeen eight or ten paſſed in one ſtool. The number was great, for he voided more or fewer for ſeven or eight days together. After this diſcharge, he began to recover his appetite, ſtrength, and ſpirits. And he has never again had any return of his complaints.

V.

The Hiſtory of a fractured Sternum. *By* Mr George Borthwick *Surgeon to the 14th Regiment of Dragoons.*

ON of the men belonging to the 14th regiment had his breaſt violently ſqueezed againſt a manger, by a vicious horſe which he was dreſſing in the ſtable.

When I ſaw him, which was about ten minutes after the accident, he complained of violent pain in the breaſt, which extended to each ſide, and of

a difficulty in breathing. On examining the ſternum, I found it fractured tranſverſely, immediately above the joining of the cartilages of the fourth ribs. A grating noiſe was diſtinctly heard at the fracture, both in the time of inſpiration and expiration; and the ſolution of continuity was ſtill more evident on handling it; at the ſame time, the extremity of the one fragment did not riſe above the other.

Having found what I have now mentioned to be the caſe, I immediately took twelve ounces of blood from his arm, had him carefully conveyed to bed, when I applied a broad flannel roller around the thorax, and a compreſs of the ſame ſubſtance on the courſe of the ſternum, under the roller, which was made to go but once round the body, that I might the more conveniently and ſafely unbind it afterwards when neceſſary. The bandage was not applied ſo tight as to affect reſpiration, but was intended merely to preſerve a general ſteadineſs in the parts, which it certainly did, as the grating noiſe in the fracture was not to be heard from the time of its application.

The firſt night after the accident he reſted very ill, and when I ſaw him in the morning, I found

found he had contracted a cough, which, though ſlight, occaſioned violent pain in the whole cheſt, and at the fracture. This ſymptom ſoon yielded to a ſecond bleeding, and ſome mild diaphoretics. From the third day after the accident, he continued to do well until the 9th day, when he became comatoſe, and remained ſtupid for fifteen hours, after which he perfectly recovered his ſenſes, perhaps owing to ſinapiſms which I applied to his feet. He now complained of a numbneſs in the right-ſide, which was ſo great, that the ſkin was inſenſible to the puncture of a needle. After this he continued to recover daily, and was perfectly well in the ſpace of ſeven weeks. The numbneſs in his ſide continued more than two months, but went entirely off. During the whole of his illneſs, the pain from the fracture, and difficulty of breathing, were much leſs than might have been expected.

VI.

VI.

Extract of a Letter from Mr Richard Pew, *Surgeon at Wellinborough, Northamptonſhire, to* Dr Duncan, *giving an Account of an aſtoniſhing recovery after a Wound through the Lungs.*

THE following inſtance of recovery appeared to me ſo aſtoniſhing, that I thought you might reckon it not unworthy a place in the Medical Commentaries. I had the relation from a friend of mine, on whom I can depend, who aſſures me the ſufferer is a man of honour and veracity. He is a Lieutenant in the Eaſt India Company's marines, and went as a volunteer to the ſiege of Janna, where he received the ſhot.

I have here tranſcribed his own words, and have deſired my friend to get a more particular account from the ſurgeons who attended. But, as it will be two years before that can arrive, I ſend you the account in its preſent ſtate.

"ON a forlorn hope to fill the ditch after a breach was made in the walls, I had the honour to command the firſt diviſion of thoſe who carried

ried the ſand-bags, faſcines, &c. and had it in charge, amongſt others, to ſee that duty executed.

We had a party of 140 grenadiers to cover us, of which only 30 returned. I was myſelf the firſt officer that fell. I was ſtooping to heave a ſand-bag into the ditch, when a ſlug-ball from a gingal piece in a flanking baſtion, entered juſt above my kidneys, in the left ſide of my back, and lodged amongſt the bones under my right arm-pit; it wounded my ſtomach, went through my lungs, and likewiſe in a ſmall degree wounded my liver. How I have recovered to what I am, God knows; but it is to the greateſt aſtoniſhment of the faculty, who always thought it mortal. And I ſuppoſe there is no inſtance of any one's recovering of ſuch a wound. I have, at times, diſcharged from places cut through into my body, a gallon or more matter at once; and as great a quantity of the decoction of myrrh and bark were injected into the wounds, at different times of the day, to keep them clean, and prevent mortification. What was injected into my back would come immediately through the wound of my lungs into my mouth, and almoſt ſuffocate me. And, ſome things that I eat paſſed through the wound of my ſtomach, in the ſame

ſtate

ſtate out at my back. In ſhort, to deſcribe what I have gone through, is more than poſſible, or ſcarcely to be conceived. I kept my bed eleven long months, and am not yet capable to do duty, as I diſcharge from my lungs, through my mouth, a great quantity of matter, and ſometimes blood.

However, I have done with the doctors, I hope, and am in a fair way to get a perfect cure. I had thoughts of coming to England; but my cure there would be uncertain, as it is a rainy climate which always affects me in a very ſenſible degree.

SECT.

SECT. II.

Medical News.

FEW modern phyſicians have acquired a greater degree of celebrity than the late M. de Bordeu, who was no leſs remarkable for his extenſive reputation, than for the ſingularity of his doctrines. We therefore flatter ourſelves, that our readers will not be ſorry to ſee ſome account of them and their author in this place. And, for this account, we cannot omit the preſent opportunity of returning thanks to Dr Simmons, to whoſe kind aſſiſtance this work has often been indebted.

Theophilus de Bordeu was born at Iſeſte, in the province of Bearn, on the 22d of February 1722. He might be ſaid to have poſſeſſed an hereditary taſte for phyſic, both his father and grandfather having been phyſicians of conſiderable eminence, and likewiſe two of his brothers, one of whom, Francis de Bordeu, is ſtill living, and

and practiſes with great reputation at Bareges. M. de Bordeu began the ſtudy of medicine at Montpellier, where he took a bachelor's degree in phyſic in 1742. The theſis he defended on this occaſion, *de ſenſu generice conſiderato*, ſeems to have included the fundamental principles of all the works he has ſince publiſhed. In this theſis, he conſidered all the organs of the living body as being each of them endued with a peculiar ſenſibility, and with a deciſive diſpoſition for certain ſenſations or movements, on which the harmony of all the functions eſſential to life ſeemed to depend. In ſhort, his opinion was briefly this; that every organ of the body poſſeſſes a principle of life, in ſome meaſure peculiar to itſelf, and independent of the reſt of the ſyſtem; and that, by the concurrence and agreement of all theſe ſeparate functions, the general life and health of the ſyſtem are eſtabliſhed and ſupported.

The profeſſors of Montpellier were ſo well pleaſed with this ſpecimen of the young de Bordeu's abilities, that they excuſed him from many of the forms commonly required of candidates for the doctorate. This indulgence, however, only ſeemed to ſtimulate him in his ſtudies, and

we find him, in the ſame year, defending another academical diſſertation on the chyle, *chyliſicationis hiſtoria.* After receiving the degree of Doctor, he removed from Montpellier to Paris, in the year 1746, and remained there three years, attending medical lectures, and the practice of the *Charité* hoſpital. In 1749 he returned home, carrying with him the appointment of intendant of the mineral waters of Bareges. Theſe waters were at that time very much neglected; but the writings of M. de Bordeu ſoon gave them celebrity. He likewiſe delivered a courſe of lectures on ſurgery and midwifery at Pau, the capital of Bearn, and, about this time, communicated a very ingenious paper to the French academy of ſciences, on the articulation of the bones of the face. Pau was too narrow a circle for a man of M. de Bordeu's extenſive abilities, and, in 1753, we find him again at Paris, publiſhing his inquiries concerning the different poſitions, as well as the action of the glands; '*Recherches ſur les differentes poſitions des glandes et ſur leur action.*' About this time he aſſiſted the authors of the Encyclopedia. The article *Criſis* in that work, which marks the extenſive erudition of the writer, was communicated by M. de Bordeu. In the ſame year too, his

his diſſertations on ſcrophulous tumors was received by the academy of ſurgery.

No perſon is allowed to practiſe medicine in Paris without being either a member of the faculty there, or phyſician to ſome of the royal family. Theſe latter appointments, if we except thoſe of firſt phyſician, and one or two others, are commonly purchaſed, and are of courſe leſs honourable than the going through the forms of the univerſity. M. de Bordeu, therefore, preferred the latter, and ſet out with a theſis on a curious ſubject, *an omnes corporis partes digeſtioni opitulentur?* In this inquiry he pointed out the influence of the ſtomach on all the other parts of the body, and *vice verſa*. He likewiſe conſidered the ſtomach as the ſeat and centre and ſupport of all the efforts of the living body, and of almoſt all its ſympathies. The truth of this ingenious doctrine is every day more and more acknowledged. His ſecond theſis was intended to prove the ſalutary effects of hunting, *Venatio caeteris exercitationibus ſalubrior*. This was followed by a diſſertation on the waters of Aquitaine, a practical paper, which was very much read and admired at the time.

M.

M. de Bordeu had no ſooner paſſed thro' the forms of the univerſity, than he was elected phyſician to the charity hoſpital; and ſoon after this, in the year 1756, put out his inquiries on the pulſe; *Recherches ſur le pouls par rapport aux criſes.* This, which was the moſt famous of all his publications, and which was perhaps the great means of bringing him into vogue as a practical phyſician, has been very differently received. The ſame fundamental principles prevail in this as in his other works. He ſuppoſes that an affection of any particular organ will occaſion a peculiar variation in the ſtate of the pulſe; and that a careful attention to this will lead us to aſcertain the ſeat of the diſeaſe, and the channel through which nature means to operate a criſis. He diſtinguiſhes a great variety of *organic pulſes;* but his moſt general diviſion is into ſuperior and inferior pulſes; and he founds this on an obſervation, that the action of the parts ſeated above the diaphragm, and of thoſe below it, excite very different impreſſions on the circulatory ſyſtem. M. de Bordeu had certainly no great claim to originality on this ſubject. Solano's doctrines were well known in France at the time he wrote; ſo that he could only be ſaid to have added ſome-

thing to a ſyſtem, which becomes every day more problematical. In this country there are few, we may perhaps go ſo far as to ſay no phyſicians of repute, who eſpouſe the doctrine of the pulſe as it is delivered either by Solano or de Bordeu. In France, it has indeed ſome few advocates. M. M. Michel, Foquet, and Menuret, have each of them publiſhed their obſervations on this ſubject; and M. Gardane, who has given us the eulogy of M. de Bordeu, is one of his moſt zealous admirers. Upon the whole, however, we are led to ſuſpect, that the love of novelty has gone farther than ſound and accurate obſervation, towards the making of proſelytes to the doctrine of the organic pulſe.

In 1764, great diſputes aroſe amongſt the phyſicians at Paris on the ſubject of innoculation. M. de Bordeu was one of the few who was for the toleration of this practice, and publiſhed, on this occaſion, obſervations on certain points of medical hiſtory, *Recherches ſur quelques points de l'hiſtoire de la medecine.* In this work he ſuppoſes that phyſicians may very properly be arranged into the ſeveral claſſes of empirics, dogmatiſts, philoſophers, and theologians; and then he goes on to prove, that neither of theſe have a right to

oppoſe

oppoſe themſelves to innoculation. This little work is interſperſed with a variety of agreeable and inſtructive anecdotes. Three years after this he put out his *Recherches ſur le corps muqueux ou organe cellulaire*, a work intended to illuſtrate the doctrine of the pulſe, and to throw new light on the practice of phyſic. In this performance, the author conſidered the cellular ſubſtance as the great principle of nutrition which involves and pervades every part of the body. This was indeed no new doctrine, tho' treated perhaps in a more extenſive way, and more particularly applied to pathological purpoſes than had been hitherto done. The author attempted, by means of this cellular organ, or *tiſſu muqueux*, as he ſtiled it, to explain the operation of veſicatories, and other topical applications, and likewiſe to clear up many obſcure paſſages of Hippocrates. In this work ſome old and neglected doctrines, ſuch as that of a *crucial* diviſion of the body, were again attempted to be revived. The author argued not only for the tranſverſe diviſion of the body, by means of the diaphragm, into ſuperior and inferior parts, but likewiſe for a perpendicular ſeparation of the machine, which, he obſerves, is evidently marked out by the bones and muſcles

from the ſummit of the head to the pubis. He conſidered each of theſe diviſions as of great importance in the ſtudy of diſeaſes. Thirteen years after this, M. de Bordeu's laſt publication made its appearance. To this work, which is the firſt volume of a treatiſe on chronic diſeaſes, we find not only his own name, but likewiſe the names of his father and brother prefixed. At the head of the performance, there appears, by way of introduction, a very learned and philoſophical diſcourſe on the origin and progreſs of phyſic. Hitherto M. de Bordeu had confined his views principally to the ſtate of the ſolids; but, in this work, we find him analyſing the fluids of the body with great accuracy and preciſion, both in an healthy and diſeaſed ſtate. This work, which promiſed to be a very uſeful one, was intended to be continued in ſeveral volumes; but an irregular gout gradually undermined the health of the ingenious editor, and death put a final period to his labours in November 1776. About a year before this event took place, finding his health declining, he had recourſe to the waters of Bagnieres. 'I am going,' ſaid he, in a letter to one of his friends, 'to ſee if the Naiads 'of my country will relieve my gout and rheu-

'matiſm,

'matiſm. I have recommended ſo many patients 'to them in my time, that it will be ungrateful 'in them not to do ſome good offices for me in 'their turn.' He came back from theſe waters ſeemingly in better health, tho' in reality not much mended. He feared an attack of apoplexy. In his younger days the celebrated Fizes had given it as his opinion, that he would one day or other be expoſed to ſuch an attack. The ſame phyſician had ſaid of the late Profeſſor Venel, who was the friend and fellow ſtudent of M. de Bordeu, that he had a diſpoſition to putrid diatheſis, which would probably prove fatal to him. Venel's death, about a year before this, in a way which confirmed the truth of M. Fizes's prognoſtic, made a ſenſible impreſſion on M. de Bordeu, who, on the 24th of November, was found dead in his bed. This gave occaſion to ſome of the Pariſian wits to obſerve, 'that death 'was ſo much afraid of M. de Bordeu, that he 'had taken him while aſleep.' He had ſeen his patients as uſual the day before, and in the evening had complained of a ſlight ſpaſmodic affection about the thighs and ſtomach, but not in any alarming degree. His body was opened,

but without affording any marks of diſeaſe. His death was therefore aſcribed to retrocedent gout.

During the ſpace of twenty years, M. de Bordeu enjoyed a moſt extenſive practice, chiefly amongſt perſons of the higheſt diſtinction. His opinions, as we have before obſerved, are, perhaps, not all of them conformable to experience. His doctrine of the pulſe ſeems to have more of plauſibility in it than truth, but, like all his other doctrines, ſhews a great degree of genius, and an extenſive erudition; and, if we conſider that M. de Bordeu joined to theſe a pleaſing perſon, together with a moſt polite and engaging addreſs, and great aſſiduity and humanity in his attendance, by which, and the charms of his converſation, he ſeldom failed to acquire the confidence of his patients, we ſhall then be no longer ſurpriſed at the facility with which he acquired his reputation. He preſcribed but few medicines, was very ſparing of blood-letting, and attended carefully to nature. He poſſeſſed that maſterly eye which diſtinguiſhes at once all the phaenomena of a diſeaſe; he was very ſucceſsful in his practice, and never ſo tenacious of his own opinions as not to liſten readily to thoſe of others. All theſe qualities being rarely found united in

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one man, the reader will not heſitate to pronounce, that M. de Bordeu was deſervedly conſidered as a great phyſician.

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The following account of the late earthquake was communicated to Dr Duncan in a letter from Dr Percival of Mancheſter.

ON Sunday the 14th of September, at 11 o'clock in the forenoon, a ſevere ſhock of an earthquake was felt here, which extended itſelf through a circuit of more than 300 miles. The morning was unclouded and ſerene; the wind was eaſterly, but ſuddenly veered into the oppoſite quarter, about the time of the earthquake; and the air was temperately warm, without any ſulphureous or other offenſive vapours.

The ſummer has been cold and wet; but, towards the end of Auguſt, the weather changed, and has continued dry and pleaſant, with few intermiſſions, to the preſent time, September the 26. 1777. The aurora borealis has not often appeared; and ſtorms of thunder and lightning have been uncommonly rare. Two months ago, a water ſpout is ſaid to have fallen near Hud-

dersfield, a town in Yorkſhire, between twenty and thirty miles diſtant from Mancheſter.

During the ſpace of three weeks before the earthquake, vegetation was obſerved to be uncommonly vigorous. On the Saturday preceding, an electrical machine collected more fire than it had ever been known to do before.

Different churches in this town ſeem to have been very differently affected by the ſhock. St John's church was moſt, St Paul's leaſt agitated. The former is built of ſtone, upon a dry, rocky foundation; and the galleries are ſupported by pillars of caſt iron. The latter is a brick-building; has a clayey, wet foundation; and a ſewer runs under it. Four leaden ſpouts alſo, which convey the rain from the roof, appear to paſs into the ground. I ſay, *appear* to paſs, becauſe at the bottom they are covered with wood, and the clergyman of the church has not yet aſcertained the fact.

The bell of St Mary's church was heard to ring during the ſhock. An electrical rod paſſes through the ſteeple, which may perhaps account for this peculiarity.

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The ſhock was trifling at my country-houſe at Harthill, which has many high trees about it; whereas, it was ſeverely felt at a gentleman's houſe in the neighbourhood, not ſo circumſtanced.

A noiſe was antecedent to the concuſſion, and gave the alarm to many perſons who were inſenſible of the ſhock. It was particularly loud in ſeveral houſes which have electrical conductors.

Few travellers, either on horſe-back or in carriages, perceived the earthquake. The paſſage-boat upon the Duke of Bridgewater's canal, was ſuddenly ſtopped in its courſe, as if it had ſtruck upon a cable, or other obſtacle. Many perſons ſeemed to be electrified by the ſhock, and wandering rheumatic pains ſucceeded it.

A lady received a ſudden ſtroke on her head, during the earthquake. She was ſtanding in a cloſet, on the outſide wall of which, oppoſite to her head, a leaden ſpout terminated, ſo as to form an imperfect conductor. I am informed by a gentleman, whoſe cattle graze in a large paſture near his houſe, that he obſerved them to be exceedingly agitated before the earthquake; and that,

that, previous to it, they all ran to their uſual place of ſhelter in ſtorms.

Theſe facts cannot be explained by any ſuppoſition of fermentations or exploſions in the bowels of the earth, unleſs they be conſidered as agents in the production and accumulation of the electrical fluid. And many of them ſeem to confirm the theory of Dr Stukely and Signior Beccaria concerning earthquakes. But, in whatever manner ſuch awful and tremendous events may be accounted for, the pious philoſopher, when he contemplates them, extends his views beyond all ſecondary cauſes; and, directing them to the great Author of the univerſe, regards the laws of nature only as the exertions of his divine energy.

*** My friend Dr Prieſtley, to whom I have communicated the preceding obſervations, and who is much better acquainted with electricity than I am, ſeems to be fully ſatisfied that the late earthquake is not to be aſcribed to any ſubterraneous cauſe. And he is perſuaded, that he ſhall be able to produce ſimilar phaenomena, by means of a moſt powerful and magnificent electrical machine, now in the poſſeſſion of Lord Shelburne, from

from which he has ſeen ſparks taken, in the open air, at the diſtance of twenty inches.

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Extract of a letter from Andrew Daly, M. D. and Archiater at Bayreüth in Franconia, to Dr Duncan.

'The judicious writer, who ſo rationally explodes the pretended miracles of the impoſtor Gaſſner, in the 15th number of the Medical Commentaries, is, however, miſinformed when he ſays, that the celebrated De Haen ſided with Gaſſner, and publiſhed a work De Miraculis, which was ſuppreſſed. In that work, which is really extant, the learned author, very elaborately refutes all theſe pretended marvellous operations; and I therefore tranſcribe from it, for your peruſal, ſundry paragraphs, in which Dr De Haen gives his opinion on the ſubject. Dr De Haen was, indeed, extremely inſtrumental in expoſing the whole affair in its proper light to their Imperial Majeſties; and, by their order, Gaſſner's manoeuvres were at length prohibited. Dr De Haen publiſhed a volume *De Magia*, about two years before his laſt work *De Miraculis* made its appearance.

appearance. He inſcribed both to Cardinal Eugenius. The dedicatory epiſtle prefixed to the latter is dated in February 1776. Soon after this Dr De Haen perceived ſymptoms of an aſthma, and his legs became greatly inflated. In the courſe of the ſummer, Profeſſor Jacquin, his phyſician, deſired a friend to inform me that Dr De Haen was much relieved by eating a large quantity of herrings; he died, however, not long after this. Dr De Haen, when very young, had ſeveral attacks of an hereditary gout, which he entirely removed by a ſtrict milk diet at that time; and afterwards enjoyed perfect health to the age of about ſeventy.

This ingenious man, who honoured me with his friendſhip, was as amiable in private life as he was indefatigable in his public character. He was, perhaps, too apt to criticiſe with acrimony, and was very warm in maintaining any opinions he had eſpouſed. This temper, a very unhappy one in a man of letters, created him an incredible number of adverſaries, who have an open field for retaliation, by his having written ſo elaborately and theologically *De Magia* and *De Miraculis*. The only apology I think can be made to free Dr De Haen from the virulence of cenſure, is, that it is not unworthy

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of any author to undertake the refutation even of ridiculous ſuperſtitious notions, when they are prejudicial to ſociety: And, had he lived longer, I have reaſon to believe that the doctrine of thoſe whom he calls, in his work De Miraculis, *magnetici medici*, would not have eſcaped him. Gaſſner's temporary reputation will, I preſume, make many laugh in Great Britain at the ignorance and credulity of the Germans; but the Germans will have a ſufficient fund for retaliation, when they are told that a German urine-prophet, or mock-doctor, found means to enrich himſelf, even in the metropolis of the Britiſh Empire, at the expence of the public credulity."

The paragraphs referred to in this letter, extracted from Dr De Haen's work entitled De *Miraculis liber, Francofurti et Lipſiae, ex officina Eſlingeriana* 1776, are the following:

Praefatio pag. 15. Utque adeo numeroſiſſimi illi (Energumeni), qui nunc Germaniam inundent, aut ſimplices, aut vafri homines ſint, quorum Sathanas perſonatus, vel ipſis vitam deſidioſam ad tempus conciliet, vel infernalem ſuam aſtutiam atque vafritiem explendi facultatem praebeat, vel theatralem coronam Sycophantis Exorciſtis imponat. Idem pag. 23. Sententia mea de nuperioribus

bus in Gallia miraculis operi deeſt prae defectu monumentorum ad horum diſcuſſionem neceſſariorum.

Caput quintum de Miraculis, pag. 142. R. D. Johannes Joſephus Gaſſner, natus anno 1727, die 20 Auguſti in Braz prope Bludenz, in circulo Suevico, ſtudia ſua peregit in univerſitate Pragenſi, et Oenopontana, ſacerdos factus eſt an. 1750. Ab anno 1758 parochus in Kloſterle diaeceſeos curiae, adverſa valetudine, ut narrat, ab annis quatuor antequam parochus fieret, laborabat; ut nunc atrophiam nunc apoplexiam metuerit; opem multam a medicis Oenopontanis tentavit. Medicorum pervolvendis operibus ſe dedit. Cum omnia fruſtra tentaſſet, Pag. 143. dubitare coepit, an non laboraret morbo praeternaturali? Hancque ob cauſam experiri voluit, num forte praeceptis *Diabolo in nomine Jeſu datis* curari poſſet. Dictum factum curavit ſe ſic, ut annis 16 nulla inquerit ope medica. Pag. 144. Fama *Helvetiam*, *Tyrolem*, et *Sueviam* explens, ſingulis poſterioribus annis plus 400 imo 500 ad ipſum in *Kloſterle* curandi convolarent, inde parochia relicta, plura loca peragratus, diuturniore tempore, Elvange, tandem ſub auſpiciis epiſcopi Ratiſbonenſis ſua portenta Ratiſbonae perfecit. Portenta hujus ſacerdotis

cerdotis multi admirati ſunt. Haud pauci, ſive ſuperſtitioni, ſive mimorum atque argyrtarum fallaciis, eadem tribuerunt. Orta hinc inde libellorum ingens ſeries, Pag. 145. quos omnes poſſideo. Sicuti extracta Protocolli epiſcopalis Ratiſbonenſis, quae accurate omnes Gaſſneri proceſſus notarunt. Unde maxime authentica mea hiſtoria erit. Pag. 146. Morbos in naturales et daemoniacos diſpecit. Complures pariter morbos eſſe fatetur, quos partim Sathan, partim natura gignat. Pag. 147. Daemoniacos innumerabiles ſe curare aſſerit, nec non alios quos non obſeſſos, ſed circumceſſos a diabolo; vocat circumceſſos eos eſſe, in quibus diabolus morbos producit. Pag. 151. Neque quemadmodum, ut in Evangelio uſque ad legionem, ſed ad centum millia ad milliones, ad milliones decem; tam certo novit, daemonum in imo homine ſimul ineſſe, et ex epiſcopali protocollo in uno caſu hunc numerum 10,000,000 expulit. Pag. 156. Singulis a ſe exorcizatis, et, ut ait, curatis, ad pharmaciam pergere mandat, quae in Elvangen unica erat, ut ſtatuto praetio, oleum, balſamum, aut ſpiritum, &c. emant, imo etiam annulos quibus inſculptum ſit ſanctiſſ. Jeſu nomen. Pag. 158. Viri ſapientes indignabuntur in me, pergit De Haen, ut

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qui acta agam, qui Æthiopem lavem, quandoquidem tantam ſapiant haec opera, fatuitatem, vanitatem, temeritatem, inanitatem, impietatem, ut aeternis potius tenebris ſepeliri, quam poſterorum memoriae, conſervari deberent. Si omnes homines ſic judicarent memoriam illorum ſuffocaſſe, quam refricaſſe praeſtaret : Verum, cum ſummi in eccleſia atque republica viri, ea ut vera miracula tueantur, ſuaque autoritate idem plebi perſuadeant, neceſſe omnino eſt extrema tentare, ut quid de illis ſentiendum ſit demonſtretur. Pag. 159. Ita Gaſſneri luſus theatrales, Gaſſneri impietates, Gaſſneri barbaries, nos in indignationem erga illum ducunt. Pag. 166. Nonne in legitimam ſuſpicionem incidat ſimoniaciſmi, quod cum ſuo pharmacopoeo, qui 200 emptores ſimul quandoque ſalutat, turpiter colludat? Pag. 167. Finis, alter, Gaſſneri miraculorum eſt, ut ait ipſe Gaſſner, ut cogatur Diabolus publice fateri quantum emolumenti inferno, et quantum detrimenti eccleſiae ſocietatis Jeſu diſſolutione acceſſerit. Pag. 170. Hoc jubente Gaſſnero, in pluribus occaſionibus faſſus eſt diabolus, ſed nunquam apertius quam anno 1774 die 8 Decembr. ex protocollo epiſcopali. Pag. 171. Reſpondet Diabolus horrendo ejulatu ſe convolvens. Pag. 173.

‘ Vos,

'Vos, o homines ipſa hac Jeſuitarum diſſolutione ab una parte magnum eccleſiae fulcrum perdidiſtis, ab altera notabile mihi lucrum conciliaſtis.' Pag. 174. Sed gratulor imperio Romano, (ait De Haen), audio hoc momento Auguſtiſſ. Joſephi Secundi autoritate prohibitos ſuos ſibi exorciſmos Gaſſnero eſſe.

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Some years ago, Mr Louis of the French academy of ſurgery wrote to his friend Profeſſor Camper, then at Groningen, that a young ſurgeon had propoſed a new operation to the Academy in caſes of narrow pelvis, by dividing the ſymphyſis pubis, in preference to the Caeſarean operation. The academy conſidered this as an extraordinary project, rather than as a practicable operation. Profeſſor Camper was of a different opinion, and began by trying the experiment on a female cadaver, in which he found, that, without any material injury to the parts, he could conſiderably enlarge the cavity of the pelvis; he obſerved, that it would be required to ſeparate only one of the crura clitoridis, and that the other might be eaſily ſtretched. In order to determine from analogy, how far ſuch an operation would be dangerous to life, he performed the ſection on

a living pig, and the animal for ſome days was unable either to ſtand or walk. In the ſpace of a few weeks, however, it ſeemed to be perfectly recovered, and at the end of three months was fattened and killed. Dr Camper preſerves the bones in his muſeum. The ingenious Profeſſor made ſome attempts to procure a trial of this method on a young woman condemned to death at Groningen; but not being able to ſucceed in his requeſt, publiſhed the letters that paſſed on the occaſion, together with many ingenious and ſatisfactory arguments to prove the practicability of the operation, and the preference it ſeems, on many accounts, to claim over the Caeſarian ſection; the almoſt certain fatality of which is well known.

This publication, by a man who has long been deſervedly eminent for anatomical and ſurgical knowledge, did not fail to draw the attention of ſurgeons to this ſubject, and, accordingly, the operation has lately been performed at Paris.

The following extract of a letter from Paris, dated October 13th, communicated by Mr Aitken ſurgeon in Edinburgh to Doctor Duncan, gives ſome account of this operation, as perform-

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ed by M. Sigault an aucoucheur in Paris, as well as of ſome other articles of the medical news.

'We have daily inſtances of amazing cures performed in nervous diſorders by electricity, as likewiſe by the loadſtone applied to the occiput and neck in epilepſy, and ſome other ſtates of the brain.

'There have been ſeveral cures lately performed in venereal and other malignant and obſtinate ulcers, by the application of the ſolar rays, by means of a burning-glaſs.

'The ſection of the cartilage connecting the oſſa pubis, has been ſucceſsfully performed here; they left an hiatus of two inches and a half, and yielded a free paſſage to the child in four minutes and a half. The woman had before this four children, which were extracted piece-meal.'

The following letter from Paris which lately appeared in the London news-papers, gives a farther account of the ſucceſs of this operation, and of the perfect recovery of the woman.

'On the 3d of December 1777, Souchot, the ſoldier's wife, attended by her huſband, and carrying

rying her young ſon in her arms, preſented herſelf to the members of the faculty aſſembled in their hall. She walked alone up a ſtair-caſe of about twenty ſteps, to the room where the doctors were ſitting; ſhe there walked about in their preſence, and made, with eaſe, all the motions neceſſary for walking, and gave ſatisfactory anſwers to all the queſtions put to her. The child was put on a table, and received by all the gentlemen preſent, as a child whoſe birth made him precious to the faculty.

'Mr Sigault read afterwards his report, in which he gave the reaſons which determined him to cut the ſymphyſis, ſhewed the manner in which he proceeded to perform the operation, and the conſequences that followed. The report was well written, and received with great applauſe. Meſſrs Grandelas and Deſcemet, who had been appointed by the faculty to inſpect into the affair, reported, that the woman had the ſymphyſis cut; that the child came into the world in perfect health; that the mother was quite recovered; and that ſhe walks as well as uſual.

'The 6th inſtant the faculty met again; the aſſembly was numerous, and it was unanimouſly agreed, that a decree ſhould paſs in the moſt honourable

nourable terms, to Mr Sigault, expreſſing the approbation of the faculty; it was therefore reſolved, that a medal ſhould be ſtruck, on the exergue of which the date ſhould appear of the diſcovery made by Sigault on the 1ſt of December 1768, and that of the operation performed by him October 1ſt 1777.'

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M. Amad. Eman. de Haller, one of the ſenators of Berne in Switzerland, in the following letter to Doctor Samuel Foart Simmons, confirms the account of the death of his father, the illuſtrious Baron de Haller, who, during nearly half a century, has held the higheſt reputation in his profeſſion, and whoſe death will be deſervedly lamented by all men of literature. We hope, in ſome future number of our Commentaries, to be enabled to publiſh ſome account of the life and writings of this celebrated man, of whoſe death his ſon gives the following account:

'Quod mihi, quod conjugi viduae, quod liberis optimum patrem lugentibus triſte et acerbum accidit, id, univerſa ſuperſtite familia hortante, obſequioſiſſime tibi ſignificandum cenſeo, quod et officii ratio ita poſtulet, cum vivum in amicorum

numero habueris, et haud vulgari eum benevolentia proſecutus ſis, et noſtra tu quoque dolore condoleas; Hallerum nempe tuum, qui te coluit inter primos, pluribus jam menſibus multis magniſque aegritudinibus confectum, perpetuos inter labores maraſmo tandem oppreſſum occubuiſſe jam ſeptuagenarium. Pie et placide animam reddidit, et obdormivit in Domino prid. idus Dec. h. viii. veſp. Tu vero, vir ampliſſime, quem D. O. M. ſalvum et ſuperſtitem et felicem rebus humanis diutiſſime intereſſe jubeat, nobis et beati viri memoriae fave. Vale. Dab. Bernae poſt funus elatum, xvii. cal. Jan. MDCCLXXVIII.'

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It has often been matter of regret, that, of the many ingenious inaugural diſſertations publiſhed at Edinburgh, by much the greater part are totally unknown to the public. Some of theſe, as containing the peculiar doctrines and practices of profeſſors; others, as containing ingenious conjectures from the candidates themſelves, corroborated by experiments, could not fail to afford pleaſure and inſtruction to moſt medical readers. But, as a few copies only are, in general, printed off, intended merely to be diſtributed by the candidate

didate among his particular friends, they are never, unleſs by accident, to be met with in the ſhops. Thus the doctrines which they contain are publiſhed only in a very limited manner. And they are often introduced into other works in a much leſs diſtinct manner than in the diſſertation itſelf. While, at the ſame time, the original author of the opinion or diſcovery is deprived of that credit to which he is entitled. Theſe conſiderations have led, at other ſeats of medical literature, to the publication of Theſauri, or collections of diſſertations, by which valuable eſſays have not only been preſerved, but much more generally read. But this mode of preſervation has been extended only to a very few of thoſe publiſhed at Edinburgh, which have accidentally fallen into the hands of foreign collectors.

It is with pleaſure we can inform our readers, that a publication is now begun at Edinburgh, by which this end will be more effectually obtained. A collection of the moſt valuable diſſertations which have appeared at Edinburgh ſince the eſtabliſhment of medical claſſes at that place, is now ſet on foot. And the firſt volume of this work, which is nearly printed off, will ſoon be publiſhed. Beſides the ingenious conjectures which

have been thrown out by different ſtudents, the intelligent reader will receive the moſt diſtinct view of the peculiar doctrines which have been delivered by the different eminent teachers of medicine who have flouriſhed at Edinburgh for theſe fifty years paſt.

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Doctor William Wright, phyſician from Jamaica, who holds the office of ſurgeon-general to that iſland, arrived lately in Edinburgh. This gentleman has cultivated uſeful botany with very great ſucceſs, and has made ſeveral very intereſting diſcoveries. Among others, he has aſcertained the plant which yields the ſimarouba bark.

Some time ago he ſent a drawing of this plant to Dr Hope, profeſſor of botany, together with a very exact deſcription of it, which, it is preſumed, will be publiſhed in the next volume of the Phyſical and Literary Eſſays of Edinburgh. Meanwhile, we may only mention, that Dr Wright finds the ſimarouba to be truly a dioicous plant, contrary to what has been aſſerted by late writers.

Dr Wright has enriched this country by bringing along with him a large collection of natural

tural curioſities, moſt of which have an immediate tendency to ſome uſeful purpoſe. Among other articles, he has ſpecimens of the new ſpecies of Peruvian bark.

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Among other new publications, it gives us pleaſure to anounce a work on ſome important ſubjects in ſurgery, which is at preſent in the preſs at Edinburgh. This work, which is entitled, Chirurgical Eſſays, treats principally of the various terminations of inflammations, and of the theory and treatment of ulcers. It is written by Mr Benjamin Bell ſurgeon in Edinburgh, a gentleman ſo much eſteemed for his abilities among thoſe who have the pleaſure of being acquainted with him, that they muſt neceſſarily entertain high expectations from any work that he may publiſh.

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A third edition of the Synopſis Noſologiae Methodicae, which was firſt publiſhed at Edinburgh, by Dr Cullen, in the year 1769, is now in the preſs at that place. The ſecond edition of this

this work, which was publiſhed in 1772, was very conſiderably enlarged; but, to the preſent edition, ſo many additions are intended to be made, that, in place of one volume, it will now form two.

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We mentioned in our laſt number, that a volume of Medical Caſes, with Remarks and Obſervations, which were delivered in a courſe of lectures by Dr Duncan, was in the preſs at Edinburgh. The publication of that volume has, by different accidents, been ſomewhat retarded. But the greateſt part of it is now printed off, and it will probably be in the ſhops before the end of the preſent winter-ſeſſion.

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At the annual election of the Royal College of Phyſicians in Edinburgh, the following gentlemen were choſen to the different offices for the enſuing year.

Dr Grant Preſident.

Dr Home vice Preſident.

Dr Monro Secretary.

Dr Gardiner Librarian.

Dr

Dr Hope
Dr Steedman } Cenſors.
Dr Hay Treaſurer
Dr Hunter Fiſcal.

The following gentlemen, after having been licentiates of the college of phyſicians in Edinburgh for the uſual time, have been lately elected fellows, viz. Dr Daniel Rutherfoord, Dr James Gregory, and Dr Arnold-Bartholemew Beerenbroek.

* * * *

The eſtabliſhment of a public Diſpenſary at Edinburgh, which has given riſe to a new courſe of medical lectures there, is likely to be productive of ſtill greater advantage in this reſpect to ſtudents of medicine at that place. The moſt important caſes which occurred at the Diſpenſary, were before ſelected as the ſubject of caſe-lectures. And, by this means, the ſtudents were preſented with remarks and obſervations on the caſes of patients whoſe diſeaſes were of ſuch a nature that they muſt have been injured by reſidence in an hoſpital.

Hitherto, however, the ſtudents attending theſe lectures have had an opportunity of ſeeing the practice,

practice, and hearing the remarks of one phyſician only. But the governors of the Diſpenſary, at their laſt annual meeting, appointed Dr Andrew Duncan and Dr Charles Webſter conjunct phyſicians to that charity; and theſe gentlemen propoſe to deliver a courſe of lectures during the enſuing ſummer, in which they will be mutually concerned.

This courſe will commence about the beginning of May, and will continue for three months. The fee for attendance is one guinea for the lectures, and half a guinea as medicine-money. All the ſtudents who attend this courſe, will alſo be entitled to attend the whole practice at the Diſpenſary. Two lectures will be delivered every week, one by each of the phyſicians. D. Duncan will give a caſe-lecture every Monday, at eleven o'clock, and Dr Webſter every Thurſday, at the ſame hour; beſides which, every Tueſday, at eleven o'clock, Dr Duncan will read a lecture, conſiſting of remarks and obſervations on the pharmacopoeias of the colleges of phyſicians of London and Edinburgh.

Thoſe gentlemen who, from former attendance, are already perpetual pupils at Dr Duncan's medical lectures, will be entitled to the preſent courſe

courſe without the payment of any other fee than that of medicine-money. And to thoſe who have already attended, or may hereafter attend any other courſe of his lectures, attendance on the preſent courſe will be reckoned in the ſame manner as if the lectures were given by Dr Duncan alone.

SECT.

SECT. IV.

Liſt of New Books.

A Diſſertation on the inoculated ſmall-pox; or an attempt towards an inveſtigation of the real cauſes which render the ſmall-pox by inoculation ſo much more mild and ſafe than the ſame diſeaſe when produced by the ordinary means of infection. By John Mudge, ſurgeon at Plymouth. 8vo, London.

A ſelect number of ſchirrous and cancerous caſes ſucceſsfully treated by the peculiar remedy of Melmouth Guy ſurgeon. 8vo, London.

A treatiſe upon artificial electricity, in which are given ſolutions of a number of intereſting electrical phaenomena hitherto unexplained, &c. Tranſlated from the original Italian of Father Giam-

Giambatiſta Beccaria, profeſſor of natural philoſophy in the univerſity of Turin. 4to, London.

An account of the diſeaſes moſt incident to children, from their birth to the age of puberty; with a ſucceſsful method of treating them. To which is added an eſſay on nurſing. By George Armſtrong, M. D. phyſician to the diſpenſary. 8vo, London.

A treatiſe on the uſe and abuſe of mineral waters, &c. By Hugh Smith, M. D. 8vo, London.

Britiſh zoology. By Thomas Pennant, Eſq; Vol. IV. 4to, London.

An account of the tenia, or long tape-worm, and of the method of treating it, as practiſed at Morat in Switzerland; being a tranſlation of a memoir publiſhed at Paris, with copperplates. 8vo, London.

Obſervations and conjectures on the nature and properties of light, and on the theory of comets. By William Cole. 8vo, London.

Formulae medicamentorum ſelectae; or ſelect preſcriptions of the moſt eminent phyſicians for various diſeaſes incident to the human body. By Edward Fox, apothecary in ordinary to her Royal

Royal Highneſs the Princeſs Amelia. 8vo, London.

An experimental inquiry into the cauſes of the changes of colours in opaque and coloured bodies. With an hiſtorical preface relative to the parts of philoſophy therein examined, and to the ſeveral arts and manufactures dependent on them. By Edward Huſſey Delaval, F. R. S. 4to, London.

Memoires Litteraires, critiques, philologiques, et bibliographiques, pour ſervir à l'hiſtoire ancienne et moderne de la medecine. 4to, Paris.

Obſervations ſur les pertes de ſang des femmes en couches, et ſur le moyen de les guerir, par M. le Roux, maitre en chirurgie, à Dijon. A Dijon et à Paris.

Nouvelle methode de traiter les maladies veneriennes par la fumigation, avec les proces-verbaux des gueriſons operées par ce moyen. Par Mr Pierre la Louette, docteur regent de la faculté de Paris, &c. A Paris.

Methode eprouvée pour le traitement de la rage, publié par ordre du gouvernement. A Paris.

Obſervations ſur les maladies des Negres, leurs cauſes, leur traitement, et les moyens de les prevenir.

venir. Par M. Dazille, M. D. &c. 8vo, Paris.

Recherches critiques ſur la chirurgie moderne, avec des lettres à M. Louis, &c. par M. Valentin du college royal de chirurgie de Paris. A Amſterdam et a Paris.

Semiotice phyſiologicam et pathologicam generalem complexa. In uſum praelectionum academicarum conſcripſit Chriſtianus Godofredus Gruner, M. D. et Prof. cet. cum privilegio Saxonici Electorali, Halae Magdeburgi.

De viribus Arnicae ſpecimen inaugur. auct. Petro Andrea Schutt, Hamburg. Gottingae.

Letters and eſſays on the ſmall pox, inoculation, the meaſles, the dry belly ach, the yellow, and remitting, and intermitting fevers of the Weſt Indies, &c. By different practitioners, 8vo, London.

De cauſis phaenomenorum quae obſervantur in progreſſione morborum epidemicorum lente progredientium, praeſertim Peſtilentiae nominum et Luis Bovillae; atque inde naſcente notabili aliquo genere novorum prophylacticorum. Auctore Chriſtoph. Alberto Eichelberg. Neomagi.

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MEDICAL

AND

PHILOSOPHICAL

COMMENTARIES.

By a SOCIETY in EDINBURGH.

Voluiſſe me ea, quae plurimis profutura videbantur commendare bonis, FALLOPIUS.

VOLUME FIFTH.

PART III.

LONDON:

Printed for J. MURRAY, No. 32. Fleet-ſtreet;
J. BELL. W. CREECH, C. ELLIOT, and
M. DRUMMOND, *Edinburgh*;

M,DCC,LXXVIII.

MEDICAL COMMENTARIES.

SECT. I.

An Account of Books.

I.

Henrici-Joſephi Collin, *Noſocomii Pazmanniani Phyſici ordinarii, et Sac. Caeſareo-Reg. Apoſt. Mageſt. Regim. Infer. Auſtr. Conſiliarii* FLORUM ARNICÆ *Vires, ſive Obſervationum circa Morbos Acutos et Chronicos factarum, pars quarta.* 4to, Viennae.

THE diſſertation before us, the ſubject of which, as expreſſed in the title, is the flowers of the Arnica, or German Leopard's bane, is divided by our author into four chapters. In

the firſt is given a deſcription of the plant. In the ſecond, a variety of caſes are enumerated of the effects of Arnica in paralytic diſorders. In the third, we find examples of its being exhibited with great advantage in caſes of amauroſis. And, in the fourth, inſtances are given from which it appears to be a powerful antiſpaſmodic.

A few of the moſt remarkable caſes in each of the three laſt chapters ſhall be extracted; and, to prevent any ambiguity which might occur from a tranſlation, with reſpect to the plant itſelf, we ſhall tranſcribe, verbatim, the author's deſcription of it.

'Radix eſt perennis, calamum aut etiam minimum ferme digitum interdum craſſa, inaequalis, horizontaliter aut oblique excurrens, fibris pluribus deorſum tendentibus, terrae affixa; extus ſpadicea, intus albida; odoris fortis et gravis; ſaporis acris aromatici nec ingrati.

'*Folia* ex ipſa radice emergunt quina aut ſena ovata, baſin verſus pluſculum elongata, anguſtata, integra, facie dilute virentia, ſubtomentoſa; dorſo magis canentia, et glabriora, nervis trinis aut quinis longitudinaliter inſignita, ad plantaginis mediae folia non nihil accedentia; ſaporis, dum diutius maſticantur, manifeſte ſalſi cum leviſſimo amarore.

Caulis

'*Caulis* inter haec folia exſurgit pedalis et altior, teres, ſubpiloſus; hic per intervalla foliis ornatur paucis, oppoſitis, ſeſſilibus, radicalibus aemulis, at brevioribus.

'*Flores* prope caulis faſtigium ex foliorum axillis progrediuntur ſingulares, adverſum poſiti; in cacumine vero caulis communiter terni, majuſculi, radiati, aurei coloris, ſaporis intenſe amari; pedunculis erectis ſubpiloſis ſuſtentati.

'*Calix* florum communis ex ſquamulis conſtat elongatis, aequalibus, erectis, canaliculatis, ſubpiloſis, ſcabriuſculis.

'*Corolla* ex ſemifloſculis componitur, calyce duplo longioribus (15 aut pluribus), ſubaequalibus, ligulatis, tridentatis, patentibus, radium conſtituentibus; quorum ſinguli filamenta quinque, antheris carentia, et ſtylum unicum, apice bifidum, intra tubulum recondunt; caeterum tamen fertiles omnes.

'Diſcum vero floſculi occupant tubuloſi, ore plerumque quinquefidi; ſtaminibus quinque (quorum antherae in tubum cylindraceum concretae ſunt) et ſtylo unico, apice bipartito, intra antherarum tubum recondito, inſtructi; pariter fertiles.

'*Semina* ſequuntur oblonga, nuda, pappo piloſo coronata; receptaculo villoſo, parumper convexo, inſidentia. Creſcit in collibus et pratis ſubalpinis.'

After this deſcription of the plant, we ſhall give a ſhort view of ſome of the principal caſes, preſerving the numbers uſed in the original work.

In the ſecond chapter, the author relates twenty-eight caſes in which the arnica was uſed in paralyſis; from which the following are ſelected:

CASE. 1.

A girl of eleven years of age was brought to Doctor Collin at the hoſpital, about the middle of April. For ten days ſhe had laboured under a paraplegia, which ſeemed to have been induced by fear. She complained of difficulty in deglutition, of coſtiveneſs, and ſcarcity of urine. She was of a pale complexion, and of a thin lax habit of body. Pulſe feeble.

From the time of the patient's admiſſion till the end of April, every remedy uſual in paralytic affections was had recourſe to, but with no advantage; our author reſolved, therefore, to make trial of the flores arnicae; and the following formula was ordered.

℞ Flor. Arnic. dr. 1. inf. c. Aq. fervid. q. ſ. per ½ hor. vaſe clauſo. Colat. ℔ 1. adde Syr.

Syr. flor. Chamom. unc. 1. quatuor vel quinque doſibus diei unius ſpatio abſumatur.

On the fourth day from her entering upon this remedy, ſhe began both to ſpeak and to ſwallow with more eaſe. She moved her fingers eaſier than before. She ſuffered no inconvenience from the medicine; her urine became more plentiful, and her ſtools more natural.

At times the patient complained of violent pains in different parts, which occurred ſuddenly; but they were always removed by gentle friction. The ſame remedy, viz. the flores arnicae, was continued till the end of May, when the cure was compleated; and the patient being kept in the hoſpital till near the end of June for the recovery of her ſtrength, ſhe was then diſmiſſed perfectly well.

CASE III.

A man ſixty years old, ſoon after taking dinner, began to ſtammer in his ſpeech, and was preſently ſeized with a paralytic affection of his left ſide. Bleeding was preſcribed, and alſo purgatives, bliſters, and frictions, but with no advantage. On the fourth day from the firſt attack, the patient was removed to the hoſpital, when he was found to labour under a real hemiplegia.

A ſtrong infuſion of flowers of arnica, viz. two drams of the flowers to a pound of the ſtrained liquid, was immediately ordered, with a laxative, repeated at proper intervals.

For the firſt three weeks no ſenſible effects were perceived; but, after that period, the patient began to complain of a kind of creeping ſenſation in his hands and feet, and of ſhooting pains in different joints, as if ſtrongly electrified.

From this period, the different ſymptoms diminiſhed daily, and the ſame doſe of the remedy being continued till the 18th of July, the patient was diſmiſſed perfectly cured in a ſhort time thereafter.

CASE X.

A woman aged ſixty-five years, who had formerly been very healthy, was, on the 17th of March, after expoſure to a great degree of cold, ſeized with a ſudden want of recollection, together with inability of moving her left arm and leg.

After a variety of applications and remedies had been tried in vain, the patient was carried to the hoſpital on the 21ſt of the month. At this period, the whole left ſide, except the head, was totally deprived of motion. The patient was in a conſtant delirium; her ſleep was interrupted; her

her pulſe ſmall and ſoft; breathing ſlow and difficult; diglutition natural; belly coſtive.

A ſtrong infuſion of flores arnicae, the ſame as uſed in Caſe III. was immediately ordered. On the 24th of the month the delirium was much diminiſhed, the patient's ſleep was much more calm than before, and ſhe now complained of pain over all the affected ſide.

March 25th. The medicine was this day made conſiderably ſtronger than hitherto, by adding a dram more of the flowers of arnica to each pound of the infuſion. The patient ſtill complains of pain in the affected ſide, together with a formicatio, or a continued creeping ſenſation.

By the 3d of April the woman was able to move her arm and leg, and ſhe now began to complain of frequent ſhooting pains in the parts affected. In a few days thereafter, both the ſenſe and motion of the different joints were perfectly reſtored; her breathing became free, her pulſe full and ſtrong, and ſhe was diſmiſſed on the 24th of the month compleatly cured.

CASE XXI.

A woman, aged 36 years, was ſeized, in the month of October, with an apoplectic fit, from which ſhe recovered by the uſe of glyſters, purgatives,

gatives, and blood letting. The left leg, however, was found to be entirely deprived both of ſenſe and motion. For this a variety of remedies were uſed, but with no advantage, and the patient was brought to the hoſpital on the 26th of November.

At this time her pulſe was very weak, ſmall, and unequal; her breathing ſlow and difficult; appetite bad; belly natural; a general debility prevailed; and the patient was of a pale complexion, and of a flaccid habit of body. The following preſcription was immediately ordered:

℞ Flor. Arnic. unc. dimid. inf. cum Aq. fervid. q. ſ. per ½ hor. dein per medium ¼ hor. bulliant vaſe clauſo; colat. ℔ 1. adde Syr. Capill. Vener. unc. 1. vel unc. iſs. Diei unius ſpatio abſumat aeger.

The medicines did not, in this woman, produce any of theſe ſhooting pains taken notice of in the preceding caſes. In the courſe of eight days the whole leg recovered its ſenſation; her appetite returned; and ſhe found herſelf better in every reſpect. The ſame doſe of the remedy was continued till the 14th of January, when the patient was diſmiſſed, cured.

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The third chapter contains nine caſes in which the infuſion of the arnica was uſed againſt amauroſis. Of theſe the following may ſerve as examples.

CASE III.

A girl of twenty three years of age, on recovering from an epidemic petechial fever, found herſelf totally deprived of ſight; the pupils were greatly dilated, and immoveable, ſo that an amauroſis was evident in each eye.

Bliſters were applied to the head and neck, without advantage; and the patient being ſo much reduced as to prevent powerful evacuating remedies being had recourſe to, a ſtrong decoction of flowers of arnica was preſcribed; this was on the 7th of December. The remedy in this caſe induced a gentle diaphoreſis; on the 11th of the month a delirium, which, till then, had prevailed, began to diſappear; and the patient could diſtinguiſh light from darkneſs.

On the 16th of December, both eyes appeared natural; viſion was perfectly reſtored, and the patient was well in every reſpect. The ſame remedy being continued till the firſt of January, the woman was then diſmiſſed, cured.

In the other eight caſes of amauroſis related, at full length, by our author, the infuſion of the flowers

flowers of German Leopard's bane proved equally ſucceſsful as in the preceding caſe.

In the fourth chapter we are preſented with ſeven caſes illuſtrating the effects of the arnica as an antiſpaſmodic.

CASE II.

A man aged thirty-four years, by trade a guilder, was brought to the hoſpital on the 10th of November. For two years he had been ſubject to tremors in his tongue, and in his different joints, which, about ſix weeks before this period, had become ſo conſiderable, as to render it very difficult for him to eat; he loſt the uſe of his legs, and was cloſe confined to bed; he was greatly emaciated; but the different functions ſeemed to be all unimpaired.

A purgative being premiſed, a weak infuſion of flor. arnicae was preſcribed, which having been continued for eight days, the patient found himſelf able to ſpeak more clearly than before, and the tremor in his joints was conſiderably diminiſhed.

By the beginning of December the tremor both in his joints and tongue had diſappeared entirely, and he began to gather ſtrength. The ſame remedy was continued till the 20th of that month; and, on the twelfth of January, he was diſmiſſed perfectly cured.

CASE

CASE VI.

A girl aged fourteen years, tall, and of a ſanguine temperament, who had been liable to frequent attacks of eriſipelatous affections, was, on the 5th of April, ſeized with a return of the ſame nature. The uſual remedies being had recourſe to, this diſorder was ſoon removed; but, immediately thereafter, the patient was ſeized with a locked jaw, which continued till the 15th of the month, when, after expoſure to cold, ſhe was attacked with ſymptoms of opiſthotonus.

After having uſed a variety of remedies without any relief, the patient was removed to the hoſpital on the 20th of April. At this time there was a conſiderable incurvation of the ſpine; the head was drawn backwards, and, at the ſame time, was immoveable. The different members were all in an extended ſtate, and very rigid. The muſcles of the abdomen, and of the whole trunk, were rigid; during ſleep the jaw ſeparated a little, which admitting the point of the tongue to puſh out, it was frequently bit by the jaw contracting on the patient awaking. Along with other ſymptoms, the breathing was difficult, and

the

the pulſe not quick, but unequal, irregular, and tolerably full, though not hard.

Emolient injections were preſcribed; five bliſters were applied on different parts; and the patient was ordered to drink a ſtrong decoction of the flowers of the arnica.

For the firſt four days of this courſe, no favourable change was obſerved; but, on the fifth day, without any force being applied, the under jaw opened ſo conſiderably as to admit both the neceſſary remedies, and different articles of food, to be more eaſily introduced than they had previouſly been.

On the 26th of the month, the head was leſs retracted, and was capable of gentle motion, in different directions. The ſpine was not ſo much incurvated; the joints were all leſs rigid; the excretions, both by the bladder and anus, which had before been affected, were now natural. A pretty copious ſweat prevailed over the whole body. The pulſe was free and equal; and reſpiration eaſy.

The ſame courſe being continued, the different ſymptoms all gradually abated, excepting a ſtiffneſs or rigidity of the abdominal muſcles.

For

For this laſt ſymptom, emollient poultices were applied over the whole abdomen, and continued conſtantly, both night and day. By this means the tenſeneſs of the muſcles was removed. The infuſion of arnica was continued till the 5th of June, and the patient was retained a few weeks in the hoſpital for the recovery of her ſtrength; ſhe was then diſmiſſed cured.

There are other five caſes related by our author, of the antiſpaſmodic effects of the flowers of arnica; but more of them could not be here enumerated, without extending this article to too great a length.

II.

Letters from Mr John Quier, *Practitioner of Phyſic in the Iſland of* Jamaica, *to* Dr D. Monro, Jermyn-ſtreet, London, *on the Small-pox and Inoculation, Meaſles, &c.* Vid. *Letters and Eſſays on the Small-pox, Inoculation, Meaſles, &c. By different Practitioners.* 8vo, London.

IN the publication before us, there are three letters concerning the Small-pox by Mr John Quier,

Quier, from which ſuch circumſtances as appear moſt remarkable ſhall be here ſelected.

Mr Quier arrived in Jamaica in July 1767, when he found the ſmall-pox had, for ſome time, been epidemical, in different parts of that Iſland. And, as the diſeaſe ſpread quickly, notwithſtanding every precaution, and grew daily more fatal, this appeared to our author a very proper period for introducing a more general uſe of the practice of inoculation.

He firſt began to inoculate in March 1768; and, by the end of ſummer, near ſeven hundred negroes had gone through the diſeaſe, under his care. As the ſeaſon was dry and favourable, the ſlaves went conſtantly through their daily labour in the field during the whole proceſs, thoſe only excepted who had a higher degree of fever than uſual at the eruption, or who had their feet and hands ſo covered with puſtules that they could not walk or hold the utenſils of their labour, of which ſome inſtances occurred.

Our author places great confidence in the effects of mercurials and of ſtrong purgatives in the practice of inoculation. Children, he obſerves, may be inoculated, with ſafety, at all ages; but

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it is an erroneous opinion, he remarks, that children have the ſmall-pox from inoculation more favourable than adults, ſince, beſides the various accidental indiſpoſitions to which that tender age is ſubjected during the proceſs, the puſtules are almoſt always more numerous in them than in grown perſons, even although the latter may labour under ſuch chronical diſeaſes as are ſuppoſed to ariſe from a very depraved ſtate of the fluids.

Among negroes, our author thinks pregnancy is no objection to the practice of inoculation, at leaſt, during the firſt ſix or ſeven months of geſtation; nor is it neceſſary, he obſerves, to avoid the intervention of the menſtrual flux.

Infancy has been commonly fixed upon as the moſt proper period for inoculation, on account of the bland ſtate of the fluids which is then ſuppoſed to take place. Many deviations from this general rule have, of late years, been made in different parts of the world; and our author remarks, that, from the peculiarity of their ſituation, practitioners, in the Weſt Indies, have been obliged to carry this point farther than they otherwiſe probably would have done. Venereal complaints, both recent and inveterate; the ele-

phantiaſis of Proſper Alpinus; the yaws, both in children and adults; all the variety of cutaneous affections which occur in Jamaica, and which, we are told, are very numerous; and alſo inveterate ulcers, were found to admit of inoculation with as great ſucceſs, as thoſe conſtitutions in which no deviation could be diſcovered from the moſt perfect health. Mr Quier obſerves, that he does not remember to have ſeen the diſeaſe more favourable at any time than in moſt of thoſe patients. At firſt, he made them undergo a longer and ſtricter preparation than others; but experience afterwards taught him, that ſuch a precaution was, in moſt caſes, quite unneceſſary; and he gives it as his opinion, that, in inoculation, the prediſpoſition of the body is a matter of but little importance, if there be no objection, eſpecially from want of ſtrength, to the uſe of mercurials and cathartics. Even old age, we are told, is no objection to the practice, if it be not attended with ſuch debility as renders the patient incapable of undergoing the neceſſary evacuations.

Calomel, mixed with ſome teſtaceous powder, and a ſmall proportion of tartar emetic, is the preparation of mercury recommended by our author; and his purgative is Jallap and cream of tartar.

tartar. Mercury in that climate has a wonderful tendency to ſalivate; but we are informed of a ſingular fact with reſpect to it, that mercury very ſeldom affects the ſalivary glands of thoſe who have not yet reached, or are not much paſt the age of puberty; and that young people about that period of life, can bear this medicine in a much greater proportion to their age than adults.

The variolous matter, we are told, is equally capable of producing its effects, at whatever period of the diſorder it is procured. Mr Quier has uſed the lymph as ſoon as it began to be collected in the inciſions, the crude ichor of the natural and inoculated ſmall-pox, the concocted pus of all three, and the matter almoſt concreted under their ſcabs in the exſiccation, and all with equal ſucceſs.

The quality of the ſmall-pox from which the matter for inoculation is taken, has, we are informed, no influence on the ſubſequent diſeaſe; which Mr Quier has known extremely favourable when the contagion was communicated from a very confluent ſort, of which the patient died; and, on the contrary, the puſtules have been nu-

merous when the matter was taken from a perſon who had been inoculated.

In ſome inſtances it happened, that the patient had been infected in the natural way before the inoculation; it did not appear, however, that the diſeaſe was the leaſt more ſevere from the contagion being accumulated.

On the evening of the third day from the inciſion, incluſive, it was found of uſe, if the mercury had not affected the patient's mouth, to give a ſmall doſe of calomel and emetic tartar, proportioned in quantity to the age and ſtrength of the patient. And, on the fourth day from the inciſion, it was the general practice to commence the uſe of a purging infuſion, compoſed of cryſtals of tartar and ſal cathart. amarus. Of this a ſufficient quantity was given to procure two or three ſtools daily, till the eruption was completed.

The earlier and more conſiderable the inflammation of the inciſions appear, the more favourable, in general, we are told, is the ſubſequent diſeaſe. And when the inciſions continue till the ſeventh or eight day, with very little tumor and inflammation, it is found expedient to follow the advice of Baron Dimſdale, in repeating the doſe

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of the mercurial powder, given on the third evening after inoculation. This powder, it is ſaid, promotes the inflammation of the inciſions, and accelerates the eruption.

During the continuance of the eruption, the belly is directed to be kept lax, eſpecially in children, as thereby the convulſions ſo incident to that tender age, at this time, ſeemed to be prevented.

As it was often difficult to diſcover whether a ſlave had, or had not, formerly paſſed through the ſmall-pox, the variolous matter was ſometimes unavoidably inſerted into thoſe who had before been ſubjected to the diſeaſe in the natural way. In ſuch circumſtances, however, the diſorder was never again produced; and our author is of opinion, from all the experience he has had on this point, that the ſmall-pox never occur twice in the ſame patient.

In a ſecond letter on this ſubject, Mr Quier remarks, that the new method of treating inoculated ſmall-pox was found very detrimental when applied to the natural diſeaſe in that country; and he attributes the uncommon mortality in the year 1768 chiefly to that cauſe.

Mr Quier prefers freſh matter for communicating the ſmall-pox, to that which has been kept ſome time on the point of a lancet; and, chiefly, for this reaſon, that when a lancet, with fluid matter on its point, is made uſe of, it is inſerted ſo eaſily that no inflammation occurs till the variolous matter has had time to operate; ſo that a more certain judgment can be formed from the appearance of the inciſions, than when matter incruſtated on the lancet has been uſed, which frequently occaſions an immediate inflammation, in no reſpect owing to the virus having taken effect.

Thoſe exanthemata which now and then appear about the time of the eruption of the ſmall-pox, however alarming they may ſometimes have appeared to the inexperienced, our author has always found, not only to be void of danger, but even to be a certain ſign of the mildneſs of the ſubſequent ſmall-pox.

Mr Quier, when ſpeaking of the conſequences attendant on the eruption of the ſmall-pox, remarks, that, however well calculated, cold air, cold water, and purgatives are to impede the progreſs of the variolous ferment; yet when the eruption is once compleated, as they are now no longer

longer requiſite on that account, as they will certainly retard the ſuppuration of the puſtules, and the due diſcharge of the corrupted humours by the ſkin, the moſt natural way of evacuating them. At this period of the diſeaſe, he always orders the patient to be kept within doors, but without fire, or any extraordinary quantity of clothing. Warm drinks are given; but if the heat of the ſkin be great, and if the inflammation of the puſtules occaſion any ſymptomatic fever, the patient muſt take nitre in proportion to its ſeverity.

It was already remarked, that it is our author's opinion, that the ſmall-pox never occurs twice in the ſame patient. Several experiments were made to determine this point: A great number of people were inoculated, thirteen of whom had formerly gone through the diſeaſe in the mildeſt manner, from inoculation, and the reſt had had the ſmall-pox in the natural way. The effects in both were the ſame; in ſome, the inciſions healed without producing any inflammation; in the greateſt number, however, they not only inflamed, but yielded a quantity of pus. But, in none of them, was a ſecond ſet of ſmall-pox produced; yet Mr Quier found, that the matter which occurred from the inflamed inciſions in

thoſe who had formerly had the diſeaſe, was very capable of producing the real ſmall-pox in patients who had not previouſly been ſubjected to this diſorder.

III.

Account of the Treatment of Bilious Remitting Fevers in the Military Hoſpitals at Martinico in the year 1761, *in a Letter from Dr* George Monro *to Dr* Monro *Jermyn-ſtreet, London. V. Letters and Eſſays on the Small-pox, Inoculation, Meaſles, &c.* By Different Practitioners. 8vo, London.

WHILE Dr Monro remained with the military hoſpitals at Martinico during the late war, a great number of the ſoldiers were taken ill of a bilious fever, which appeared to be ſomewhat of the bilious autumnal kind, but of a much more malignant nature, we are informed, than any to be met with in Europe. The bowels were commonly filled with a very putrid bile and other liquors; and the preſervation of the life of the patient depended, in a great meaſure, on evacuating ſpeedily and ſafely theſe corrupted humours with which the primae viae were loaded.

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On the firſt attack of the fever bleeding was found neceſſary; but, if it was delayed till the firſt ſymptoms were over, it was then found to be hurtful, except under particular circumſtances; and it was therefore commonly omitted.

When this fever was attended with a burning heat, a fulneſs and beating at the temples, when the eyes were turgid and full, as if preſſed out of the head, when there occurred intolerable ſickneſs, nauſea, and pain of the ſtomach, and when it gave the patient excruciating torture to preſs with the hand on the ſtomach, the taking away ſeven or eight ounces of blood was of ſervice. After this, it was neceſſary to keep almoſt perpetually fomenting the ſtomach, and frequently to repeat emollient clyſters till the body was opened, and then to give once, twice, or thrice, at the interval of ſome hours, a ſolution of one, two, or three grains of tartar emetic, and an ounce of manna in water, to puke the patient freely, and afterwards to give it in ſmall quantities, ſo as to keep the belly looſe.

When the ſtomach was much oppreſſed, without any violent inflammatory ſymptom, then bleeding was omitted. But the fomentations were aſſiduouſly applied to the ſtomach, and the belly

belly was kept open by the help of clyſters, and then three, four, or five grains of tartar emetic were given by way of an emetic, and repeated once or oftner, if required.

After the emetic had operated freely, then ſmall doſes of a ſolution of manna and of tartar emetic were given, ſo as to operate freely by ſtool, at the ſame time that emollient clyſters were frequently repeated.

When the bowels were thus well emptied, the fever either went off, or an intermiſſion was procured; at which period, it was neceſſary to give the bark freely. An ounce in the twenty-four hours commonly put an effectual ſtop to the fever, though ſmall doſes had no effect whatever.

When the ſtomach proved ſo irritable as not to bear the bark in proper doſes, opiates were given with great advantage, both in procuring reſt, and in enabling the ſtomach to retain the bark. Small doſes of opium, however, had no effect. It was neceſſary, therefore, to give a large one, and ſometimes to repeat it before the end propoſed was procured. It muſt be remarked, too, that opiates, when given before the ſtomach and bowels were thoroughly cleaned, always

ways made the patient reſtleſs and uneaſy, and, in general, were ſoon thrown up again. Upon the whole, the principal points to be attended to in our author's practice in this diſeaſe, are, as we have already remarked, a thorough cleaning of the primae viae, both by vomits and purgatives, together with a continued uſe of warm fomentations to the ſtomach, and afterwards, when an intermiſſion appears, a free uſe of the bark.

IV.

De Hernia veſicae Vaginali. V. Ed. Sandifort Anatomes et Chirurgiae in Academia Batava, quae Leidae eſt, Profeſſoris, Obſervationes Anatomico-pathologicae. Lugduni Batavorum.

IT is well known, that herniae occur in a variety of ſituations, inſomuch, that there are ſcarce any of the abdominal viſcera which, at different times, have not given riſe to tumours of this nature. In the paper before us, we are favoured with the hiſtory of a caſe, in which very troubleſome ſymptoms enſued, from a protruſion of the bladder

bladder into the vagina, in an unmarried woman of about twenty-five years of age.

This woman for many years had been liable to violent hyſteric affections, which at laſt were ſucceeded by a dry, convulſive kind of cough. When, in courſe of time, this cough diſappeared, ſhe was ſeized with a ſuppreſſion of urine, together with great pain and tenſeneſs in the abdomen. Other remedies failing, the catheter was had recourſe to, for evacuating the urine; but it was with difficulty introduced. This ſuppreſſion returned very frequently, was always preceded by the convulſive cough, and ſometimes even with convulſions, which commonly ended in faintings.

The obſtruction which occurred to the introduction of the catheter, ſeemed to proceed from a conſiderable weight and pain which the patient complained of in the fore part of the genitals, and which was always moſt ſevere when the ſuppreſſion of urine was not conſiderable. On examining the parts, the hypogaſtric region was tenſe and painful; but there was no conſiderable tumour perceivable, as there uſually is, in the under part of the abdomen, when the urine has been long ſuppreſſed; but, upon introducing the finger

finger into the vagina while the ſuppreſſion continued, a large tumour was diſcovered, which occupied the whole cavity of the vagina. In this ſwelling a fluctuation was perceived; but no urine could be evacuated by compreſſing it, unleſs the catheter was at the ſame time introduced, and then a plentiful evacuation enſued; though, even in this manner, the contents of the ſwelling could not be entirely diſcharged, unleſs the compreſſion was continued.

When the urine was entirely evacuated, the catheter could be eaſily introduced; the tumour diſappeared; the ſuperior part of the vagina felt lax and flaccid; and the finger could be eaſily puſhed up to the mouth of the uterus, till the tumour began again to increaſe by the urine collecting in the bladder. Then the ſuppreſſion returned, attended with tenſion and pain as before, which commonly ended in convulſions, unleſs the urine was in due time evacuated by the introduction of the catheter.

The urine, which at firſt was of a natural appearance, after the diſorder had ſubſiſted for ſome time, became leſs pure, and ſeemed to contain a number of ſmall membranous filaments, as if the internal coat of the bladder had been eroded by it.

it. From this time, the ſenſibility of the bladder became ſo much encreaſed, that it was found neceſſary to introduce the catheter much more frequently than before.

It ſoon appeared to our author, that a peſſary, properly adapted for the ſupport of the relaxed parts, would, in this caſe, probably be the moſt effectual remedy; and an inſtrument of that kind being procured, and ſo conſtructed as not to prevent the diſcharge of the menſtrual flux, it was introduced; and being continued for ſeveral years, till the parts had again recovered their tone, a compleat cure was at length obtained. The peſſary was then no longer neceſſary, and the patient was perfectly freed of every uneaſineſs in making water.

V.

G. G. Schillingii de Lepra Commentationes. 8vo, Lugduni Batavorum.

THIS diſſertation upon leproſy was wrote by Dr Schilling at Surinam in the Weſt Indies,

dies, where the author had frequent opportunities of ſeeing and treating this diſorder. It is now publiſhed, along with two other papers on the ſame ſubject, by Dr Hahn of Leyden, to whom they had been communicated by the author.

This diſorder, our author obſerves, is very eaſily diſtinguiſhed when it has arrived at any conſiderable height; and, on the contrary, during its firſt ſtages, it is very difficult to detect. It is of great conſequence, however, in the treatment, to be able to diſtinguiſh the diſorder ſoon after its commencement; and our author mentions two circumſtances which he aſſerts to be conſtant and never-failing ſymptoms, viz. a change of colour, together with inſenſibility in the parts affected. The diſcolouration of the ſkin which occurs here, is of two kinds; ſometimes the parts are of a pale red complexion, and on other occaſions they are white, with a tendency to a red or livid yellow appearance. In the former caſe, the hairs growing upon the parts have ſomewhat of a yellow or red appearance. In the latter, they are always white. In both inſtances, the diſorder breaks out in ſpots of a round figure, which, in the beginning of the complaint, are always

ways exceedingly ſmall. Inſenſibility of the part is likewiſe common to both.

When, in courſe of time, the diſorder has obtained a more firm foundation in the ſyſtem, the lobes of the ears begin to ſwell, turn hard, and ſmall tumours appear in different parts of them. The ſides of the noſe, lips, and at length the whole face, ſwell and become red. This redneſs of the ſkin, in time, turns into a kind of blue, which gradually acquires a more livid appearance, in proportion to the continuance of the diſorder. The ſkin is, by degrees, more and more contracted, and forms itſelf into a number of hardened folds or wrinkles.

In many inſtances, by means of proper attention to diet and other circumſtances, the diſorder has continued in this ſituation, without making any farther progreſs, for ten, or even twenty years. But when, from neglect of proper management, the diſeaſe again begins to advance, the leprous bloatches ſpread from the face over the whole body, even to the ſoles of the feet; and, riſing into nodes and ſmall tumours, occaſion a very diſagreeable deformity of the whole habit.

It often happens, that the fingers are the parts firſt affected with this diſorder. Small veſicles riſing below the nails, the points of the fingers ſwell, and loſe their feeling: By degrees the ſecond phalanx become diſeaſed, but they remain free from pain, inſomuch that the ſmall bones are often taken out without giving much uneaſineſs to the patient, and on other occaſions they fall out of their own accord.

In the mean time, the perſpiration is entirely ſtopped up, by that thickneſs and hardneſs of the teguments which prevails univerſally over the body. Hence the ſick fall into cachexies, leucophlegmatic ſwellings, dropſy, melancholy, and at laſt are often ſeized with a taedium vitae, which terminates in their putting a voluntary end to their miſerable exiſtence.

The breath in this diſorder acquires an intolerably foetid ſmell; the belly is commonly coſtive, and is with difficulty acted upon by purgatives; the foeces are dry, black, and have a burnt appearance; the urine is of a red colour, and adheres firmly to the veſſels in which it is collected; and the tongue is always dry and covered with a black cruſt. The blood is commonly very thin; that which is taken from the veins has, for the

moſt part, a very putrid ſmell; but this circumſtance was never obſerved by our author in blood taken immediately from an artery.

In ſome inſtances of this diſorder, the feet are the parts chiefly affected, and then the complaint has been commonly termed *elephantiaſis*, not only from the reſemblance of the diſeaſed feet to thoſe of the elephant, but from the walk of ſuch patients reſembling exactly the ſtep of that animal.

In this ſpecies of the complaint, the ſkin and other ſoft parts become wonderfully expanded, at the ſame time that the different ſmall bones ſwell conſiderably. The toes become thick, and at laſt melt down, and run together as if made of wax. The ſlighteſt affection of the diſeaſed parts occaſions a diſcharge of blood, which, however, is commonly eaſily put a ſtop to. The diſorder by degrees ſpreads from the toes over the whole foot, and from thence proceeds to the femur, rendering the different articulations in its courſe ſtiff and immoveable; at the ſame time that, in many inſtances, the muſcles and tendons concrete ſo firmly together, that the moſt ſkilful anatomiſt can neither ſeparate or diſtinguiſh them without great difficulty.

It has been tried, whether amputation of the member, in caſes of this kind, would prove beneficial or not; but, as yet, it has never, we are told, been found to ſucceed. In ſome, a locked jaw occurred about the ſeventh day from the operation. This again was commonly ſucceeded by tetanus, which at laſt ended in death. Others died immediately from convulſions; and in ſuch as did ſurvive the operation for any length of time, the wound occaſioned by the operation did not heal, and the diſorder at laſt ſeized upon the other foot. A particular deſcription is given by our author, of the appearance obſerved on diſſecting ſuch limbs after amputation: The internal appearance of the bones are nearly the ſame, he obſerves, as thoſe obſerved in bones affected with ſpina ventoſa.

Although this diſorder is very frequent in ſome of the Weſt India iſlands, and in ſome parts of the continent of America, yet our author is clearly of opinion that it is not originally a diſeaſe of that climate. It was at firſt introduced by the negroes carried from the coaſt of Africa, and has ſince been kept up by an annual importation of ſlaves from the ſame country: For, although there are many inſtances of the native A-

mericans labouring under complaints of this nature, yet there are many entire tribes in which it has never been known; and it occurs with thoſe only who have frequent intercourſe with the African ſlaves.

It has been aſſerted by ſome writers, that leproſy is not communicated by contagion; but our author is of a different opinion, and has no doubt of its being a contagious diſorder.

In the cure of this diſeaſe, we are directed to have three principal objects in view. To reſtore, as much as poſſible, to a natural ſtate, the perſpiration of the patient; to dilute the juices ſufficiently with healthy nouriſhing fluids, ſo that the acrid particles contained in them may be more eaſily expelled; and, laſtly, to reſtore a due degree of ſtrength to the whole habit.

With a view to the firſt of theſe indications, a frequent uſe of the warm bath is much recommended. At firſt it is neceſſary to have recourſe to it with ſome caution, as it is apt to induce anxiety and palpitations about the heart, and on ſome occaſions, convulſions: For this reaſon, the bath ſhould not be repeated above twice a week, at firſt, and the patient ſhould not remain in it a-

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bove fifteen minutes at once. He ſhould afterwards, we are told, come to uſe it twice every day, viz. on getting out of bed in the morning, and again in the evening, on going to reſt. Our author remarks, that marſh mallows, flowers of elder, and other emollient herbs, make very proper additions to theſe baths.

With a view to promote this free perſpiration, which is a neceſſary part of the cure, gentle exerciſe is recommended; and it is the more neceſſary, we are told, the greater the averſion of the patient is to attend to it.

In order to dilute properly the diſeaſed fluids, and afterwards to throw them out from the ſyſtem, we are directed firſt to exhibit large quantities of any emollient decoction, and afterwards to have recourſe to ſome of the more active ſudorifics. During this part of the courſe, the greateſt care is requiſite in order to preſerve the patient from cold; for if, from expoſure to cold wind, the perſpiration ſhould again receive a check, it never fails to produce ſuch ſymptoms as always prove very troubleſome, and which, on ſome occaſions, end even fatally. During this, and very other part of the cure, it is neceſſary to keep

the belly open, by the uſe of extract of rhubarb, of aloetics, or of other gentle laxatives.

For ſuch putrid ulcers as frequently occur in patients infected with leproſy, antiſeptic fomentations are recommended, together with tinctures of myrrh, aloes, and ſuccinum. We are directed to avoid every oily application, and eſpecially ſuch as are conjoined with mercury; for, as long as the ſyſtem remains tainted with the leprous miaſma, it is always dangerous to have recourſe to mercury in any form whatever. When the general diſorder of the ſyſtem, however, is once eradicated, mercury may then, we are told, be uſed with ſafety; and in that ſtate of the complaint it is frequently of ſervice for removing ſuch calloſities of the ſkin as often remain after every other ſymptom of the diſeaſe.

With a view to ſtrengthen the ſyſtem, after the diſeaſe has been entirely carried off, a more invigorating diet ſhould be allowed; and the patients are directed to rub their whole bodies, daily, with ſpirits of wine, or with rum; and to fumigate with the ſmoke of maſtich, olibanum, benzoin, lavender, or of any other aſtringent herb or gum.

V.

De Herniis Diſſertatio. Vid. Auguſti Gottlieb. Richteri Medicinae Profeſſoris publici Ordinarii, Societat. Reg. Scientiar. Gotting. et Academiae Regiae Scientiarum Suecicae membri, Obſervationum Chirurgicarum. Faſciculus ſecundus. 8vo, Gottingae.

IT has long been regretted by every practitioner in ſurgery, that all the remedies hitherto known for the treatment of the incarcerated hernia, are found, in by much the greateſt number of caſes, to prove entirely ineffectual, and that, of courſe, a chirurgical operation ſhould be ſo frequently rendered neceſſary.

The failure of the means uſually had recourſe to in theſe caſes, proceeds, moſt frequently, our author obſerves, from the ſame mode of treatment being almoſt invariably applied in every caſe of hernia, without any regard to the ſpecies, or cauſe of the diſorder: But, by diſtinguiſhing properly between the different ſpecies of hernia, and applying ſuch remedies only as are ſuited to that kind of rupture which happens to preſent

itſelf, much greater ſucceſs, he thinks, would attend the management of theſe diſorders than has hitherto been experienced.

According to our author, there are three diſtinct ſpecies of the incarcerated hernia. The firſt, or mildeſt ſpecies of the diſorder, proceeds, he obſerves, from an accumulation of foeces in the inteſtines. It occurs, moſt commonly, in thoſe large old caſes of herniae, which have been often replaced, and which have as frequently recurred again. In ſuch inſtances, accumulations of foeces are very apt to take place in the protruded portions of the gut, not only from the diminiſhed tone of theſe parts of the inteſtines themſelves, but from the want of exertion of the abdominal muſcles, which are the ordinary and uſual coverings of all the inteſtines, and to the influence of which, in a ſound ſtate, they are, at all times, liable. As ſoon as an accumulation of foeces begins to form, the hernia becomes more conſiderable in point of ſize, acquires a greater weight, the belly becomes coſtive, and at length pain, fever, and all the other uſual ſymptoms of an incarcerated hernia, ſucceed.

In the ſecond, or what our author terms the acute inflammatory ſpecies of hernia, there is, from

from the beginning, a ſharp inflammatory kind of pain, which is always, in a very ſhort ſpace, ſucceeded by fever. The ſwelling is not commonly at firſt very conſiderable; and, when it does afterwards increaſe, it is not hard, but acquires a tenſe elaſtic feel, and becomes painful to the touch.

The third ſpecies of ſtrangulated or incarcerated hernia, our author terms the ſpaſmodic, from his ſuppoſing it to proceed from ſome ſpaſmodic affection of the parts concerned. That all the uſual ſymptoms of ſtrangulation of a gut may be produced by a ſpaſmodic contraction of the parts, is very probable; and our author is of opinion, that we cannot, on any other principle, account for thoſe conſiderable intermiſſions of all the ſymptoms which ſometimes occur in caſes of ſtrangulated hernia ſeemingly of the worſt kinds. In confirmation of this, a caſe is here related very applicable to the point in queſtion.

A young man who, for ten years, had laboured under a ſcrotal hernia, was, in the night-time, ſuddenly ſeized with violent pains in the abdomen, and other ſymptoms of ſtrangulation in the protruded gut. For the ſpace of twenty-four hours, recourſe was had to all the uſual remedies,

but

but with no advantage. The gut ſtill remained down. On the morning of the third day, our author's aſſiſtance was deſired, when the patient was found very reſtleſs, with frequent pains in the abdomen, which was tenſe and ſwelled, tho' neither hard, nor very painful to the touch. The pulſe was weak. The breathing interrupted, and the extremities cold. Every remedy commonly recommended in ſuch caſes, was tried, but to no purpoſe; and endeavours were uſed for the reduction of the gut, and continued for the ſpace of two hours, but without producing the leaſt change. At four o'clock in the afternoon of the ſame day, the ſeveral ſymptoms ſtill continued as before; and as, upon another trial for the reduction of the inteſtine, nothing effectual could be done, a poultice of camomile flowers and lintſeed was ordered to be applied to the abdomen. Our author returning about nine o'clock in the evening, reduced the gut with the greateſt eaſe, upon the very firſt trial, and every bad ſymptom immediately vaniſhed. He therefore ſuppoſes, that the great difficulty which had before occurred, in reducing the inteſtine, in this caſe, had proceeded from ſome ſpaſmodic affection of the parts, which had either diſappeared at length of its own accord,

cord, or in conſequence of the uſe of the poultices. In no other manner, does he think, can the reduction of the gut, in ſuch caſes, be accounted for; and ſome other ſimilar inſtances are here related, in ſupport of the ſame opinion.

Whenever a hernia is ſuppoſed to be of this nature, and to proceed from a ſpaſmodic affection of the parts concerned, large doſes of opiates are recommended, together with the uſe of the warm bath, and other external emollient applications. The uſe of aſtringent applications, in caſes of this nature, which are recommended by many of the moderns, is greatly condemned by our author, as tending always to aggravate the very complaints they were deſigned to remove. For the removal of ſpaſmodic affections of different kinds, to which the alimentary canal is liable, ſmall doſes of ipecacuanha, frequently repeated, are greatly extolled by our author: And a very remarkable inſtance of the effect of this remedy, in ſuch caſes, is here related at full length; it was given in half grain doſes, repeated every half hour, and, at laſt, after every other remedy had failed, it evidently procured an abatement of pain, induced ſleep, and a plentiful diſcharge of foeces, in a very obſtinate

obſtinate caſe of colic, attended with conſtipation of the belly.

VI.

De Cataractae extrahendae Methodo nova. Vid. Auguſti Gottlieb Richteri Obſervationum Chirurgicarum, faſciculus ſecundus. Gottingae.

ALTHOUGH of late years very conſiderable improvements have been made in the chirurgical operations for the cataract; yet ſtill the ſucceſs attending this branch of ſurgery is far from being ſo conſiderable as might be expected.

Extraction of the cataract has, for ſome time, been generally preferred to couching, from the ſuppoſition of its freeing the patients more effectually from the cauſe of the diſorder. But, it is very common, our author remarks, to ſee this operation done in the moſt perfect manner, and in caſes ſeemingly very favourable, without any advantage being derived from it. In ſome ſuch inſtances, the patients ſee conſiderably better for a ſhort time after the operation, but gradually loſe their ſight as entirely as before; and in o-

thers,

thers, the patients are not ſenſible of a more perfect viſion, even immediately after the operation.

This want of ſucceſs in extracting the cataract may proceed, our author thinks, from various reaſons, but occurs more eſpecially from the following cauſes, viz. either from the diſorder being conjoined with ſome general affection of the ſyſtem, as the gout, ſcrophula, or venereal diſeaſe, or from the capſula of the cryſtalline lens which, in this operation, is always left behind, in ſome caſes becoming opaque, or otherwiſe diſeaſed.

In every operation of this kind, therefore, the general health of the patient ſhould be previouſly examined; and, if any of the above named diſorders prevail in it, they ſhould either be corrected, or, if that cannot be effected, and if the operation is ſtill inſiſted upon, a very doubtful prognoſis ſhould be given.

But, with a view of preventing a return of blindneſs from the laſt mentioned cauſe, our author propoſes an improvement in the extraction of the cataract, which he has often put in practice, we are told, and never without ſucceſs. In couching or depreſſing the cataract, the capſule is

is always depreſſed, together with the body of the lens. This our author is convinced of from diſſection of the parts after that operation had taken place; and it was this circumſtance which firſt gave him the idea of extracting the cataract in the following manner.

After cutting the cornea in the uſual way, he introduces a ſmall ſharp needle, guarded with a canula; this being puſhed into the body of the lens, it is then to have its point firſt gently raiſed, then depreſſed, and afterwards moved in all different directions, ſo as to detach the lens and its capſule effectually from the ſurrounding parts. After this, by making a very gentle preſſure on the ball of the eye, the cataract, covered with its tunic, is eaſily puſhed out.

It may be objected to this operation, our author remarks, that the vitreous humour will very readily be puſhed out, together with the lens; but, when it is cautiouſly done, that accident, he obſerves, never happens.

VII.

VII.

A Treatiſe on the Theory and Management of Ulcers, with a Diſſertation on White Swellings of the Joints; to which is prefixed, an Eſſay on the Chirurgical treatment of Inflammation, and its conſequences. *By* Benjamin Bell, *Member of the College of Surgeons of* Edinburgh, *and one of the Surgeons to the Royal Infirmary of that city.* 8vo, Edinburgh.

IN the firſt of theſe eſſays, Mr Bell gives a full account of the uſual ſymptoms, cauſes, terminations, and treatment of external inflammatory affections. Diſorders of this nature which occur internally, he does not enter upon, as theſe more properly, he obſerves, fall under the management of the phyſician than of the ſurgeon.

When the phlegmon, or any other inflammatory affection is to be attempted to be cured by reſolution, it has been the prevailing practice to have recourſe to fomentations and other warm applications. Our author, however, has, from experience,

perience, been long convinced, that remedies of that nature, however proper they may be for promoting ſuppuration, are never admiſſible, whilſt the reſolution of an inflamed part is thought practicable, as they have always a very conſiderable influence in occaſioning an increaſe of the ſwelling, with a conſequent tendency to ſuppuration.

The remedies moſt to be depended on, in this part of the cure, our author obſerves, are, both general and topical evacuations of blood, the quantities to be determined by the circumſtances of the caſe, age, and ſtrength of the patients, gentle laxatives, diaphoretics, and other cooling medicines; at the ſame time that the part affected is to be kept conſtantly moiſt by a ſolution of lead in the vegetable acid, which he conſiders as the moſt effectual application for the reſolution of an inflamed tumour.

He prefers a ſolution of ſaccharum ſaturni in water to the extractum ſaturni of Goulard, as with it we are much more certain of the exact ſtrength of our preparation than we ever can be with the other. For, although in Goulard's extract, as likewiſe in the acetum lythargyrites of the ſhops, which are both, our author obſerves,

very

very nearly the ſame, we may be certain of the proportion of lead employed to the vinegar; yet we never can, but by cryſtallization, know exactly, or even nearly, how much of the former the menſtruum may have diſſolved, as that muſt depend upon a variety of accidents, and particularly on the ſtrength of the acid, and exact degree of heat employed, which are circumſtances we have not always in our power exactly to regulate.

Before proceeding to treat of the neceſſary remedies for promoting ſuppuration, our author enters pretty fully into the conſideration of the formation of pus.

By many authors pus has been imagined to conſiſt in a diſſolution of the blood-veſſels, nerves, muſcles, and other ſolids, in the fluids of the parts in which inflammatory tumours occur. Others, again, have ſuppoſed purulent matter to be formed in the blood, and that it is ſecreted in its complete ſtate into abſceſſes, wounds, and ulcers. Both theſe opinions, our author, by a variety of arguments, endeavours to overturn, and afterwards goes on to ſhew, that pus, in every inſtance, is formed by a change produced

from a certain degree of fermentation upon the ſerous and coagulable parts of the blood after their ſecretion into the cavities of ulcers and abſceſſes. This opinion ſeems to be put beyond a doubt by the experiments of Sir John Pringle, and of Mr Gaber of Turin, with reſpect to the point in queſtion.

Mr Bell ſuppoſes, that one certain conſequence of any conſiderable degree of inflammation, is the effuſion of a quantity of the ſerous and coagulable parts of the blood into the cellular membrane of the part affected. As, in order to convert theſe fluids into pus, when detached from the body, it has been found, by experiment, that a certain degree of heat is neceſſary, not only to be applied, but to be conſtantly continued, Mr Bell recommends a more particular attention to the treatment of inflamed parts in this manner than has commonly been given; and adviſes, when ſuppuration is wiſhed to be promoted, as the moſt effectual means for that purpoſe, a very frequent renewal of the common emollient poultices and fomentations. But, in order to receive any advantages from theſe applications, we are directed to renew them much more frequently than is commonly practiſed; for inſtance, every

ſecond

ſecond or third hour, at fartheſt, and to be applied with as great a degree of warmth as the patient can poſſibly bear.

Mr Bell obſerves, that it was the proſecution of a ſet of experiments ſimilar to thoſe of Sir John Pringle and Mr Gaber, which firſt ſuggeſted to him the probability of the great advantages to be derived from the preſervation of a due degree of heat in inflamed parts, when intended to be brought to ſuppuration. And he has accordingly, he remarks, on many occaſions ſince that time, found the treatment of ſuch caſes go on much more eaſily than otherwiſe he ſhould have expected, or have been able to explain.

After pus is thoroughly formed in an abſceſs, Mr Bell next proceeds to conſider the moſt proper method of diſcharging it; and, as in large collections of matter, laying them open to any conſiderable extent, is almoſt always attended with diſagreeable conſequences, ſuch as debilitating ſweats, quickneſs of pulſe, and other ſymptoms of hectic fever, in order to avoid theſe, which are ſuppoſed to proceed in a great meaſure from the too free admiſſion of air to the internal ſurfaces of the ſores, we are directed to open every abſceſs of any conſiderable ſize, by means of a ſeton or

cord introduced from the ſuperior to the moſt depending part of the tumour; which evacuates the matter gradually, and is ſeldom or never, we are told, attended with any of the bad effects which, in ſuch caſes, almoſt conſtantly ſucceed to large inciſions.

The practice here recommended has, for many years, been followed in the Royal Infirmary of Edinburgh, and has always been attended with very good effects. An inſtrument is delineated by our author, by which a cord may, with the greateſt eaſe and ſafety, be introduced in every caſe of abſceſs.

In the ſecond part of this work, on the theory and treatment of ulcers, we have a full account of all the varieties of theſe diſorders. Mr Bell divides ulcers in general into two claſſes, viz. 1. Such as are merely local, and not connected with any diſorder of the conſtitution; the different ſpecies of which are, the ſimple purulent ulcer, the ſimple vitiated ulcer, the fungous ulcer, the ſinous, the callous, the carious, the cancerous, and cutaneous ulcers.

2. Such as are connected with, or depend upon ſome general diſorder of the ſyſtem; of which

which the ſeveral ſpecies are, the venereal, the ſcorbutic, and ſcrophulous ulcers.

In the treatment of ulcers, it has been almoſt univerſally recommended never to attempt the cure of ſuch as have been of long ſtanding, as, from the very acrid matters which they are frequently known to diſcharge, it has been commonly imagined that drying up ſuch ſores might prove dangerous to the conſtitution. For a great quantity of acrid humours would thereby be pent up in the ſyſtem, which otherwiſe, if the ulcers had been kept open, would ſtill, by their means, have continued to be diſcharged. Mr Bell, however, is of opinion, that no ſuch acrid matters, as are frequently obſerved to be diſcharged from ulcers, ever ſubſiſted in the blood; and adduces a variety of arguments in confirmation of this.

The acrimony which, in ſuch caſes, occurs, is produced, he thinks, in a great meaſure, by ſome particular affection of the organs which ſeparate thoſe fluids from the blood, from which the matter, by its remora in the cavities of ulcers, is afterwards formed: For, frequently, he obſerves, we can, in the courſe of a very few hours, by means of an external topical application merely, change the appearance entirely of the matter of an ul-

cer, which, in that manner, could never in any caſe be done, if the change produced depended on an alteration to be effected on the general maſs of blood. He is, therefore, of opinion, that ulcers prove hurtful or beneficial to the conſtitution, not by the quality of matter diſcharged, but by the quantity; and hence he thinks the cure of every ſore, of whatever continuance, may be rendered perfectly ſafe by the previous introduction of an iſſue, which diſcharges a quantity of fluids, equal to the diſcharge occaſioned by the ſore to be healed up. And he aſſerts, from extenſive experience on this point, that no inconveniencies ever reſult from the practice; hence he is clearly of opinion, that the cure of every ſore may, with ſafety, be attempted.

The ſimple purulent ulcer is the firſt ſubject of our author's conſideration, not only as being more eaſily managed than any ſore we are acquainted with, but as it is to this ſtate every other ſpecies of ulcer muſt be reduced before any permanent cure can be obtained.

The means neceſſary for the moſt effectual treatment of the purulent ulcer are here fully enumerated; as are afterwards the different remedies

dies for reducing to a purulent ſtate the ſeveral ſpecies of ulcers; but, as the nature of this work does not admit of a very particular account being given, we ſhall endeavour to point out ſuch circumſtances from the whole, as to us appear of moſt conſequence.

By the ſimple vitiated ulcer, Mr Bell means all ſuch ſores as differ from a ſimple purulent ulcer in the nature of the diſcharge afforded. Whenever the ſolids are particularly affected, the ſore more properly belongs to one or other of the ſpecies afterwards deſcribed, and which have been already enumerated.

The principal cauſe of the purulent diſcharge of ulcers degenerating into matters of different kinds, our author looks upon to be inflammation of the parts affected; and according as that ſymptom is more or leſs conſiderable in ſores, at leaſt in thoſe of a local nature, unconnected with any diſorder of the habit, the diſcharge, he alledges, is always more or leſs of a vitiated nature: In conſequence of this, he remarks, ſuch applications are found to be moſt effectual in ſores of this nature, as are known to be moſt uſeful in removing inflammatory affections; and hence is explained, he obſerves, the great efficacy of warm

emollient poultices and fomentations. In ſimple ſores of a vitiated nature, our author recommends theſe as the moſt effectual remedies; as they ſeldom fail, not only in procuring eaſe to the patient, but in producing a conſiderable change for the better in the nature of the diſcharge.

Iſſues are recommended as a proper and very neceſſary ſtep in the cure of every ulcer. For, independently of riſk to the conſtitution, from the healing of old ſores, without the introduction of adequate drains, nothing, we are told, contributes more to the cure, than the practice recommended. And, unleſs proper attention be given to this point, although we may ſometimes effect the cicatriſation of ſuch ſores by means of aſtringent applications; yet cures ſo obtained will never, we are told, prove very laſting. For the ſyſtem having, by means of the ulcers, been, for a long time, accuſtomed to throw off conſiderable quantities of fluids, the redundancy which a ſtoppage of theſe unavoidably occaſions in the conſtitution, always, at laſt, forces open the cicatrices of newly healed ſores, unleſs this effect be guarded againſt by the introduction of adequate drains.

After

After the inflammatory ſtate of an ulcer is over, gentle compreſſion, by means of a laced ſtocking, or of a roller ſo applied as to act gently upon the parts contiguous to the ſore, is much recommended.

When ſpeaking of the ſinous ulcer, our author obſerves, that the intention of cure, in every caſe of ſinus, is to produce a coaleſcence of its ſides, ſo as to deſtroy any vacuity that may have occurred. The moſt effectual means for accompliſhing this, is, firſt, to make a depending orifice for a free exit to the matter, and then, by a gentle irritation, to induce, on the internal furface of the ſinus, a ſlight degree of inflammation, which, by experience, he obſerves, is known to be that ſtate moſt favourable for the production of adheſion between any two parts. And he recommends, as the moſt ſimple and eaſy method of effecting this, the introduction of a ſeton or cord from the orifice in the ulcer, along the courſe of the ſinus to its other extremity, where an opening large enough for the diſcharge ſhould be immediately made for the reception of the ſeton.

As the cure advances, we are directed to diminiſh the ſize of the cord gradually, by taking away a thread, or ſo, from its thickneſs, every

ſecond

ſecond or third day; and, at laſt, when the diſcharge is conſiderably leſſened, to take it out altogether, and to finiſh the cure by making a gentle preſſure upon the courſe of the ſinus for ſome time longer, by means of a proper bandage.

When ſpeaking of the cancerous ulcer, a variety of arguments are enumerated to prove, that cancer is originally a local affection only; and, as no remedy our author has ever yet ſeen employed has proved effectual, he recommends, as the only reſource, extirpation of the parts affected.

By the cutaneous ulcer, our author underſtands ſuch ſores as frequently occur from eruptions of the herpetic kind, when improperly treated, or entirely neglected. As he conſiders diſorders of this nature to be entirely local, and to proceed moſt frequently merely from a remora of the matter of perſpiration, occaſioned by want of due attention to cleanlineſs, or ſome other ſimilar cauſe, he adviſes, as the moſt effectual remedies, in every caſe of this kind, a frequent uſe of the warm bath, together with antimonials, and other medicines of the diaphoretic kind.

For

For external application, drying aſtringent remedies are recommended, ſuch as lime-water, ſolutions of ſaccharum Saturni, and of mercurius ſublimatus corroſivus. This laſt is particularly adviſed as the moſt effectual application in caſes of tinea capitis, a ſpecies of the diſorder under conſideration. About ten grains of the mercury to a pound of water, makes a ſolution of a very proper ſtrength for every purpoſe of this kind.

In deep ulcerations of the herpetic nature, an ointment, prepared with axunge and calcined zinc, is recommended as a very effectual application for the removal of inflammation, which, in ſuch caſes, frequently occurs.

The laſt diſſertation of the work before us contains obſervations on white ſwellings of the joints. Our author is clearly of opinion, that ſwellings of this nature proceed from two different ſets of cauſes; and he thinks it a matter of the greateſt conſequence in practice, to diſtinguiſh properly between the one ſet of cauſes and the other. The one produces a diſeaſe which often has been, and certainly is, of a curable nature; whereas the diſorder produced by the other

ther has, probably, been ſeldom or never known to yield to medicines.

The mildeſt ſpecies of the diſeaſe he conſiders as of an inflammatory or rheumatic nature; and the other to be connected with a ſcrophulous diſpoſition.

Although white ſwellings of the joints, in their more advanced ſtages, acquire an equal inveteracy, when proceeding from either of the two foremen-tioned cauſes, yet if they be attended to ſoon after their commencement, there is always a conſider-able difference to be obſerved. The pain, in the ſpecies of the diſorder from a rheumatic diſpoſi-tion, is always, we are told, from the beginning, diffuſed over the whole joint, and, on ſome occa-ſions, extends even a conſiderable way along the muſcles that are attached to it. While, in the other ſpecies of the diſeaſe, the pain is not only always at firſt, but ſometimes even when the complaint has been of long ſtanding, confined to a very ſmall circumſcribed ſpace.

In the former, the ſwelling is always confined to the ſoft parts, and is from the beginning ex-ceedingly evident; but, in the latter, there is ſel-dom, for ſome time, any perceptible ſwelling,

and

and when it does more ſenſibly appear, the bones are found evidently to be the parts chiefly affected, the ſurrounding teguments coming only to ſuffer on a farther progreſs of the diſeaſe.

Theſe are the chief local differences of the two ſpecies of this diſorder; but ſome diſtinction, our author obſerves, may likewiſe be obtained from the general habit of the patient, and from the manner in which the complaint may ſeem to have been produced.

Thus, when ſuch ſwellings occur in young, ſtrong, plethoric people, eſpecially in ſuch as have formerly been ſubject to rheumatiſm, ſuch, moſt probably, will always prove to be of the mildeſt or rheumatic ſpecies of the diſorder.

When, on the other hand, ſwellings of this nature appear in ſuch patients as are otherwiſe evidently of ſcrophulous diſpoſitions, where, together with a fine ſkin, and delicate complexion, there are either, on examination, found to be hardened glands in the neck, arm-pits, or inguina; or it is diſcovered, that the patient has, from his anceſtors, a title to ſuch complaints; when, with any, or all of theſe circumſtances, the diſorder has begun without any evident external cauſe,

we

we need be under very little doubt in concluding it to be of a ſcrophulous nature.

In the ſcrophulous ſpecies of white ſwelling, very little aſſiſtance, we are told, is to be obtained from art; but, in the other, we have it frequently in our power to be of conſiderable ſervice.

In the incipient ſtate of this diſorder, topical blood-letting is of very great conſequence, particularly cupping and ſcarifying, ſo as to take away conſiderable quantities of blood from the part immediately affected. Bliſters, repeatedly applied to the parts, are likewiſe much recommended in this ſtage of the diſorder.

When ſwellings of this nature have been of more conſiderable ſtanding, gentle mercu*rials*, particularly in the form of unction, to the parts affected, are adviſed; and, for the removal of that ſtiffneſs and rigidity of the joints which frequently remain after every other ſymptom of the diſeaſe has diſappeared, warm emollients, together with a long continued uſe of frictions, are the remedies chiefly to be depended on. This rigidity of the joints, which, in ſuch caſes, is ſo common, has generally, our author obſerves, been ſuppoſed to proceed, either from the formation

tion of a real anchyloſis, in conſequence of the ends of the bones compoſing the joint having run into one another, or from an inſpiſſation of the ſynovial fluid of the joint itſelf: Mr Bell, however, is of opinion, from a great number of diſſections which he has had an opportunity of making of diſeaſed joints in this complaint, that neither of theſe cauſes of this ſymptom occur frequently. And he attributes it, in almoſt every inſtance, to a preternatural rigidity, or contraction in the flexor muſcles correſponding with the affected joint. He, therefore, adviſes a long continued uſe of emollients with frictions, as the moſt effectual remedies in every caſe of this kind. The friction, however, in order to prove effectual, ſhould be applied over the whole extent of the fleſhy parts of the muſcles, and not confined, as it commonly is done, to the tendons, where it cannot probably have much influence.

VII.

VII.

Eſſais Botaniques, Chemiques, et Pharmaceutiques, ſur quelques Plantes indigenes, ſubſtitutés, avec ſuccés, à des Vegetaux exotiques, auxquels on a joint des Obſervations Medicinales ſur les mêmes Objets. Ouvrage qui a remporté le premier prix double, au jugement de M. M. de l'Academie des Sciences, Belles Lettres, et Arts de Lyons. Par M. Coſte, *Medicin des Hoſpitaux Militaires de Roy, en Reſidence á Calais, agrégé honoraire du College Royale des Medicins de Nancy, Membre de l'Academie Royale des Sciences de la même Ville, et de celles de Lyon, de Suede, &c. et* M. Willemet, *Doyen des Apothecaires, Demonſtrateur de Chemie et de Botanique au College Royale de Medecine de Nancy, Membre des Societés Royales de Suede et de Paris, et de Celles Baviere, de Heſſe, Hombourg, et de Berne. A* Nancy. 1778. 8vo,

THE philoſophical ſpirit of inquiry which ſo happily diſtinguiſhes the preſent times, has led to many new acquiſitions in the vegetable world.

world. It is to be lamented, however, that, while our ſhips are bringing home botanical treaſures from the ſouthern hemiſphere, we are neglecting the plants with which nature has furniſhed us at home, and which are overlooked, merely, perhaps, becauſe we tread them every day under our feet. With reſpect to their medicinal virtues, there is ſo much confuſion and exaggeration in all the old writers, and thoſe who have copied after them, that their real qualities are often times concealed amidſt a number of imaginary properties. A work, founded on repeated experiments, and attentive obſervation, was, therefore, a deſideratum in medicine. The performance before us is executed on ſuch a plan, and, we hope, will pave the way to other ſimilar inquiries. The learned authors have arranged, under diſtinct heads, ſuch exotic vegetables as are in the moſt general uſe; and then, after having aſcertained the properties of each of theſe, they proceed to point out ſuch indigenous plants of France and Lorraine as ſeem, from chymical analyſis, and trials on patients, to poſſeſs ſimilar principles, and which may, therefore, with propriety, be ſubſtituted in their ſtead. Of all theſe plants, as well foreign as indigenous, they give an abridged hi-

ſtory; and, to this, they add the beſt methods of preparing and exhibiting them, together with the experiments they have made to aſcertain their medical uſes. The limits of our work do not permit us to follow them minutely through the whole of their performance; we ſhall, therefore, content ourſelves with laying before our readers the following table, which is annexed to the work, and affords a general view of the reſult of their inquiries.

It may be proper, however, to obſerve, that the plants mentioned in the appendix are introduced on the teſtimony of other phyſicians. Thus, the arnica montana has been expreſsly recommended by Dr Collin in the Diſſertation, an analyſis of which is given in the firſt part of this number, and in another which he has very lately publiſhed, but which we have not yet been able to obtain. The Solanum Dulcamara was firſt noticed by the celebrated Linnaeus, and ſince by M. Razoux, phyſician at Niſmes, and others. The authors likewiſe ſpeak of it as an uſeful remedy in ulcers of long ſtanding, and in chronic rheumatiſm, on the teſtimony of Doctor Simmons. The Sedum Paluſtre, as we are told by Linnaeus, is frequently uſed, in Weſtrogotha, in caſes of

Chin-

Chincough, in which it acts as a ſedative. The Glans Quercina, (acorn), has been recommended by Dr Auehbrugger of Vienna, as a deobſtruent, when taken in the way of coffee. The Phellandrium Aquaticum was firſt recommended by Heiſter, but more particularly afterwards by Dr Ernſting of Brunſwic, in a work publiſhed in 1739, and entitled Phellandrogia. In this, as well as in a diſſertation written in German by Dr Lange of Lunebourg, 'On the ſingular Efficacy 'of the Seeds of the Phellandrium Aquaticum,' it is ſpoken of as a diuretic, antiſeptic, and expectorant. The Chenopodium Botrys is highly extolled by Dr Paulet of Paris, editor of the Gazette de Sante, as an uſeful remedy in humoral aſthma. For the cure of this affection, he recommends it to be powdered, and mixed into the form of an electuary, with honey.

How far the experience of other practitioners will confirm the obſervations of Dr Coſte and Mr Willemet, future attentive trials can alone determine. Yet it muſt unqueſtionably afford no inconſiderable degree of pleaſure to every practitioner who is not blindly attached to thoſe practices only of which he has himſelf been a witneſs, to think that there is, at leaſt, a proſpect

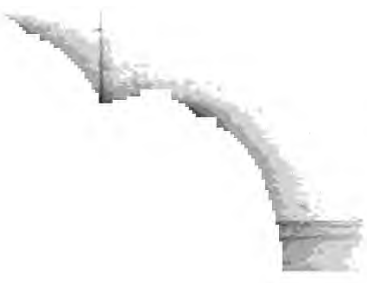
that ſome foreign articles, which cannot be had but at a great expence, may be ſupplied by others, which, as they grow in great abundance in this climate, are in no danger of being adulterated by mixture with articles, which, although of ſimilar appearance, poſſeſs very different qualities. It is, therefore, we preſume, unneceſſary to recommend it to the apothecaries of this country, to provide ſuch articles mentioned in this table, as do not enter the pharmacopoeia's either of London or Edinburgh. Nor need we ſuggeſt to candid practitioners, zealous for the improvement of their profeſſion, the propriety of giving a fair trial, on proper occaſions, to the articles here mentioned. And if, from the experience of others, the aſſertions of the authors of this diſſertation ſhall appear to be well founded, the medical world may be conſidered as greatly indebted to their zeal and induſtry.

INDICULUS

IND

PLANTARUM noſtratium cum doſibus medicis.

PLANTÆ exoticae.	PLANTÆ INDIGENÆ cum phraſi botanica Linnaei.	PL PA
	2 Mirabilis Jalapa L 254	K
SCAMM. Alep.	Convolvulus ſepium L 218	T



SECT. II.

Medical Obſervations.

I.

Obſervations on the extirpation of a Cancerous Ulcer in the lower Lip. By Mr William Deas, *Surgeon to the united Hoſpitals of St Nicholas and St Catherine,* Dublin, *communicated to* Dr Duncan.

IN all our treatiſes on the operations of ſurgery, we are directed, after the removal of cancerous ulcers or excreſcences in the lips, to retain the divided parts in contact by means of the twiſted ſuture. This method I have always experienced to be attended with ſo many painful inconveniencies, that I determined to try if a ſingle point of the interrupted ſuture, ſupported

by ſlips of ſticking plaſter and the uniting bandage, might not be ſubſtituted with ſuperior advantages; and, from many repeated inſtances, I am now convinced it may. Of theſe the following is one.

September 2. 1777. A thin healthy looking old woman, aged ſixty, came from the country to be received into the united hoſpitals. She had a cancerous ulcer, which occupied near three parts of the lower lip, ſurrounded with conſiderable hardneſs. It roſe, in ſeven months, from a ſmall pimple, which appeared near the left angle of the lip, to its preſent condition. The ſubmaxillary glands being perfectly diſengaged, and there appearing no circumſtance in her caſe to forbid the operation, it was performed without any particular occurrence, only taking care to make the lower angle, A, as acute as poſſible. The divided parts being brought together, a ſimple ſtitch was put at B, and another at C. Thoſe were ſupported with ſlips of ſticking plaſter, large compreſſes on the cheeks, and a pretty broad uniting bandage, all ſo placed as to counteract the retraction of the muſcles. The uſual regimen in ſuch caſes, and abſolute ſilence, were enjoined.



joined. The third day the bandage and compreſſes were renewed, and the fourth the wound was inſpected. Above, the parts were perfectly united; but lower down there was a ſlight ſuppuration, particularly on the points of the ſuture. A ſmall pledgit of dry lint, with the uniting ſlips of plaſter and bandage, conſtituted the whole dreſſing. Her bowels were kept free by a gentle laxatives, and after the fourth day ſhe took occaſionally a decoction of bark. Fourteen days from the operation, the parts were firmly united, and nothing appeared but a ſimple line of cicatrization; and, although her mouth was but ſmall, it looked by no means diſagreeable, or attended with any inconvenience. After having an iſſue opened in her arm, ſhe was diſcharged the hoſpital perfectly well.

If we contraſt this mode of treatment with that where the divided parts are, as it were, ſuſpended on three needles, with waxed threads twiſted round them, which pinch and contuſe the parts engaged, conſtantly irritating the muſcles to retractions, and rendering the application of dreſſings, bandages, &c. extremely painful; and all this in patients whoſe vitiated habit of body ſhould deter our giving the leaſt unneceſſary ir-

ritation, I make no doubt there are few ſurgeons will heſitate an inſtant, either in this caſe, or in that of the hare-lip, which to adopt; the one being eaſy, ſafe, and expeditious, in compariſon to the other, which is painfully complex and tedious.

But, in all cancerous caſes, previous to the undertaking any operation, I am of opinion the extract or juice of hemlock, notwithſtanding its preſent low repute, ſhould be firſt tried. And I have ſeen ſome inſtances where, in real cancerous caſes, it ſucceeded, contrary to all expectation.

II.

The Hiſtory of a Caſe of obſtinate Obſtipatio, depending on a ſtricture of the Rectum, communicated to Dr Duncan, *by Mr* Edward Johnſtone, *Student of Medicine* at Edinburgh.

MAY 3. 1777. My father, Dr Johnſtone of Kidderminſter, was called to viſit Mrs Wright, a large made corpulent woman, about forty years old, and who believed herſelf in the fifth or ſixth month of her pregnancy.

nancy. She was generally diſpoſed to coſtiveneſs, and moſt of all when pregnant.

On the 23d of April preceding ſhe took an ounce of Glauber's ſalts to remove a ſwelling with inflammation in the lower part of her thigh. She was both vomited and purged by this medicine. The ſwelling went off, but from this time ſhe had no evacuation by ſtool; and every effort of art to procure the evacuation, however powerfully directed by my father, and my brother, Dr Johnſtone of Worceſter, proved abortive.

She took, for the ſpace of four weeks, purgatives of every claſs, and in all kinds of doſes; and, though they generally remained many hours in her body before they were vomited up, they were in no inſtance effectual.

Beſides ſtimulating and oily glyſters, tobacco, in fume and decoction, was injected; and the decoction was alſo, among other purgatives, taken by the mouth.

Glyſters of warm water were daily adminiſtered, the patient was repeatedly put into the warm bath, and alſo had cold water repeatedly daſhed upon her limbs and body. She underwent all

theſe

theſe operations, though ineffectual, with reſolution and patience.

She took three pounds of argentum vivum ten days before her death, and was ſeveral times after this jumbled in a poſt-chaiſe, in order to direct the momentum of the mercury to the part affected. She had ſometimes an opiate; her belly was bliſtered; but no paſſage having been at any time procured, ſhe died on the 29th of May; having had, for ſome days before her death, unuſual ſevere pain in her left loin, about the ſigmoid flexure of the colon, with ſunk eyes, tumid belly, hiccup, and cold ſweats.

Her diet, during the whole of her illneſs, conſiſted of thin brothes, gruel, panada, barley water, cheeſe whey, wine whey, and ſometimes cold water with toaſted bread in it.

Her body was opened the next day after her death. I was preſent, and obſerved the inteſtines, both great and ſmall, to be enormouſly ſwelled with flatus and other contents, the colon as thick as the thigh ordinarily is, the ſmall inteſtines in proportion; only the ſtomach and duodenum were not ſwelled in equal degree with the other inteſtines, but lay confined and buried under them.

The

The obſtruction which had occaſioned the patient's illneſs and death, was diſcovered in the upper part of the rectum. It was a ſtricture which as compleatly cloſed the paſſage into the inferior part of the rectum as if it had been tied by a pack-thread. A kind of morbid ligament, formed in the rectum, cauſed this ſtricture. As far as this the inteſtines were prodigiouſly ſwelled; and a mortification having entered the ſubſtance and coats of the colon adjoining to the ſtricture, it burſt and let out the faeces; but no quickſilver was obſerved to come with them, or was found in any of the adjacent parts of the colon.

The obſtruction in the rectum was found impervious; but after it was cut out, my father forced one of his fingers through it by dilatation.

The lower part of the rectum was quite blanched, like waſhed tripe, by the repeated glyſters which had been daily thrown in.

This was a caſe in which quick-ſilver was as likely to have been uſeful as that remedy can be in any caſe of obſtructed bowels; yet we find that, though aided by the motion of the body in a carriage, it had not, either by its weight or momentum, deſcended to the part affected.

I believe every thing was tried which could promiſe the leaſt relief; but, were any ſimilar caſe, in which the obſtruction lay in the rectum, to happen, poſſibly a waxen bougée, or poliſhed whale-bone, might be introduced with advantage, and afford a proſpect of opening the obſtruction, when glyſters and other means were found ineffectual. But I ſubmit this propoſition only to ſuch practitioners as never find a ſubject for ridicule in any thing, however new and unuſual, which may leſſen the liſt of incurable diſeaſes.

III.

The Hiſtory of a Caſe in which there occurred a very uncommon preſentation of a Child, to whoſe Neck there was attached a Tumour nearly about the ſize of the Child's Head. *By Mr* John Gardner *Surgeon at* Betley, Staffordſhire, *communicated to* Dr Duncan.

M——y B——h, aged 20, of a good conſtitution, and well-formed pelvis, was attacked with labour pains about ſeven in the morning. At nine I came to her, and, upon inquiry,

quiry, found that the waters had broke about an hour before. Her pains were then exceedingly weak, and, upon examination, I found the os uteri compleatly dilated, but a very extraordinary kind of preſentation; the hand and arm lay under the body, which was forced very low into the pelvis, and the point of the other ſhoulder was diſtinctly to be felt upwards, whilſt, at the ſame time, the inſertion of the funis umbilicalis into the belly was plainly to be felt near to the os externum. From this ſituation of the child, I was of opinion that it lay directly acroſs the pelvis, and that there was no other remedy than the turning of the child. But, as the woman's pains increaſed, and ſhe was very timorous, and finding, from the hand and arm of the child, it was very ſmall, I was diſpoſed to wait the efforts of nature for ſome little time, thinking it poſſible for the head of the child to follow the ſhoulder, which I once found to be the caſe in a child much larger than this. But, after waiting ſome time, and finding it gained no advantage, I told the woman and her friends the nature of the caſe, and if ſhe would conſent to the turning of the child, doubted not but ſhe would do very well. The woman reluctantly gave her conſent,

and

and I then began the operation, by making an attempt to raiſe the body of the child; but not ſucceeding, I endeavoured to paſs my hand gently up into the uterus to ſearch for the feet, and to my ſurpriſe found one foot lying directly acroſs the ſide, and the heel turned downwards. With great difficulty I laid hold of the foot, and brought it down, and then paſſed a ligature round the ancle. Having gained this advantage, I let the woman reſt; and, as the leg lay directly acroſs the body, I began to ſuſpect that there muſt be two children. I was, however, determined to take every advantage from that leg. But, after many fruitleſs attempts to bring the child lower, which did not ſucceed, I paſſed my hand under that leg up into the uterus, found another knee, and with ſome difficulty got hold of that leg. Finding this leg much larger than the other, I concluded they were two legs of different children.

The woman's pains increaſing then very much, forced the child down very faſt, till it came as far as the hips. I was then convinced, although there was evidently ſuch a difference in the ſize of the legs, that they belonged to one child. After it had advanced below the navel, it there ſtopped;

ſtopped; and, as I found the child muſt have been dead ſome time, the cuticle ſtripping all off with what little force I uſed, I was fearful, from the great reſiſtance I then met with, that I ſhould pull the body from the head, and leave the head in the pelvis. I wrapped a cloath round the body, and gradually pulled, at the ſame time alternately raiſed the body upwards, and moved it downwards. Finding I gained ſome little advantage, I perſevered till I came to the ſhoulders; then cleared both the arms. After this I paſſed my finger into the child's mouth, and here found greater reſiſtance than ever. At length I overcame it, and, to my great ſurpriſe, found a large tumour growing behind the head, of nearly the ſame ſize with the head.

The origin of this tumour was exactly at the lambdoidal ſuture, and it hung by a ſtalk of about half an inch long, and two inches in circumference, and then immediately enlarged to the ſize of the child's head. The external covering of this tumour was very red, and exceedingly vaſcular, but had no hair upon it: The integuments were very thick, and it evidently contained a fluid. As I could not prevail upon the friends to let me have the foetus, I was determined to examine

mine the contents of the tumour, to which they reluctantly gave conſent. I divided the integuments near to the baſis of the tumour, and found that it contained about a pound of thin blood of a very black colour, and ſomewhat foetid. There was alſo blended with it a large portion of the medullary ſubſtance of the brain; but I am diſpoſed to think, that the brain was not a part peculiar to the tumour, but that the dura mater was become putrid, and by that means ſuffered a part of the brain to paſs into the preternatural tumour, and ſo it came to be mixed with the incloſed fluid. The lower part of the back looked exceedingly livid, and the lumbar proceſſes of the ſpine were much bent inwards and broke. It ſeemed that this part of the child had ſuffered ſome violent injury, ſo as to be the cauſe of its death, which, from the age of the foetus, and the appearance of putrefaction, muſt have happened at leaſt one month before delivery. Upon aſking the woman if ſhe had received any injury during her pregnancy, ſhe informed me that ſhe had received a violent blow upon her belly, about two months before, falling down upon the edge of a large cloaths baſket.

Upon

Upon the whole, the hiſtory of the caſe muſt appear ſingular, when we conſider that the preſentation of the child was ſuch as, I believe, has never been deſcribed by any profeſſor of midwifery. A point of one ſhoulder, the hand, arm, and ſhoulder of the other ſide, the inſertion of the funis umbilicalis, and one leg lying acroſs the ſide, were all to be diſtinctly felt at once. The leg that was firſt diſcovered was bent, and turned quite upwards from the knee; ſo that the ſituation of it had impeded the circulation of blood into that limb, and occaſioned that leg and foot to be ſo much leſs than the other.

IV.

Obſervations on the internal uſe of the Vitriolum Album, in a Caſe of Epilepſy, and in Diarrhoea. By Mr James Johnſon *Surgeon in* Lancaſter, *Communicated to* Dr Duncan.

A Young woman, in the 24th year of her age, who had been afflicted with epilepſy for near the ſpace of three years, applied to me about the end of March 1776.

At firſt her fits returned only after intervals of about ſix weeks, and then they were not very ſevere. But, by degrees, they returned at ſhorter intervals, till ſhe had one every fortnight; and they had, at the ſame time, become much more ſevere.

Before ſhe came under my care ſhe had taken ſeveral medicines, particularly valeriana, ruta, and pæonia, but without any mitigation of her affection. I had, at firſt, thoughts of trying the flores zinci. But, in imitation of the treatment which I had ſeen followed by Dr William Saunders of Guy's hoſpital, and in conſequence of the recommendation which he gives in his lectures of employing the white vitriol in preference to the zinc, I determined on the uſe of that medicine. I accordingly began with the uſe of the white vitriol about the firſt of April, and continued it till about the middle of October. She at firſt took five grains twice a-day; but the doſe was gradually increaſed till at length ſhe took twelve. She continued this medicine uniformly from the time that ſhe began it, uſing it without any interruption even during the flow of the menſes. It had no ſenſible operation, excepting that now and then it produced a ſlight degree of

nauſea for a few mornings after the doſe had been increaſed.

After ſhe began this medicine, ſhe had three or four fits at about the diſtance of ten days from each other; and theſe were more ſevere than any to which ſhe had before been ſubjected. After this ſhe had frequently the ſymptoms of an approaching fit, but had no real fit for the ſpace of two months. After this ſhe had one fit, which was very ſevere; but, ſince that, ſhe has continued for the ſpace of twelve months without any return. Before ſhe began this medicine, ſhe was told that it was only by perſevering in the uſe of it for a conſiderable length of time, that ſhe could expect any benefit. Yet I hardly expected that, even from ſuch continuance, in the event, it would have been ſo ſucceſsful.

Beſides the preſent caſe, I have given the white vitriol in ſome other caſes of epilepſy, which indeed were ſlighter. In th ſe alſo it has been employed with ſucceſs. And I cannot help thinking that it will ſucceed in moſt caſes, if it be perſiſted in for a ſufficient length of time. But, without proper perſeverance, nothing is to be expected.

I have alſo given the vitriolum album in ſome inſtances of diarrhoea. And I have found it to ſucceed, after I had uſed the ipecacuanha in large and ſmall doſes, rhubarb, terra Japonica, and other aſtringents, to no purpoſe.

V.

The Hiſtory of a Caſe in which the Bones of a Foetus were diſcharged by ſtool, and from which the patient afterwards recovered. By Mr John Smith *Surgeon in* Uppingham, Rutlandſhire, *communicated to* Dr Duncan.

JOHN KERBEY's wife, of Wakerly in the county of Northampton, aged 26 years, of a ſtrong healthy conſtitution when in ſervice, ſent for me the 2d December 1773, and gave me the following account of her caſe. She had been married four years, had enjoyed a good ſtate of health till October 1771, when not menſtruating as uſual, ſhe from thence ſuſpected herſelf to be with child. During the nine months, ſhe enjoyed ſuch a ſtate of health as pregnant women do, but was particularly coſtive. In June 1772, ſhe

ſhe was ſeized with labour-pains, which continued regular and ſtrong for eight or ten days. The midwife not finding the child bear down as might have reaſonably been expected, ſhe and the neighbours concluded that it was either a colic or calculous complaint. The eighth day after her firſt ſeizure, the overſeers of the pariſh ſent for Mr Larrat, a man-midwife. When he had examined by the touch in the vagina, he gave it as his opinion, there was nothing to be done at that time, but to procure the woman ſleep. He gave her ſome anodyne medicines, which had the deſired effect. As ſoon as that was over, her pains returned. The ſurgeon was ſent for again; upon his examining her, he acquainted the women there was a child to be brought into the world, but he could do nothing but repeat his medicines. I have ſince talked to him in regard to the woman's caſe. He aſſured me that ſhe had no bearing down pains when he was with her; that the os tincae was not dilated; and that he did not examine by the anus.

From June to December following, ſhe had an extreme bad ſtate of health. She was ſeldom or never free from pain, particularly when ſhe made water, or had a ſtool. During that ſix

months, ſhe ſeldom had a ſtool above once a week. In December 1772, ſhe applied to a practitioner, who gave it as his opinion, that her caſe was dropſical, and ordered for her ſome ſtrong purging medicines. Soon after the operation of thoſe medicines, ſhe had a large diſcharge of bloody matter by the anus. She got much better, and did the buſineſs of her houſe. June 1773, ſhe had a diſcharge of blood, which came away by the anus, about the ſame quantity that ſhe uſed to have formerly at the menſtrual period, and it continued four days. September following, ſhe was ſeized with racking pain in the rectum; her pain was ſo violent, and her cries ſo loud, that they brought her neighbours to her aſſiſtance. One of the neighbours, with her finger, found very low down in the rectum a large ragged bone, but ſo faſt that ſhe could not extract it. But her pain increaſing very much, ſhe herſelf laid hold of the bone with her finger and thumb, and dragged it out. In bringing it away, ſhe lacerated the rectum, which occaſioned ſo great an effuſion of blood, that all the women about her thought ſhe would have expired immediately. The bone proved to be the os bregmatis, with the hairy ſcalp upon it,

the

the ſize of it equal to that of a child born at the full time.

Since that time ſhe has paſſed by the anus a great many bones, which have come away one by one, and occaſioned very ſevere pains for ſome days before ſhe has been able to extract them; and ſhe has generally loſt a quantity of blood after each. She gave me the bones which had come from her, to the amount of fifty-ſix, which are not ſo carious as might be expected, all of which I have in my poſſeſſion, many of them very diſtinct, particularly the os bregmatis, two temporal, two femoral, two tibia's, two fibula's, two innominata, four lower vertebrae, three ribs, and many of the bones of the feet. I have mentioned all the bones I received from her that are diſtinct. I conclude the child preſented head and feet. For ſome time before I ſaw her ſhe had not had a ſtool by the anus; but once in four or five days ſhe had brought out of the vagina, with her finger, ſome hard foeculent matter. She was waſted in her fleſh, her ſpirits much dejected, her pulſe low, and ſhe informed me that ſhe had vomited up ſeveral large round worms within the ſpace of a few weeks before I ſaw her. After hearing her own account of her caſe, ſee-

ing all the bones, and examining her neighbours, who certified that the above was truth, having desired that three or four of the women would stay in the room, I placed my patient upon a bed, in a proper posture for examining her; I introduced the fore-finger of my right hand into the vagina, where I plainly found a large bone. Stretching my finger higher up, I found an orifice communicating into the rectum. I then introduced the fore-finger of my left hand into the rectum, where I found the other half of the bone; and, moving gently first the finger in the rectum, and then the finger in the vagina, I found that I could press the bone into either passage. In the rectum I found a great vacancy. Withdrawing my fingers, I told the woman and her friends that I would give her some medicines which would relieve her from pain. An anodyne mixture was ordered, and an injection to be thrown up into both passages, which would cleanse them, and assist in dislodging the bones. I desired that she might live upon a comfortable diet, and that two or three times a-day she should take a glassful or two of white wine. Next day I communicated the case to Doctor Armstrong of Oakeham, Doctor Aldershaw of Stamford, and

and Mr Larrat of Uppingham, and deſired them to meet me the firſt opportunity at the woman's houſe.

Theſe gentlemen, accordingly, met me on the 6th of December, and found matters in the ſtate in which I have now deſcribed them. It was agreed that ſhe ſhould continue on the uſe of the anodyne mixture, that ſhe ſhould have repeated emollient injections, and uſe comfortable food, taking, from time to time, a little wine. By theſe medicines, together with ſome other cordials, which were occaſionally uſed, her complaints were, in many reſpects, conſiderably alleviated. But, from the beginning of December 1773, till the end of March 1774, ſhe continued, from time to time, to diſcharge, by ſtool, either entire bones, or fragments of bones. On the 20th of that month, ſhe produced to me three bones which ſhe had brought away by the anus, with the aſſiſtance of her finger and thumb. One of theſe was the half of the os frontis, and the other two were parts of the os occipitis divided at the ſutures. The edges were ſmooth, but the bones themſelves were of a remarkable firm texture.

After this ſhe gradually recovered ſtrength and vigour. She ſtill, indeed, continued to diſcharge ſome

ſome bones, but they were ſo thin and rotten, that, upon ſeparating them from the excrement, they generally crumbled to pieces; and they came away without any pain. By the middle of April ſhe was able to go to church and market, and to do the buſineſs of her family. And, on the firſt of May, I found her enjoying a ſtate of perfect health, and in great hopes that all the bones were come away. But excrementitious matter continued to be diſcharged by the vagina as well as by the rectum.

SECT.

SECT. III.

Medical News.

DOCTOR Thomas Clarke, of whom we made mention, in a former number, as having been appointed ſuperintendent of the botanical garden which has lately been eſtabliſhed by the governor and council of the iſland of Jamaica, with the view of introducing into the Weſt-India iſlands the moſt uſeful vegetable productions of other climates, has tranſmitted to Dr Duncan the following obſervations on the temperature and weight of the atmoſphere in the iſland in which he is ſituated.

The obſervations were made in the mountains of Liguance, nearly 800 feet above the level of Kingſton

Kingſton harbour. The barometer and thermometer are ſuſpended in the open air, under a piazza, in a ſouth expoſure, perfectly well ſhaded. Seven in the morning and two in the afternoon were the hours at which the inſtruments were punctually and narrowly examined every day.

July.	Bar.	Ther.
Morning, greateſt height of ☿		
in the	28.8	77
Leaſt - -	28.6½	70
Medium - - -	28.7	73
Evening, higheſt of the ☿	28.8	91
Loweſt - -	28.6½	79
Medium - -	28.7	84½

	Bar.	Ther.
Higheſt of ☿ for the		
month	28.8	91
Loweſt - -	28.6½	70
Medium - -	28.7	80½

July 12. at half paſt two P. M. the thermometer roſe to 92, and at three again pointed to 91, as at the hour of obſervation.

Auguſt.	Bar.	Ther.
Morning, greateſt height of ☿	28.7¾	80
Leaſt - -	28.6¼	71
Medium - -	28.6¾	74

Evening,

	Bar.	Ther.
Evening higheſt - -	28.7¼	89
Loweſt - -	28.6	73
Medium - -	28.6½	84¼

	Bar.	Ther.
Higheſt of ☿ for the month	28.7¼	89
Loweſt - -	28.6	71
Medium - -	28.6⅝	79

September.	Bar.	Ther.
Morning, higheſt of ☿ in the	28.7¼	75½
Loweſt - -	28.6	71
Medium - -	28.6½	73¾
Evening higheſt - -	28.7½	86
Loweſt - - -	28.5½	72
Medium - -	28.6½	81
Higheſt of ☿ for the month	28.7½	86
Loweſt - - - -	28.6	71
Medium - - -	28.6½	77¼

* * * *

Mr Chriſtopher Seton, Surgeon at St Andrew's, in a letter to Dr Duncan, informs him that he had extirpated, with ſucceſs, from the neck of a female patient, a glandular tumour of an

an enormous ſize, ſituated ſomewhat behind and below the ear. For the removal of this tumour, at different periods of its progreſs, a great variety of remedies had been tried without effect. Before extirpation, there were ſuch morbid appearances as gave indications that it would ſoon have degenerated into an open cancer, and thus, in all probability, proved fatal to the patient. But, notwithſtanding this, and although a conſiderable haemorrhage attended the operation, yet the patient had a ſpeedy and compleat recovery. Such inſtances ought to encourage the uſe of the knife, even at late periods of cancerous tumours; where, in the beginning, operation has either been thought inadviſeable, or would not be ſubmitted to on the part of the patient.

* * * *

The following account of the efficacy of the Gallium Aparine, or Gooſe-graſs, in different cutaneous affections, is extracted from a letter which has lately been communicated to the public.

"Tom's maſter, Mr Emblin, at Bow, informed me, that he was perfectly cured of a violent ſcorbutic complaint, which had afflicted him ſeveral years, notwithſtanding he had taken Mare-

dant's

dant's drops, other noſtrums, and ſea-water, by drinking a tea-cup-full of the freſh expreſſed juice of Gooſe-graſs ten ſucceſſive mornings.

That, being agreeably ſurpriſed at his own extraordinary cure, he adminiſtered the ſame medicine to ſeveral of his boys who were affected with ſcorbutic humours, one of them remarkably and ſeverely; and they were cured every one.

That a perſon in Bow had been afflicted ſeveral months with a violent pain in the tendons of his heels, which communicated all up the hind part of his legs, and was attended with a great depreſſion of ſpirits. He was under the care of an eminent apothecary, who treated his complaint as rheumatic, without giving him any relief. Early laſt ſpring, having heard of the cures Mr Emblin had made of himſelf and his ſcholars, by taking the juice of Gooſe-graſs, he had the young plants gathered, and uſed them as tea; but, ſo ſoon as they were big enough to furniſh a proper quantity of juice, he took a tea-cupful ten mornings, and is ſo far recovered, that he feels nothing of his complaint, unleſs after ſevere or long exerciſe.

Mr

Mr Emblin having related to me his own caſe, as well as ſeveral others which had fallen under his obſervation, as my face was, at that time, very ſore, I took this ſimple eaſy draught ten mornings, and, I praiſe God, am perfectly well recovered.

Thoſe proofs of the extraordinary powers of this innocent taſteleſs herb, I think, are ſufficient to awaken the attention of every perſon who ſhall hear of them; wherefore, I repeat my requeſt, that you'll make them public as ſoon as poſſible. Perhaps ſome gentlemen, whoſe province it is to care for the health of Britiſh ſeamen, may take notice of it, and recommend its trial to the faculty; and, if it ſhall be found to retain its ſanative quality, when boiled and preſerved in bottles, what a valuable acquiſition will it prove!"

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On the 10th of January 1778, Sir Charles Linnaeus, a man whoſe character, both as a philoſopher and phyſician, ſtands too high in the eſteem of the learned world for us to detain our readers with any encomium on it, died at Upſal, after a long and painful diſorder. The diſeaſe which proved fatal to this illuſtrious man, who,

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in the line of natural hiſtory in particular, has enlightened all Europe, was an ulceration of the urinary bladder. During this diſorder he was attended by Profeſſor Ziervogel, Sidren, Linnaeus junior, and a favourite pupil of his, Dr Rotheram, the ſon of a phyſician of eminence at Newcaſtle. But the diſeaſe, to which he fell a victim, was not to be reſiſted by the art which he profeſſed. And, to his friends and admirers, it now only remains to pay the due tribute of regard to his memory.

The ſeverity, however, even of his laſt illneſs did not interrupt the ardour of his ſcientifical purſuits. And, to the fruits of his labours, which the world already enjoy, future additions ſtill remain to be made. Before his death he had finiſhed the greateſt part of the Mantiſſa Tertia. And, we are told, that his ſon, who has already given ſeveral ſpecimens of his taſte for botany, and other branches of natural hiſtory, labours hard in compleating this work. After this, we are informed, that he intends to publiſh a large collection of plants which his father had lately received from the Cape of Good Hope, from Mutis in Mexico, from Koenig in India, and ſeveral other places. Theſe, added to the ineſtimable

works which he has already publiſhed, will be the moſt laſting monuments of a man, who, in the eyes of poſterity, muſt be conſidered not only as a glory to his country, but as an ornament to the age in which he lived.

His cotemporaries, however, and ſurviving friends, have not been neglectful in paying due marks of reſpect to his memory. At Upſal, a general mourning took place on the death of the man whoſe induſtry and genius had promoted the intereſt, and exalted the reputation of that ſeminary of literature to the higheſt pitch. His funeral proceſſion was attended by the whole univerſity, as well profeſſors as ſtudents; and the pall was ſupported by ſixteen doctors of medicine, all of whom were his own pupils. And there can be no doubt, that other marks of reſpect will be paid to him, not only there, but in every other place where there ſubſiſts a zeal for the cultivation of ſcience, and a due ſenſe of gratitude to thoſe who have moſt eſſentially promoted it.

At Edinburgh, Dr Hope, Profeſſor of Botany, on opening his courſe of lectures for the preſent ſummer, delivered a diſcourſe in honour of this great maſter of the ſcience which he has there

cultivated

cultivated with ſo much aſſiduity and ſucceſs. And, at the ſame time, in preſence of the ſtudents, he laid the foundation-ſtone of a monument to be erected to his memory in the botanical garden at that place. While this monument cannot fail to ſuggeſt the merits of Linnaeus to the ſtudents, it will alſo be a mark of reſpect to his memory from one of his greateſt and moſt ſincere admirers.

As compilers of this work, it would have given us great ſatisfaction had we been now able to preſent to our readers an account of the life and writings of this illuſtrious man. But this defect, we hope, we ſhall be able to ſupply in a more correct manner, on ſome future occaſion.

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The prize medal propoſed by the Æſculapian Society of Edinburgh, for the beſt eſſay on the means of diſtinguiſhing pus from mucus, was, at their meeting on the firſt Friday of March, adjudged to a diſſertation, to which was prefixed the following motto:

Inſignemque meo capiti petere inde coronam,
Unde prius nulli velarint tempora docti.

Upon opening the letter marked with the ſame lines which accompanied this diſſertation, it appeared to be written by Mr Charles Darwin, ſtunent of medicine from Litchfield.

This eſſay conſiſted of three parts. The firſt part gave a conciſe, yet diſtinct view of the different teſts which have been propoſed by practical authors for diſtinguiſhing pus from mucus, as diſcharged by expectoration, from the days of Hippocrates to the preſent time. And, after mentioning each, the author pointed out, with no leſs judgment than ingenuity, the fallacy to which it was liable, and explained the circumſtances from which that fallacy aroſe.

The ſecond part conſiſted of a particular detail of about forty experiments, made principally by the mixture of pus and mucus with ſaline ſubſtances. The pus and mucus were uſed either in their pure ſtate, as artificially mixed together, or as conjoined by mixture in the lungs, and afterwards coughed up. And, throughout the whole, the experiments demonſtrate not only a great degree of caution, attention, and induſtry, but likewiſe very extenſive knowledge in the general principles of philoſophy and chemiſtry, conjoined with great acuteneſs of genius.

From

From the nature of the experiments, however, it is in a great meaſure impoſſible to give an abridged account of them. But we ſhall make no apology for preſenting our readers with a ſhort view of the concluſions drawn from theſe experiments, which conſtitute the laſt part of this eſſay, and which are each authenticated by particular references to the experiments from whence they are deduced.

1. Pus and mucus are both ſoluble in the vitriolic acid, though in very different proportions, pus being by far leaſt ſoluble.

2. The addition of water to either of theſe compounds decompoſes it. The mucus thus ſeparated, either ſwims in the mixture, or forms large flocculi in it; whereas the pus falls to the bottom, and forms, on agitation, an uniform turbid mixture.

3. Pus is diffuſible through a diluted vitriolic acid, though mucus is not. The ſame alſo occurs with water, or with a ſolution of ſea ſalt.

4. Nitrous acid diſſolves both pus and mucus. Water added to the ſolution of pus, produces a precipitate, and the fluid above becomes clear and green, while water and the ſolution of mucus form a turbid dirty-coloured fluid.

5. Alkaline lixivium diſſolves, though ſometimes with difficulty, mucus, and generally pus.

6. Water precipitates pus from ſuch a mixture, but does not mucus.

7. Where alkaline lixivium does not diſſolve pus, it ſtill diſtinguiſhes it from mucus, as it then prevents its diffuſion through water.

8. Coagulable lymph is neither ſoluble in concentrated nor diluted vitriolic acid.

9. Water produces no change on a ſolution of ſerum in alkaline lixivium, until after long ſtanding, and then only a very ſlight ſediment appears.

10. Corroſive ſublimate coagulates mucus, but does not pus.

From the above experiments it appears, that ſtrong vitriolic acid and water, diluted vitriolic acid, and cauſtic alkaline lixivium and water, will ſerve to diſtinguiſh pus from mucus; that the vitriolic acid can ſeparate it from coagulable lymph, and alkaline lixivium from ſerum.

"Hence, when a perſon has any expectorated matter, the compoſition of which he wiſhes to aſcertain, let him diſſolve it in vitriolic acid, and in cauſtic alkaline lixivium. And, let him add

pure

pure water to both ſolutions. If there be a fair precipitation in each, he may be aſſured that ſome pus is preſent. But, if there be a precipitation in neither, it is a certain teſt that the mixture is entirely mucus. If the matter cannot be made to diſſolve in alkaline lixivium by time and trituration, we have alſo reaſon to believe that it is pus."

The ſociety having unanimouſly adjudged their medal to this diſſertation, it was accordingly delivered to Mr Darwin, at their next meeting, with an addreſs, ſuitable to the occaſion, by Dr Hope, whoſe turn it was, in rotation, to be preſident for that night.

But, while we thus take notice of the honour which was deſervedly conferred on a young man of the moſt promiſing abilities, we cannot mention, without the deepeſt regret, that he ſurvived it but for a ſhort time. And eſpecially, as there is reaſon to fear that he may have fallen a victim to that induſtrious zeal for the improvement of his profeſſion, for which, at a very early period of life, he had rendered himſelf juſtly remarkable.

About the end of April, Mr Darwin had employed the greateſt part of a day in accurately

diſſecting the brain of a child which had died of hydrocephalus, and which he had attended during its life. That very evening he was ſeized with ſevere head-ach. This, however, did not prevent him from being preſent in the Medical Society, where he mentioned to Dr Duncan the diſſection he had made, and promiſed the next day to furniſh him with an account of all the circumſtances in writing. But the next day, to his head-ach there ſupervened other febrile ſymptoms. And, in a ſhort time, from the hemorrhagies, petechial eruption, and foetid looſe ſtools which occurred, his diſeaſe manifeſted a very ſtrong putreſcent tendency. And, notwithſtanding the ſkill of Drs Cullen and Black, who attended him from the beginning of his affection; notwithſtanding the anxious care and attention of his father, Dr Darwin, a phyſician of great eminence in England, who arrived at Edinburgh ſome days before his death, his diſeaſe at length terminated fatally.

Thus was the medical world deprived of a young man, from the continued exertions of whoſe induſtry and genius, there was reaſon to entertain the moſt ſanguine expectation. With great natural acuteneſs, he poſſeſſed the moſt unremitting

remitting induſtry. And it is hardly poſſible to conceive more unwearied attention to ſtudy than he uniformly and invariably exerted during three years reſidence at Edinburgh. To receive, and to communicate information, ſeemed to conſtitute his greateſt pleaſure.

Beſides the diſſertation from which we have here given ſome extracts, he has left ſeveral other ſpecimens of his induſtry and genius, particularly a very elaborate paper on the pulſe, which was read in the Medical Society, and an eſſay on Diabetes, which he intended as the ſubject of an inaugural diſſertation. Having had an opportunity of attending ſeveral patients labouring under that affection, he had marked the progreſs and ſymptoms of the diſeaſe with peculiar attention. And, from ſerious reflection, founded on accurate obſervation, he was led to entertain other opinions of the nature of this complaint than are commonly held, and to ſuggeſt practices different from thoſe which are uſually, and with very little ſucceſs, employed in this obſtinate affection. But of this diſſertation, which, by his untimely death was left unfiniſhed, the public are now perhaps for ever deprived.

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This admirable young man, whoſe firſt exertions were thus calculated to raiſe ſuch high expectations, was cut off ere he had reached the twenty-firſt year of his age. By his death the public has been deprived of an individual, from whoſe genius and induſtry they might have entertained well grounded expectations that the art of medicine would have been improved; his teachers have loſt a pupil who would have been the boaſt of every ſeminary of education where he happened to be placed; and thoſe who were the companions of his ſtudies, have been bereaved of a friend, to whoſe extenſive knowledge and deep penetration they could have had recourſe on every difficulty. But, if there be good reaſon for regretting the loſs which they have ſuſtained by his untimely fate, how much more muſt every ſympathiſing heart commiſerate the ſurviving parents of ſuch a ſon?

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A charter under the great ſeal has lately been paſſed in favour of the College and Corporation of Surgeons of the city of Edinburgh, incorporating them, of new, under the name and title of the Royal College of Surgeons of the city of Edinburgh,

Edinburgh, and authoriſing them to carry into execution a ſcheme for making proviſion for the widows and children of the members. The clauſe in this charter which reſpects their title to the denomination of a royal college, is in the following words:

"We do therefore ordain a patent or charter to be paſſed, and expede under the above mentioned ſeal, of new, conſtituting, erecting, and incorporating, as we, by our prerogative royal, and ſpecial grace, and for us, and our royal ſucceſſors, hereby, of new, conſtitute, erect, and incorporate the petitioners, and the perſons who ſhall hereafter be legally admitted members of the ſaid corporation and college, into one body politic and corporate, or legal incorporation and ſociety, under the title and name of the Royal College of Surgeons of the city of Edinburgh; and as ſuch, and by ſuch name, to have a perpetual endurance and ſucceſſion to and for the ends and purpoſes mentioned in the royal charters heretofore granted in their favour, and herein after mentioned; and to be able and capable to ſue, plead, defend, and anſwer, and to be ſued, impleaded, defended, and anſwered, in all or any of our courts of judicature."

SECT.

SECT. IV.

List of New Books.

MEDICAL Caſes, ſelected from the records of the public diſpenſary at Edinburgh, with remarks and obſervations, being the ſubſtance of caſe-lectures delivered during the years 1776-7. By Andrew Duncan, M. D. fellow of the royal college of phyſicians, lecturer on the theory and practice of medicine, and one of the phyſicians to the public diſpenſary at Edinburgh. 8vo, Edinburgh.

De laudibus Gulielmi Harvei oratio, habita in aedibus academiae medicae prope aulam collegii regii chirurgorum Edinburgenſis, ipſis Calendis Aprilis 1778, binis jam elapſis ſeculis ab ipſius natali.

natali. Auctore Andrea Duncan, M. D. Col. Reg. Med. Ed.; Soc. Med. Ed.; Phil. Ed.; Phil. Americ.; Med. Havn. Socio : Ac Valetud. Edin. Med. Sen. 8vo, Edinburgi.

A treatiſe on the theory and management of ulcers, with a diſſertation on white ſwellings of the joints; to which is prefixed an eſſay on the chirurgical treatment of inflammation, and its conſequences. By Benjamin Bell, member of the college of ſurgeons of Edinburgh, and one of the ſurgeons of the Royal Infirmary of that city. 8vo, Edinburgh.

Theſaurus medicus; ſive, diſputationum in academia Edinenſi ad rem medicam pertinentium, a collegio inſtituto ad hoc uſque tempus, delectus, a Gulielmo Smellio, Soc. Phil. Ed. Soc. habitus. Tom. I. 8vo, Edinburgi.

Two caſes of the hydrophobia, with obſervations on that diſeaſe. By T. Vaughan, M. D. To the above caſes and obſervations is annexed an account of the Caeſarian ſection, as it was lately performed at Leiceſter. 8vo, London.

A botanical dictionary, or elements of ſyſtematic and philoſophical botany. By Colin Milne,

LL. D. The ſecond edition, with many additions and illuſtrative plates. 8vo, London.

Obſervations on ſome articles of diet and regimen uſually recommended to valetudinarians. By William Falconer, M. D. F. R. S. 8vo, London.

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Johannis Adami Pollich, M. D. Acad. Elect. Pallat. Correp. Hiſtoria plantarum in Palatinatu Electorati ſponte naſcentium incepta ſecundum ſyſtema ſexuale digeſta. Tom. I. 12mo, Paris.

Methode eprouvée pour le traitement de la rage, publié par ordre du gouvernment, 4to, Paris.

Etat de medecine, chirurgie, et pharmacie en Europe, et principalment en France. 12mo, Paris.

Diſſertationes medicae inaugurales, quas ex auctoritate reverendi admodum viri Gulielmi Robertſon,

bertſon, S. S. T. P. Academiae Edinburgenae praefecti; nec non ampliſſimi ſenatus academici conſenſu, et nobiliſſimae facultatis medicae decreto, pro gradu doctoratus, ſummiſque in medicina honoribus et privilegiis rite et legitime conſequendis; eruditorum examini ſubjecerunt, ad diem 24. Junii, 1778,

Calebus Hillier Parry, Anglo-Britannus, De Rabie Contagioſa.

Radulphus Adie, ex Inſula Sancti Chriſtoperi, De Sanguinis Circuitu.

Seguinus Henricus Jackſon, Anglo-Britannus, De Phyſiologia et Pathologia dentium.

Zacharias Neufville, Carolinenſis Meridionalis, De Natura Aëris Fixi.

Samuel Curtin, Jamaicenſis, De Febre Flava Indiae Occidentalis.

Robertus Steavenſon, Britannus, De Electricitate.

Johannes Temple, Anglo-Britannus, De Dyſpepſia.

Johannes Willis, Anglo-Britannus, De Ictero.

Ricardus Worthington, Britannus, De Natura et Uſu Tartari.

Johannes

Johannes Evans, Britannus, De Foetus Humani Nutrimento.

Jacobus Mackenzie, Britannus, De Paralyſi Idiopathica.

Johannes Leman, Barbadenſis, De Cholera.

Gulielmus Reynolds Highmore, Britannus, De Frigoris in corpus humanum poteſtate.

Joſephus Rogers, Hibernus, De Curatione Febrium a Contagione.

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HARVEIAN PRIZE-MEDAL

For 1778.

THE following queſtion is propoſed as the ſubject of the Harveian Prize-medal given at Edinburgh in honour of the illuſtrious HARVEY, and with the view of promoting experimental inquiry among the ſtudents of medicine at that place:

On what principle does the red colour of the blood depend? and, from what cauſes is it produced?

The competitors for this prize muſt tranſmit their diſſertations to Dr DUNCAN on or before the firſt day of January 1779. To theſe diſſertations it is required that each candidate ſhall prefix a motto; and with his diſſertation he muſt ſend a ſealed letter, containing his name and place of abode. The ſame motto muſt be written on the back of the letter with that which is prefixed to the diſſertation.

After the prize is determined, all the diſſertations will be reſtored, or tranſmitted to any place that may be deſired, together with the letters which ſhall accompany them, no letter being opened excepting that which accompanies the diſſertation to which the prize ſhall be adjudged. Thus the names of the unſucceſsful candidates will never be known even to the judges.

The prize-medal will be publicly preſented to the ſucceſsful candidate in the lecturing-room of the Medical Academy, Surgeons-ſquare, Edinburgh, on the 12th of April 1779, being the anniverſary of the birth-day of Dr Harvey, after the delivery of the Harveian Oration for that year.

MEDICAL

AND

PHILOSOPHICAL

COMMENTARIES.

By a SOCIETY in EDINBURGH.

Primoque medendi ſcientia, ſapientiae pars habebatur, ut et morborum curatio et rerum naturae contemplatio, ſub iiſdem auctoribus nata ſit. CELSUS.

VOLUME FIFTH.

PART IV.

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M,DCC,LXXVIII.

MEDICAL COMMENTARIES.

SECT. I.

An Account of Books.

I.

Firſt Lines of the Practice of Phyſic, for the uſe of Students in the Univerſity of Edinburgh, by William Cullen, M. D. Vol. 1. 8vo, Edinburgh.

IN a former number, we endeavoured to give an account of the firſt part of the volume now before us, and to deliver the doctrine of fever which it comprehends, as diſtinctly as the limits of our publication would permit. We ſhall now endeavour to give a ſhort view of the author's

opinions and practices in inflammatory diſeaſes, of which he treats in the ſecond book of this volume, which is the laſt yet publiſhed.

The firſt chapter treats of inflammation in general; and the Doctor, in the firſt ſection, points out the phaenomena of inflammation. Unuſual redneſs, heat, pain, and tumour, on any part of the ſurface of the body, together with general pyrexia, are the ſymptoms of external inflammation. We judge of internal inflammation by a fixed pain in any internal part, attended with ſome interruption in the exerciſe of its functions, accompanied with pyrexia. Farther, we judge of the preſence of inflammation, when the blood, as drawn out of the veins, puts on that appearance which is generally known by the name of the *buffy coat*; although, from circumſtances in blood-letting, we cannot always conclude, when ſuch an appearance is abſent, that inflammation is wanting.

In the ſecond ſection, Doctor Cullen proceeds to inveſtigate the proximate cauſe of inflammation. There appears in inflammation an increaſed impetus of the blood in the veſſels of the part affected; and, it is preſumed, as the action of the heart is not always conſiderably increaſed, that

that this is owing to the increaſed action of the veſſels of the part itſelf. The cauſe of this increaſed action in the veſſels of a particular part, is to be conſidered as the proximate cauſe of inflammation. We frequently perceive inflammation ariſing from the application of ſtimulant ſubſtances to the part, in which caſe, no other cauſe is ſought for; but as, in many caſes, the application of ſtimuli is neither evident, nor can, with probability, be inferred, we muſt then ſeek for ſome other cauſe of the increaſed impetus of the blood in the veſſels of the part.

Our author, on this ſubject, before propoſing his own opinion, combats that of the Boerhaavian ſchool; and he thinks that many difficulties attend the doctrine of obſtruction, any how produced, being the cauſe of inflammation.

In the *firſt* place, the ſuppoſition of an *error loci* is not probable, becauſe the motion of the blood, in the extreme veſſels, is ſo weak and ſlow, as readily to admit of a retrograde courſe; and, therefore, if a particle of blood ſhould enter a veſſel whoſe branches will not admit of its paſſing, it will be moved backwards till it meets with a veſſel capable of tranſmitting it. The fre-

quent ramifications and anaſtomoſes of the extreme veſſels are very favourable to this.

In the *ſecond* place, the ſuppoſition of a preternatural lentor, or viſcidity of the blood, is not well founded; for it is probable, that nature has ſpecially provided againſt a ſtate of the fluids, ſo incompatible with the exerciſe of the moſt important functions of the animal oeconomy. And, it is preſumed, that no general lentor ever does take place; becauſe, if it did, it muſt ſhew more conſiderable effects than commonly appear.

Farther, there are no experiments directly in proof of a preternatural lentor prevailing in the maſs of blood; nor is there any evidence of certain parts of the blood occaſionally acquiring a greater denſity and force of coheſion than ordinary; neither is there any proof of the denſer, or more coherent parts, being preſent in the maſs of blood in greater proportion than uſual, ſo as to occaſion a dangerous ſpiſſitude. The experiments of Doctor Browne Langriſh on this ſubject afford no concluſion, having been made on certain parts of the blood ſeparated from the reſt, without attending to the circumſtances of blood-letting, which very much alter the ſtate of the

the ſeparation and concretion of the blood drawn out of the veins.

And, *laſtly*, in the particular caſe of inflammation, there are ſeveral circumſtances which render it probable that the blood is then more fluid than uſual.

Upon the whole, an obſtruction of one veſſel does not, as it has been imagined, increaſe the velocity of the blood in the neighbouring veſſels which are free; and, in fact, it appears from many obſervations and experiments, that conſiderable obſtructions may be formed, and may ſubſiſt without producing the ſymptoms of inflammation.

Obſtruction, therefore, is not to be conſidered as the primary cauſe of inflammation; but, at the ſame time, it is probable, that ſome degree of it takes place in every caſe of inflammation, as ſome of the ſymptoms are only to be explained, by ſuppoſing that the extremities of the arteries do not readily tranſmit the unuſual quantity of blood impelled into them by the increaſed action in the courſe of theſe veſſels. But it is alſo probable, that, in inflammation, there is a preternatural reſiſtance to the free paſſage of the fluids.

From the doctrine of fever, we are led to believe, that the increaſed action of the heart and arteries is only ſupported, for any length of time, by a ſpaſm affecting the extreme veſſels; and, that the ſame ſpaſm takes place in inflammation, ſeems probable from this, that every conſiderable inflammation is introduced by a cold fit, and is accompanied with that, and the other circumſtances of pyrexia.

From all this, the nature of inflammation may often be explained in the following manner: Some cauſes of inequality, in the diſtribution of the blood, may throw an unuſual quantity of it upon particular veſſels, to which it muſt neceſſarily prove a ſtimulus. But, farther, it is probable that, to relieve this congeſtion, the *vis medicatrix naturae* increaſes ſtill more the action of theſe veſſels, which it effects by the formation of a ſpaſm on their extremities, as in all other febrile diſeaſes. Such ſpaſm, therefore, of the extreme veſſels, may be conſidered as a part of the proximate cauſe of inflammation, at leaſt, in all caſes not ariſing from direct ſtimuli applied.

This doctrine is illuſtrated by what occurs in the caſe of rheumatiſm. And Doctor Cullen preſumes farther, that a ſpaſm of the extreme veſſels

veſſels takes place in inflammation, from the ſtate of the whole arterial ſyſtem at the time. This ſtate of the arterial ſyſtem is well known to phyſicians under the name of the *diatheſis phlogiſtica*. It appears moſt commonly in perſons of the moſt rigid fibres; it is often manifeſtly induced by the tonic or aſtringent power of cold; it is increaſed by all tonic or ſtimulant powers applied to the body; it is always attended with a hardneſs of the pulſe; and it is moſt effectually taken off by the relaxing power of blood-letting. From theſe circumſtances, it ſeems probable, that the diatheſis phlogiſtica conſiſts in an increaſed tone, or contractility, and perhaps contraction of the muſcular fibres of the whole arterial ſyſtem. Such a ſtate of the ſyſtem indicates a ſpaſm of the extreme veſſels, and the general ſtate commonly ariſes from that begun in a particular part; though, it is alſo probable, that the general ſtate may ariſe and ſubſiſt for ſome time without the obvious inflammation of any particular part.

In the third ſection, Doctor Cullen treats of the terminations of inflammation. After mentioning reſolution, ſuppuration, gangrene, and rejecting ſchirrhus as a common conſequence of inflammation, he proceeds to enumerate ſome o-

ther

ther terminations, not commonly taken notice of.

One is, by the effuſion of a portion of the entire maſs of blood, either by means of rupture, or anaſtomoſes, into the adjoining cellular texture. This happens eſpecially in inflammations of the lungs; and this is perhaps the manner in which peripneumony moſt commonly proves fatal.

Another kind of termination is that of certain inflammations on the ſurface of the ſkin, when there is poured out under the cuticle, a fluid too groſs to paſs through its pores, and which, therefore, ſeparates it from the ſkin, and raiſes it up in the form of a circle, containing the effuſed fluid, and by which effuſion the previous inflammation is taken off.

Beſides theſe, the author believes there is ſtill another manner in which inflammation may terminate. When the internal parts are affected with inflammation, there occurs almoſt always upon their ſurface an exudation, which appears partly in a viſcid concretion upon their ſurface, and partly in a thin ſerous fluid, effuſed into the cavities in which the inflamed viſcera are placed. Since

theſe appearances very conſtantly accompany inflammations which have proved fatal, it is probable, that like circumſtances may attend thoſe inflammations terminated by reſolution, and that they may contribute to that event, as there are inſtances of pneumonic inflammation terminating in a hydrothorax.

Doctor Cullen, in the two ſucceeding ſections, enters upon the conſideration of the remote cauſes, and of the method of cure of inflammation in general. On theſe ſubjects, what Doctor Cullen has delivered, does not differ greatly from what had before been ſaid by others. Of this part, therefore, we ſhall offer no analyſis; but we may recommend his obſervations to the attention of our readers, on account of that method and arrangement which he obſerves on every ſubject of which he treats; and alſo, for this farther reaſon, that they greatly tend to illuſtrate and confirm the doctrine of inflammation which he has endeavoured to eſtabliſh.

We proceed to the conſideration of the particular genera and ſpecies of inflammation; and, in this part of the ſubject, we mean to confine ourſelves entirely to the new opinions which Doctor Cullen

Cullen entertains, or to the change of practice which he recommends.

Doctor Cullen arranges the particular inflammations as being *cutaneous*, *viſceral*, or *articular*; and in this order he proceeds to conſider them.

Cutaneous inflammations are of two kinds, *phlegmon* and *eryſipelas*. Of the latter, there are two caſes which ought to be diſtinguiſhed. When the diſeaſe is an affection of the ſkin only, and very little of the whole ſyſtem, Doctor Cullen gives it the name of *erythema*; and, when the external inflammation is an exanthema, and ſymptomatical of an affection of the whole ſyſtem, he terms the diſeaſe *eryſipelas*. It is the *erythema* only which is conſidered in this place. The different appearances in *phlegmon* and *erythema* ſeem to depend upon the ſeat of the two diſeaſes. In the phlegmon, the inflammation affects eſpecially the veſſels on the internal ſurface of the ſkin, communicating with the lax ſubjacent cellular texture, whence a more copious effuſion of ſerum, convertible into pus, takes place. In the *erythema*, the affection is of the veſſels on the external ſurface of the ſkin, communicating with the rete mucoſum, which does

does not admit of any effuſion, but what ſeparates the cuticle, and gives occaſion to the formation of a bliſter, while the effuſed fluid, from the ſmaller ſize of the veſſels, is ſo thin, that it is very ſeldom convertible into pus; beſides, it is probable, that they differ alſo with reſpect to their cauſes. Erythema is the effect of all kinds of acrids externally applied to the ſkin, or of an acrimony poured out on the ſurface of the ſkin, under the cuticle. In phlegmon, an acrimony is not commonly evident.

On the ſubject of Ophthalmia, Dr Cullen diſtinguiſhes between the *Ophthalmia membranarum* and *Ophthalmia Tarſi*; and, although both may be often conjoined, yet he thinks it of conſequence to aſcertain which is the primary affection in conducting the cure.

In his obſervations upon phrenitis, he remarks, that noſologiſts have thought two kinds might be diſtinguiſhed; inflammation of the membranes of the brain, or of the ſubſtance of the brain itſelf: But he does not find that this is confirmed by obſervation and diſſection, and therefore he treats of both caſes under the title of Phrenitis.

In the fifth chapter, Dr Cullen treats of Cynanche. Of this genus he eſtabliſhes five ſpecies, diſtinguiſhed

diſtinguiſhed according to the part affected, or the nature of the inflammation.

In the third ſection of this chapter, Dr Cullen treats of *cynanche trachealis*. From the nature of the ſymptoms, and from the diſſection of the bodies of patients who have died of this diſeaſe, he thinks there is no doubt of its being of an inflammatory nature. It does not, however, he obſerves, always run the courſe of inflammatory affections, but frequently produces ſuch an obſtruction to the paſſage of the air as ſuffocates, and thereby proves ſuddenly fatal. So far do the accounts which authors give of this diſeaſe carry us; and the inſtances recorded have almoſt all happened in adult perſons. But there is a peculiar affection of this kind happening to children, generally known under the name of the *croup*, and which has been little taken notice of till lately Dr Cullen gives the hiſtory and ſymptoms of this complaint in the following words: 'This diſeaſe ſeldom attacks infants till after they 'have been weaned. After this period, the 'younger they are, the more they are liable to 'the diſeaſe. The frequency of it becomes leſs 'as children are more advanced; and there 'are no inſtances of children above twelve years

of

'of age being affected with it. It attacks chil-
'dren of the midland countries, as well as thoſe
'who live near the ſea. It does not appear to be
'contagious, and its attacks are frequently re-
'peated in the ſame child. It is often manifeſtly
'the effect of cold applied to the body, and there-
'fore appears moſt frequently in the winter and
'ſpring ſeaſons. It very commonly comes on with
'the ordinary ſymptoms of a catarrh, but ſome-
'times the peculiar ſymptoms of the diſeaſe ſhow
'themſelves at the very firſt. Theſe peculiar
'ſymptoms are the following; a hoarſeneſs, with
'ſome ſhrillneſs and ringing ſound both in ſpeak-
'ing and coughing, as if the noiſe came from a
'brazen tube. At the ſame time, there is a
'ſenſe of pain about the larynx, ſome difficulty
'of reſpiration, with a whizzing ſound in inſpi-
'ration, as if the paſſage of the air were ſtrait-
'ned. The cough which attends it is common-
'ly dry, and if any thing is ſpit up, it is a mat-
'ter of a purulent appearance, and ſometimes
'films reſembling portions of a membrane.
'With all theſe ſymptoms, there is a frequency
'of pulſe, a reſtleſſneſs, and an uneaſy ſenſe of
'heat. When the internal fauces are viewed,
'they are ſometimes without any appearance of
inflam-

'inflammation, but frequently a redneſs, and e-
'ven a ſwelling appears, and ſometimes there is
'an appearance of matter like to that rejected
'by coughing. When the ſymptoms now de-
'ſcribed run to a great height, and particularly,
'when there occurs a great difficulty of breath-
'ing, and a ſenſe of ſtrangling in the fauces, the
'patient is ſometimes ſuddenly cut off.'

Diſſection pretty conſtantly ſhows a preternatural membrane lining the whole internal ſurface of the upper part of the trachea, and extending in the ſame manner downwards into ſome of its ramifications. This membrane may be eaſily ſeparated, and ſometimes has been found ſeparated in part from the ſubjacent proper membrane of the trachea. This laſt is commonly found entire, that is, without any appearance of eroſion or ulceration; but it frequently ſhows the veſtiges of inflammation, and is covered with a matter reſembling pus, like to that rejected by coughing; and very often a matter of the ſame kind is found in the bronchiae, ſometimes in conſiderable quantity.

From all theſe circumſtances, Dr Cullen is inclined to think, that this diſeaſe conſiſts in an inflammatory affection of the mucous membrane

of

of the larynx and trachea. He is of opinion, that this diſeaſe terminates in health by a reſolution of the inflammation; and that, when it ends fatally, it is by a ſuffocation ſeemingly depending upon a ſpaſm affecting the glottis, but ſometimes probably depending upon a quantity of matter filling the bronchiae.

Agreeable to the idea which he has formed of the nature of the diſeaſe, Dr Cullen propoſes to treat it by the uſual remedies of inflammation, which, for the moſt part, he has found effectual. General and topical bleeding; bliſtering near the part affected; vomiting immediately after bleeding, ſometimes ſuddenly removes the diſeaſe. The antiphlogiſtic regimen, and particularly the frequent uſe of laxative glyſters, is neceſſary in every ſtage of the diſeaſe. Though a ſpaſm affecting the glottis is ſuppoſed to be frequently fatal in this diſeaſe; yet Dr Cullen has not found antiſpaſmodic medicines of any uſe.

In the ſixth chapter, Doctor Cullen conſiders *pneumonic inflammation.* Under this term, he comprehends the whole of the inflammations affecting either the viſcera of the thorax, or the membrane lining the interior ſurface of that cavity; for, neither do our diagnoſtics ſerve to

aſcertain exactly the ſeat of the diſeaſe, nor does the difference in the ſeat of the diſeaſe give any conſiderable difference in the ſtate of the ſymptoms, or lead to any difference in the method of cure.

The Doctor, after giving a compleat hiſtory of pneumonic inflammation, obſerves, that it has ſometimes been ſo much an epidemic as to occaſion a ſuſpicion of its depending upon a ſpecific contagion; but he has never met with any ſufficient evidence of this.

The remedy chiefly to be relied upon in the cure of this diſeaſe, is that of blood-letting at the arm; the quantity taken away muſt be ſuited to the violence of the diſeaſe, and vigour of the patient. It is ſeldom that one bleeding will prove a cure; and, in the event of the recurrence of pain and difficulty of breathing, it is to be repeated, even in the courſe of the ſame day, and to the ſame quantity as before. It is according to the ſtate of the ſymptoms that bleedings are to be repeated; and they will be more effectual when practiſed in the courſe of the firſt three days than afterwards. Yet, upon the recurrence of the urgent ſymptoms, bleeding ſhould be repeated at any period of the diſeaſe, eſpecially within

within the firſt fortnight; and, even afterwards, if a tendency to ſuppuration be not evident, or if, after a ſeeming ſolution, the diſeaſe ſhall have again recurred.

No general rules can be delivered with reſpect to the quantity of blood that may be ſafely taken away. Doctor Cullen, however, makes the following obſervations on this ſubject: 'In an adult 'male of tolerable ſtrength, a pound of blood, 'averdupois, is a full bleeding. Any quantity 'above twenty ounces is a large, and any quan-'tity below twelve is a ſmall bleeding. A quan-'tity from four to five pounds, in the courſe of 'two or three days, is generally as much as ſuch 'patients will eaſily bear; but, if the intervals 'between the bleedings, and the whole of the 'time during which the bleedings have been em-'ployed, has been long, the quantity taken upon 'the whole may be larger.' When a large quantity of blood has been taken at the arm, and when the continuance or recurrence of pain, rather than the difficulty of breathing, becomes the urgent ſymptom, ſome blood may ſtill be taken by cupping, and ſcarifying, as near the affected part as poſſible. An expectoration ſometimes takes place early; but if, notwithſtanding this,

the urgent ſymptoms ſtill continue, it muſt not ſuperſede the bleeding; as, during the firſt days of the diſeaſe, its ſolution is not to be truſted to the expectoration alone.

Doctor Cullen has found the moderate uſe of cooling laxatives generally ſafe in this diſeaſe; and he has always found it uſeful to keep the belly open by frequent emolient glyſters.

To excite vomiting is a dangerous practice, but it is uſeful to exhibit emetics in nauſeating doſes; and, in an advanced ſtate of the diſeaſe, ſuch doſes have been found the beſt means of promoting expectoration.

Bliſters ought to be applied very early in the diſeaſe; but at ſuch times, that the irritation they occaſion may not interrupt the effects of the neceſſary bleedings.

It may be frequently neceſſary to repeat the bliſtering; and, in that caſe, the bliſters ought always to be applied ſomewhere about the thorax. Freſh bliſtering is preferable to keeping the bliſtered parts open, by making what is called a perpetual bliſter.

Of the various expectorants uſed in this diſeaſe, Doctor Cullen objects to the *gums* as being too heating;

heating; to ſquils, as not being very powerful; and he thinks the volatile alkali ſhould be reſerved to an advanced ſtate of the diſeaſe. He ſeems to approve of mucilaginous and oily demulcents, and of the receiving the ſteams of warm water impregnated with vinegar into the lungs. But, above every medicine of this kind, he prefers antimonials in nauſeating doſes. Sweating, when it occurs, and appears critical, is to be conducted without much heat, and without ſtimulant medicines. It will be dangerous to encourage partial and clamy ſweats, when a great difficulty of breathing remains.

With regard to the uſe of opiates, different opinions have prevailed. Doctor Cullen thinks, that, in the beginning of the diſeaſe, and before bleeding and bliſtering have produced ſome remiſſion of the pain, and of the difficulty of breathing, opiates have a very bad effect, by increaſing the difficulty of breathing, and other inflammatory ſymptoms; but, in a more advanced ſtate of the diſeaſe, when the difficulty of breathing has abated, and when the urgent ſymptom is a cough, proving the chief cauſe of the continuance of the pain, and of the want of ſleep, opiates may be employed with great advantage and ſafety.

In the ſucceeding chapter, Dr Cullen proceeds to take notice of the inflammations of the abdominal viſcera. He obſerves, that, although he has admitted Peritonitis as a genus in his Noſology; yet he does not treat it in this place, becauſe he cannot ſay by what ſymptoms inflammations of the peritonaeum are always to be known, and farther, becauſe, when known, they do not require any other remedies than thoſe of inflammation in general.

Gaſtritis, therefore, becomes the firſt object of his attention. Dr Cullen is the firſt, as far as we know, who has clearly marked the diſtinction between the phlegmonic and the eriſipelatous inflammation of the ſtomach. The firſt may be ſeated in what is called the nervous coat of the ſtomach, or in the peritonaeum inveſting it; the other is always ſeated in the villous coat and cellular texture immediately ſubjacent. The phlegmonic inflammation of the ſtomach has been commonly treated under the title of Gaſtritis; but eryſipelatous inflammations of the ſtomach are more frequent than thoſe of the phlegmonic kind. It appears, at leaſt, from diſſections, that the ſtomach has often been affected with inflammation, when neither pain nor

pyrexia

pyrexia had before given any indication of it, and ſuch he judges to have been chiefly of the eryſipelatous kind. There are caſes, however, in which it may be diſcovered. The affection of the ſtomach ſometimes ſpreads into the oeſophagus, and appears in the pharynx, and on the whole internal ſurface of the mouth. When, therefore, an eryſipelatous inflammation affects the mouth and fauces, and there ſhall be, at the ſame time, in the ſtomach, an unuſual ſenſibility to all acrids, and alſo a frequent vomiting, there can be little doubt of the ſtomach's being affected with the ſame inflammation.

Even when no inflammation appears in the fauces, if ſome degree of pain be felt in the ſtomach; if there be a want of appetite, an anxiety and frequent vomiting, an unuſual ſenſibility with reſpect to acrids, ſome thirſt and frequency of pulſe, there will then be room to ſuſpect an inflammation of the ſtomach; 'and we have known,' ſays the Doctor, 'ſuch ſymptoms, after ſome time, diſcover their cauſe by the inflammation appearing in the fauces and mouth.' Dr Cullen has obſerved inſtances of eryſipelatous inflammation ſpreading ſucceſſively along the whole length of the alimentary canal, occaſion-

ing in the inteſtines diarrhoea, and in the ſtomach vomitings, the diarrhoea ceaſing when the vomitings come on, and, on the other hand, the vomitings ceaſing on the coming on of the diarrhoea.

On the ſubject of the cure of this diſeaſe, Dr Cullen obſerves, that when it is owing to acrid matters taken in by the mouth, and when theſe are ſuppoſed to be ſtill preſent in the ſtomach, large quantities of warm mild liquors ſhould be thrown in, and vomiting excited; at the ſame time, if the nature of the acrimony and its corrector be known, this ſhould alſo be thrown in; or if a ſpecific corrector be not known, ſome general demulcents ſhould be employed. Theſe meaſures are more ſuited to prevent, than to cure inflammation when it has taken place. In this caſe, if it be attended with a ſenſe of heat, with pain and pyrexia, according to the degree of theſe ſymptoms, the meaſures proper in phlegmonic inflammation of the ſtomach are to be employed more or leſs.

When an eryſipelatous inflammation of the ſtomach has ariſen from internal cauſes, if pain and pyrexia accompany the diſeaſe in perſons not

other-

otherwiſe weakened, ſome bleeding may be employed; but, as the affection often ariſes in putrid diſeaſes, and in convaleſcents from fever, in ſuch caſes bleeding is not admiſſible; all that can be done is, to avoid irritation, and to throw into the ſtomach what quantity of acids and of aceſcent aliment it ſhall be found to bear. In ſome conditions of the body in which this diſeaſe ariſes, the Peruvian bark and bitters may ſeem to be indicated; but an eryſipelatous ſtate of the ſtomach does not commonly allow of them.

Dr Cullen, in the eighth chapter, treats of enteritis; and here he makes the ſame diſtinction of inflammation affecting the inteſtines, as he had before done with regard to that of the ſtomach; but this difference of the ſeat of eryſipelatous inflammation gives no difference of the practice.

With regard to the treatment of phlegmonic inflammation in both inſtances, we think it unneceſſary to make any abſtract of it, and refer our readers to the work itſelf.

In the ninth chapter, Dr Cullen treats of the Hepatitis. This affection, he obſerves, ſeems to be of two kinds, the one acute, the other chronic. The acute is attended with pungent pain, conſi-

conſiderable pyrexia, a frequent, ſtrong, and hard pulſe, and high-coloured urine. The chronic very often exhibits none of thoſe ſymptoms; and we only diſcover it to have happened by our finding large abſceſſes in the liver, which our author preſumes to be the effect of ſome degree of inflammation.

As this chronic inflammation is not to be certainly known, and therefore does not lead to any certain practice, Dr Cullen omits treating of it, and proceeds to the conſideration of the acute ſpecies of hepatitis.

And here his ſentiments do not ſeem to be ſo far peculiar to himſelf, as to require to be particularly taken notice of. For the ſame reaſon alſo, we may paſs over the chapter immediately ſucceeding, in which he treats of Nephritis.

Beſides theſe, the preſent volume contains two other chapters, in which Dr Cullen treats of Rheumatiſm and of Gout. Theſe we muſt alſo paſs over in a very curſory manner, but from a very different reaſon. They contain ſentiments ſo much peculiar to the author, that any proper account of them would much exceed the limits which we muſt place to ourſelves in a work of this nature.

With

With reſpect to Rheumatiſm, we ſhall only, in a general way, remark, that he beſtows much pains in endeavouring to eſtabliſh a proper diſtinction between the acute and chronic. As the proximate cauſe of the firſt, he ſuppoſes that, with an inflammatory affection of the ſanguiferous ſyſtem, there is alſo a peculiar affection of the muſcular fibres, which has a conſiderable ſhare in producing the phaenomena of the diſeaſe. From the phaenomena of purely chronic rheumatiſm, he is led to conclude, that its proximate cauſe is an atony, both of the blood-veſſels and of the muſcular fibres of the part, together with ſuch a degree of rigidity and contraction in the latter, as frequently attend them in a ſtate of atony.

In giving a hiſtory of the Gout, he divides it into the regular and the irregular; and this latter he ſubdivides into the atonic, the retrocedent, and the miſplaced. The opinion which has generally been entertained reſpecting the proximate cauſe of the gout, is, that it depends upon a certain morbific matter always preſent in the body; and that this matter, by certain cauſes, thrown upon the joints, or other parts, produces the ſeveral phaenomena of the diſeaſe. This doctrine

doctrine Dr Cullen endeavours to refute by many arguments. He contends, that there is no evidence of any morbific matter being preſent in perſons diſpoſed to the gout; that the ſuppoſitions reſpecting the nature of this matter have been ſo various, and ſo contradictory, as to lead us to conclude that there is really no proof of the exiſtence of any of them; that the ſuppoſition of a morbific matter is inconſiſtent with the phaenomena of the diſeaſe, particularly with the frequent and ſudden tranſlations of the affection from one part to another; that, if a morbific matter did exiſt, its operation ſhould be ſimilar in all the parts which it attacks, which is by no means the caſe; for, in the joints, it is ſtimulant, and excites inflammation; but, in the ſtomach, it is ſedative, and deſtroys tone; that the ſuppoſition of a morbific matter has been hitherto uſeleſs, as it has not ſuggeſted any ſucceſsful method of cure; that this hypotheſis explains nothing, without ſuppoſing the matter to produce a change in the ſtate of the moving powers; and a change in the ſtate of the moving powers produced by other cauſes, explains every circumſtance, without the ſuppoſition of a morbific matter; and, laſtly, that the nature of the diſeaſe

can

can be explained in a manner more conſiſtent with the phaenomena, with the laws o the animal oeconomy, and with the method of cure which is confirmed by experience.

After endeavouring, on theſe grounds, to refute the opinion which has been generally received, he delivers the following hypotheſis reſpecting the pathology of the gout. He ſuppoſes that, in ſome perſons, there is a certain vigorous and plethoric ſtate of the ſyſtem, which, at a particular period of life, is liable to a loſs of tone in the extremities, and that this is, in ſome meaſure, communicated to the whole ſyſtem, but appears more eſpecially in the functions of the ſtomach. When this loſs of tone occurs while the energy of the brain ſtill retains its vigour, he imagines that the vis medicatrix naturae is excited to reſtore the tone of the part; and that it accompliſhes this by exciting an inflammatory affection in ſome part of the extremities. In this he ſuppoſes the regular gout to conſiſt. But he obſerves, that there are circumſtances in the body by which this courſe may be interrupted or varied; and from theſe circumſtances he attempts to explain the phaenomena of the atonic, retrocedent, and miſplaced gout. How far this hypo-

hypotheſis will appear ſatisfactory to others, we cannot pretend to ſay. As the limits of our publication would not admit of a more particular account of it, we muſt refer them for a full view to the work itſelf. And we muſt conclude the preſent article with obſerving, that the method of treatment which is delivered by Dr Cullen, in the latter part of this chapter, differs leſs from the practice which had before been recommended by others, than from his theory we ſhould be inclined to expect.

II.

Franc. Ant. Obermayer Diſſertatio Experimentalis Chemica de Sale Sedativo Hombergii. Vid. Faſciculus Secundus Operum Minorum Medicorum et Diſſertationum Franciſci Xav. de Waſſerberg. 8vo, Vindobonae.

BORAX, when ſubjected to a chemical examination, appears evidently to conſtitute a neutral ſalt, its baſis being a mineral alkali, conjoined with an acid of a peculiar nature, known commonly

commonly by the name of Homberg's ſedative ſalt.

The nature of this mineral alkali, the baſis of borax, was long ago rendered ſufficiently evident by Margraaf's experiments on the ſubject; but the acid or ſedative ſalt with which it is combined having never been ſo accurately inveſtigated, a variety of opinions have been formed with regard to it. Some chemiſts ſuppoſe it to be of an alkaline nature; others ſupport a contrary opinion, and aſſert that it is evidently of an acid nature; whilſt, again, many very able chemiſts, among whom is Macquer, pronounce it to be a ſalt of the neutral kind.

With a view to illuſtrate this part of chemiſtry, the preſent ſet of experiments were inſtituted; and, as our author, we are told, ſet out with no preconceived opinion on the ſubject, the concluſions drawn from his experiments may probably with more certainty be depended on.

As we could not, without mutilating the ſubject too much, exhibit any part of theſe experiments; and, as the nature of our work does not admit of the whole being inſerted, we ſhall here give nearly verbatim from our author, the moſt material

material parts of a ſet of general corollaries, which he thinks naturally reſult from his experiments; and muſt accordingly refer ſuch of our readers as wiſh for a more particular account to the work itſelf.

By our author's experiments, the ſedative ſalt of borax appears evidently to be of an acid nature; and he concludes it to be ſo for the following reaſons among others.

1ſt, It raiſes an efferveſcence when mixed with any alkaline ſalt, whether fixed or volatile; and it conſtitutes with any of theſe a perfect neutral ſalt.

2d, When added to a ſolution of ſulphur in an alkaline ſalt, it, like other acids, occaſions a precipitation, attended with a conſiderable fætor.

3d, It eaſily expells, from their different baſes, the acids of nitre and of common ſalt.

4th, The mineral alkali of borax, when deprived of its ſedative ſalt, always efferveſces with every kind of acid.

The ſedative ſalt of borax appears to be perfectly diſtinct and different from every other ſpecies

ſpecies of acid, not being poſſeſſed even of the acrid ſourneſs of ſpirit of vitriol.

1ſt, It neither precipitates mercury nor corroſive ſublimate diſſolved in ſpirit of nitre; nor does it produce any effect upon the nitrous ſolutions of lead and ſilver.

2d, It does not produce ſulphur when combined with phlogiſton.

3d, It cannot be made to diſſolve in, or combine with the vitriolic acid.

4th, It does not, with any of the alkaline ſalts, produce either vitriolated tartar, or any ſpecies of Glauber's ſalt.

The following, we are told, are the principal circumſtances by which this ſpecies of acid may be diſtinguiſhed from ſpirit of nitre.

1ſt, The former is never obtained but in a ſolid form, whereas the latter is always in a fluid ſtate; for although the ſalt of borax is ſoluble in water, it very ſoon, upon being diſſolved, recovers its cryſtalline form again.

2d, The burning of inflammable bodies is haſtened by the addition of ſpirit of nitre; whereas ſedative ſalt has always the contrary effect.

3d, It deſtroys, or at leaſt greatly impairs, the fulminating powder of nitre.

4th, The acid of nitre is exceedingly volatile; whereas the ſalt of borax is of ſuch a fixed nature as to bear a very great degree of heat.

There are alſo different circumſtances enumerated, by which ſedative ſalt is diſtinguiſhed from the acid of ſea ſalt; the principal of which is, that aqua regia is always obtained by the addition of the latter to ſpirit of nitre; whereas ſedative ſalt is neither ſoluble in the acid of nitre, nor does it in any degree act as a ſolvent on gold. Our author therefore concludes, that borax is a real neutral ſalt, compoſed of a mineral alkali and an acid of a particular nature, which differs, as has been ſaid, in many circumſtances, from every other acid, and which always produces borax when ſaturated with ſoda.

III.

Marci Antonii Plenciz, *Medici Vindobonenſis, Tractatus de Scarlatina.*

THE ſcarlet fever being ſo liable to be confounded with different eruptive diſorders, our author, with a view to prevent any miſtakes, in

in practice of that kind in future, has here favoured us with a particular enumeration of the ſeveral ſymptoms of this diſeaſe.

Diſorders of this nature, whether of a mild or a more malignant tendency, always begin with a greater or leſſer degree of laſſitude and loſs of ſtrength, which are ſoon ſucceeded by heat, horripilatio, and fever.

About the ſame time, particularly in the malignant ſpecies of the diſeaſe, the patient is attacked with an intenſe pain of the head, delirium, a conſtant inclination to ſleep, nauſea, and vomiting. Deglutition becomes difficult; he complains of reſtleſſneſs, anxiety, ſtraitneſs about the praecordia, together with a ſmall, laborious, and quick reſpiration.

At length, particularly in the malignant ſpecies of the diſeaſe, about the ſecond or third day, and in ſome inſtances later, a kind of red unequal eruption appears, at firſt in perfectly diſtinct ſpots, which at laſt run together, and afford an uniform ſcarlet colour over the whole body. This eruption firſt appears on the face, neck, fauces, and breaſt; and afterwards on the back, abdomen, and other parts of the body.

All the parts about the fauces are ſo particularly affected in this diſorder, that the palate, tonſils, uvula, tongue, larynx, and pharynx, turn red, and ſwell ſo conſiderably, as frequently not only to impede deglutition, but to endanget ſuffocation, unleſs immediate aſſiſtance be procured.

The eruption is at firſt of a red, cinnabar colour; which circumſtance gave riſe to the name of the diſorder. But, about the end of the third, or commencement of the fourth day, it becomes pale, and by degrees loſes its red appearance altogether.

Our author here takes notice of a ſingular phaenomenon which he ſometimes met with in this diſorder. About the ſixth or ſeventh day from the commencement of the eruption, he obſerved a numerous ſet of puſtules chiefly in the hands and feet, which ſo much reſembled common white miliary ſpots, as by many to be taken for a freſh eruption of that nature. On examination, however, they were found perfectly different, and on being cut into, were diſcovered to conſiſt in an elevation of the epidermis, and to contain nothing but air.

Towards

Towards the end of the diſeaſe, the ſkin falls off in long, broad, and pretty thick ſcales, commonly in proportion to the extent and degree of redneſs which had previouſly prevailed.

After the ninth, tenth, or eleventh day, when the patient begins to ſleep well, and to recover his appetite, together with the uſe of all his different functions, he, as well as his attendants, are then very ready to conclude that the danger is over; but here we are told, a new diſorder, as it were, of a very dangerous nature, very frequently commences. About the fourteenth or fifteenth day, and ſometimes at a more late period from the termination of the former febrile affection, the patient becomes peeviſh, weak, and languid; and the face, hands, feet, abdomen, ſcrotum, and at laſt the whole body becomes inflated with a leucophlegmatic ſwelling. The urine is in ſmall quantities, of a bloody appearance, reſembling the waſhings of fleſh. The ſwelling firſt appears on the face, and from that ſpreads by degrees over the reſt of the body. It ſucceeds chiefly to the malignant or worſt ſpecies of ſcarlatina; but there have been inſtances of its occurring after even the mildeſt ſpecies of the diſorder. It arrives gene-

rally at a greater height in children than in adults; becomes more conſiderable in winter than in ſummer; and thoſe patients who go ſoon into the open air, are more ſeverely attacked with it than thoſe who keep longer confined.

This ſtage of the diſorder is evidently attended with more danger, that is, more patients die at this period than do in the more early or febrile ſtate of the diſeaſe.

Theſe are the uſual and ordinary ſymptoms of this diſorder; a variety of others, however, ſometimes occur, which may be reckoned of an anomalous nature, viz. haemorrhagies at the noſe, cough, bloody ſaliva, ſneezing, ſwellings of the parotids and glands of the neck; and now and then occur abſceſſes in the fauces, ears, breaſt, and other parts.

Our author, after giving the opinions of different writers on this diſorder, proceeds to treat of the diagnoſis, cauſes and ſeat of the diſeaſe, and afterwards goes on to the method of cure.

In the treatment of the milder ſpecies of ſcarlet-fever, little farther is neceſſary, we are told, than a due attention to diet, and the other non-naturals; but, whenever the diſeaſe puts on a more

more inveterate form, as conſiderable danger is then to be apprehended, other circumſtances muſt alſo be attended to.

Blood-letting, eſpecially in the feet, is here freely recommended by our author. Objections, he obſerves, have been made to this practice in every diſorder of the eruptive kind, upon the ſuppoſition of its frequently occaſioning a retroceſſion of the eruption. But, from long experience on this point, not only in the diſeaſe in queſtion, but in the ſmall-pox, we are aſſured of its being commonly attended with the very beſt effects. And, in the ſcarlet-fever eſpecially, if blood-letting be not had recourſe to when the inflammatory ſymptoms run high, the patient, we are told, will run a conſiderable riſk of being carried off, either by immediate ſuffocation, or by a ſubſequent mortification. So neceſſary a part of the cure is blood-letting conſidered by our author, that he recommends it even where the pulſe happens to be weak, quick, and unequal; and he remarks, that when, in ſuch caſes, it is had recourſe to, it always renders the pulſe more firm, ſoft, and equal.

After blood-letting has been had recourſe to, bliſters to the neck and inferior extremities are

adviſed, together with emollient injections, and a plentiful uſe of diluent drinks.

When the inflammatory ſtate of the complaint is pretty much over, Peruvian bark is then recommended as a principal remedy; and as, in this diſorder, it cannot be taken in ſufficient quantities, in the ordinary way, from the ſwelling of the fauces which commonly prevails, we are deſired to have recourſe to frequent dozes of the extract, and to inject, by the anus, glyſters compoſed of the decoction of bark.

All the warm ſudorific and cordial remedies frequently had recourſe to in this diſorder, are much condemned; for, inſtead of producing any deſirable effects, they almoſt always, we are told, tend to aggravate the different ſymptoms, as they juſt as readily occaſion a determination, our author thinks, to the brain, and other internal viſcera, as to the ſurface of the body.

In the malignant ſpecies of the ſcarlet-fever, reſtleſſneſs, we are told, is frequently a troubleſome ſymptom. In ſuch caſes, gentle paregorics are recommended.

For the prevention and cure of that leucophlegmatic ſwelling, which ſo frequently ſucceeds the

the ſcarlet-fever, as the urine is commonly much diminiſhed in quantity, infuſions of juniper-berries, and other diuretics, are chiefly recommended.

In very obſtinate caſes of this kind, mercury, together with aurum fulminans, are mentioned as very effectual remedies, and are recommended in the following forms:

℞. Rhei electi
Spirit. ſalis coagulati utriuſque drachmas duas
Mercurii dulcis
Auri fulminantis
Extract. Scillae, ſingulorum ſemidrachmam
M. f. pill. cum Rob. Juniperi pondere unius alteriuſve grani

Of theſe pills, one or two are to be given every two or three hours, according to the age and ſtrength of the patient; and, if they do not procure three or four ſtools a day, the dose ſhould either be increaſed, or ſome other ſpecies of laxative conjoined with the pills, ſo as to produce that effect, and to prevent ſalivation, which otherwiſe might probably take place.

Aurum fulminans is here recommended in every caſe where a ſure and ſafe laxative is wanted, as it does not operate in that violent manner that many practitioners have aſſerted.

In

In this ſtage of the diſorder, patients frequently fall into a torpid lethargic ſtate; for which, bleeding with leeches behind the ear is recommended, together with bliſters to the neck and head.

As an appendix to this diſſertation, ſeventeen caſes of ſcarlatina are related at full length; but, to tranſcribe any of them here, would extend this article farther than the nature of our work admits of.

IV.

Diſcoveries on the Sex of Bees, explaining the manner in which their Species is propagated, with an Account of the Utility that may be derived from thoſe Diſcoveries, by the actual Application of them to Practice. *By Mr* John Debraw, *Apothecary to Addenbrook's Hoſpital at Cambridge, and Member of an Oeconomical Society in the Principality of Liege in Weſtphalia. Communicated by the Reverend* Nevil Maſkelyne, *B. D. F. R. S. and Aſtronomer Royal.*

THE republic of bees has been ſo much the ſubject of univerſal admiration, that it is by no means ſurpriſing it ſhould have engaged the

the attention of many eminent philoſophers. But, while many diſcoveries have of late years been made, the mode in which bees propagate their ſpecies ſeems to have baffled the ingenuity of all inquirers, in their attempts to diſcover it. It has been commonly ſuppoſed, that bees, like other tribes of animals, are perpetuated by copulation. The reſult of Mr Debraw's experiments, however, affords ſufficient grounds for aſſerting, that bees belong to that claſs of animals among which, although they have ſexes, a true copulation cannot be proved; and that their ova, like the ſpawn of fiſhes, moſt probably owe their fecundation to an impregnation from the males.

Naturaliſts have ſuppoſed, that the queen is the only female in the hive, and the mother of the next generation; that the drones are the males, by whom ſhe is fecundated; and that the working bees are of neither ſex. But, Mr Schirach, a German naturaliſt, has given us a different view of the claſſes which conſtitute the republic of bees. He affirms, that all the common bees are females in diſguiſe, in which the organs that diſtinguiſh the ſex, and particularly the ovaria, are obliterated; that every one of theſe bees, in the earlier period of its exiſt-

ence,

ence, is capable of becoming a queen bee, if the community ſhould think proper to nurſe it in a particular manner, and raiſe it to that rank; and that the queen bee lays only two kinds of eggs, thoſe that are to produce the drones, and thoſe from which the working bees are to proceed. This doctrine Mr Debraw has found to be confirmed by numerous obſervations. But, he obſerves, that the function of the drones ſeems not to have been underſtood either by Mr Schirach, or his friend Mr Hattorf, who, in a memoir on this ſubject, endeavours entirely to annihilate their uſe in the hive. But to this opinion, the large quantity of ſeminal liquor with which they are furniſhed, and the large apparatus of fecundating organs, which have been ſo well deſcribed by Reaumur, Maraldi, and others, appear to our author to be inſuperable objections; while his own accurate obſervations give a very different view of this matter from what Mr Hattorf had before taken.

Mr Debraw, we are told, watched his glaſs-hives with indefatigable attention, from the moment the bees, among which he had taken care to leave a large number of drones, were put into them, to the time of the queen laying her eggs, which

which generally happens by the fourth or fifth day. He obſerved, on the firſt and ſecond day from the time the eggs were placed in the cells, that a great number of bees, faſtening themſelves to one another, hung down in the form of a curtain, from the top to the bottom of the hive, in a manner ſimilar to what they had done at the time when the queen depoſited her eggs. This led him to ſuſpect that ſomething was going on; and, upon accurate examination, he could plainly diſtinguiſh ſeveral bees inſerting the poſterior part of their bodies, each into a cell, and ſinking into it, but continuing only for a ſhort while. After they had retired, he ſaw plainly, with the naked eye, a ſmall quantity of whitiſh liquor left in the angle of the baſe of each cell, containing an egg. This fluid was leſs liquid than honey, and had no ſweet taſte. Within a day after, he found this liquor abſorbed into the embryo, which, in the fourth day, is converted into a ſmall worm, to which the working bees bring a little honey for nouriſhment, during the firſt eight or ten days after its birth. From that time they ceaſe to feed their embryos, but ſhut up the cells, in which they continue incloſed for ten days more. During that time they undergo various changes,

changes, a particular account of which is foreign to the buſineſs of this paper.

From having obſerved theſe particulars, Mr Debraw concluded, that the eggs are fecundated by the males, and that their preſence is neceſſary at the time of breeding; and, by ſeveral experiments which were afterwards inſtituted, this opinion was fully confirmed. Into a particular detail of theſe experiments, the limits of our publication will not allow us to enter. We may only, in a general way, obſerve, that, when all the drones were removed from a hive, although eggs were laid by the queen, none of them became young bees, and the hive was very ſoon deſerted. And beſides this, a peice of brood-comb, containing eggs in its cells, was divided into two portions, before theſe eggs were impregnated. One of theſe portions was put under a glaſs bell, with a queen, and common bees, without drones, the other with drones. In the firſt, no young bees were produced, and the combs were deſerted by all the bees, as ſoon as they were ſet at liberty; in the laſt, the eggs went through their uſual changes, young bees appeared, and none forſook the hive, on receiving their liberty.

Theſe

Theſe experiments ſeem inconteſtibly to eſtabliſh the doctrine of the impregnation of eggs by the males.

In the courſe of theſe experiments, however, Mr Debraw was not a little ſtartled to find in one of his young colonies two queens. This he thought could only be explained on one of two footings; either two queens, inſtead of one, muſt have been accidentally placed under that glaſs, or elſe the bees could, by ſome particular means of their own, transform a common ſubject into a queen. From repeated experiments he found that the laſt of theſe ſuppoſitions was the truth, that the working bees are veſted with a power of raiſing a common ſubject to the throne when the community ſtands in need of a queen; and that every worm in the hive, under certain circumſtances, is capable of becoming the mother of a generation. Its metamorphoſis into a queen he refers partly to the extraordinary ſize of the cell and its particular poſition, but principally to a certain nouriſhment carefully adminiſtered to it by the working bees, while it is in the worm ſtate. By this means he imagines, that the development and expanſion of the germ of the female organs, previouſly exiſting in the embryo,

is

is effected; and thoſe differences in its form and ſize are produced, which afterwards ſo remarkably diſtinguiſh the queen from the common working bees. In this particular, then, the diſcoveries and obſervations of Mr Debraw confirm thoſe of that ingenious German Mr Schirach, reſpecting the ſex of the common bees, although, with what relates to the uſe of males or drones, they differ widely from each other.

Theſe diſcoveries are not merely matter of curioſity, as illuſtrating the natural hiſtory of bees, but of public utility. And Mr Debraw concludes his paper with pointing out the advantage that may accrue from theſe obſervations, as being the means of forming artificial ſwarms, or new colonies. The practice of this new art has already extended itſelf through Luſatia, Bohemia, Bavaria, Sileſia, and many other parts of Germany. Were it introduced into Britain, large ſums of money, which are annually ſent out of the country for the purchaſe of wax, might be retained. For a great quantity of wax is loſt every ſeaſon from the want of keeping up a ſufficient ſtock of bees to collect it.

V.

V.

Deſcription of the Jeſuits Bark Tree of Jamaica *and the* Caribbees. *By* William Wright, M.D. F.R.S. *member of the Philoſophical Society of* America, *and Surgeon-General in* Jamaica. *Communicated by* Joſeph Banks, Eſq; F.R.S. *Vid. Philoſophical Tranſactions, Vol. 77. Part 2.*

THE extenſive uſe of the cortex Peruvianus in the practice of medicine, muſt naturally render it a very deſirable object, that practitioners could be ſupplied with this valuable drug from other places beſides the Spaniſh ſettlements in America. And, although the illuſtrious Linnaeus has long ſince pointed out one ſpecies of this tree, under the title of Cinchona Caribaea, yet it will not be refuſed by any one, that we are much indebted to Dr Wright for his obſervations on this ſubject in the paper before us. For, of this latter ſpecies, on which he has beſtowed the title Cinchona Jamaicenſis, he has not only given an accurate deſcription, and pointed

out places in which it may be had in abundance, but has alſo confirmed its medical virtues by experience, and brought ſuch quantities of it to Europe, as may enable ſeveral eminent practitioners, into whoſe hands he has put it, to confirm or refute his obſervations.

This ſpecies of the Jeſuits bark, he obſerves, grows on ſtony lands near the ſea-ſhore, in the pariſhes of St James's and Hanover, on the north ſide of Jamaica. It is there called the ſea-ſide *Beech*, and riſes only to twenty feet in height. The trunk is hard and tough, and of a yellowiſh white colour in the inſide. The leaves are of a ruſhy green, and the young buds of a bluiſh green hue. It bloſſoms in November, and continues in flower till February; ſo that on the ſame ſprig there are often flowers and ripe pods. The flowers are of a duſkiſh yellow colour, and the pods black. When ripe, they ſplit in two, and are, with their flat brown ſeeds, in every reſpect ſimilar to thoſe of the cinchona officinalis.

The bark of this tree, Doctor Wright obſerves, is in general ſmooth and grey on the outſide, though in ſome it is rough and ſcabrous. When it is properly dried, the inſide is of a dark brown colour. Its flavour, at firſt, is ſweet, with a mix-

ture

ture of the taſte of Horſe-radiſh, and of the aromatics of the Eaſt; but when it is ſwallowed, it has that very bitterneſs and aſtringency which characteriſe the Peruvian bark.

It yields theſe qualities both to cold and to warm water. And Doctor Wright, we are told, found, that half an ounce of it put upon the fire with two pounds of water, and boiled till one half was exhauſted, made as ſtrong a decoction as an ounce and a half of the Cinchona vera.

Doctor Wright obſerves, that he has had many opportunities of trying the effects of this medicine, eſpecially in remittent fevers, which are the moſt common and fatal in Jamaica. A vomit, or gentle purge, if neceſſary, were firſt given, and, as ſoon as their operation was finiſhed, the uſe of this bark was begun. Doctor Wright found that it ſtrengthened the ſtomach, checked reaching and vomiting, corrected morbid humours in the primae viae, and ſpeedily conquered the diſeaſe. And, from its ſucceſs in this affection, he has no doubt that it will prove equally efficacious in every other caſe where a tonic or antiſeptic medicine is indicated.

To this account, taken from the Philoſophical Tranſactions, the following extract from a letter written by Doctor Wright to Doctor Duncan, may make no improper addition.

" Since I wrote the deſcription of the Jeſuits bark tree, which is publiſhed in the Philoſophical Tranſactions, I have found, that, in Weſtmorland, and ſome places of Jamaica, this tree grows to about forty feet in height. The trunks are ſtraight, the wood yellow, hard, and elaſtic. The cuticula of the bark of large trees is white, rough, furrowed, and remarkably thick. This is entirely inert, and may be knocked off from the inner bark

" This bark has been adminiſtered in London, in a caſe of an intermittent. It was given in powder, and a cure was effected as completely as if the bark from the cinchona officinalis had been uſed.

" I have given it with great ſucceſs in the nervous fever, which is a very frequent diſeaſe in Britain, and I have alſo uſed it in ſtomachic bitters. Three drams of this bark, with one dram of orange peel, makes an elegant and grateful tincture, of equal efficacy to Huxham's tincture of bark.

" I

"I prefer the bark of the limbs of tall trees, and of the trunks of young trees, to any other."

We hope ſoon to be able to communicate to the public, practical obſervations from other practitioners, confirming thoſe of Doctor Wright. Meanwhile, we ſhall conclude this article, by ſubjoining, for the uſe of the botanical reader, the following accurate deſcription of this ſpecies of the cinchona.

Cinchona Jamaicenſis, ſeu Caribbeana.

Cinchona Carribaea, Lin. ſpec. plant. 245.

Fol. Ovata integerrima acuta enervia, oppoſita.

Flor. Singulares axillares.

Cal. Perianthium monophyllum, ſuperum, quinquefidum, minimum, perſiſtens, campanulatum, obſoletiſſime quinquedentatum.

Cor. Monopetala infundibuliformis. Tubus cylindraceus, longiſſimus. Limbus quinque-partitus, tubo aequalis: Laciniis ovalis oblongis, reflexis, quandoque pendulis.

Stam. Filamenta quinque, filiformia, erecta e medio tubi, longitudine corollae, antherae longiſſimae obtuſae erectae ſupra baſin exteriorem, affixae in facie corollae.

Capſ. Bipartibilis in duas partes diſſepimento parallelo latere inferiore dehiſcens.

Sem. Plurima, compreſſa, marginata, oblonga.

VI.

Deſcription and Uſe of the Cabbage-Bark Tree of Jamaica. *By* William Wright, M. D. F. R. S. *Communicated by* Richard Brockleſby, M. D. F. R. S. *Vid. Philoſophical Tranſactions, Vol. 77. Part 2.*

DISORDERS ariſing from worms in the alimentary canal, are both more frequent and more violent in the Weſt India iſlands than in moſt places of Britain. And nature has bountifully provided them with ſeveral anthelmintics which are not the products of this country. Among theſe, the cabbage-bark tree has long and deſervedly been held in great eſteem. Of this vegetable, however, no proper deſcription has hitherto appeared; and accurate obſervations were wanting reſpecting the different forms in which it could beſt be exhibited in the practice of medicine. Both theſe defects Doctor Wright has

has very fully ſupplied in the paper before us. And to his accuracy and induſtry, the philoſophical, as well as the medical world, are in this, as well as many other particulars, very much indebted.

The cabbage-bark, or worm-bark tree, to which he has given the botanical title of Geoffraea Jamaicenſis Inermis, grows, he obſerves, in moſt parts of Jamaica, but particularly abounds in the low Savannahs of St Mary and St George. It might, perhaps, have been conſidered as a new genus in the vegetable kingdom; but a deſire of avoiding the multiplication of genera, and the near reſemblance which it has to the Geoffraea ſpinoſa of Linnaeus, were the reaſons for beſtowing upon it the botanical title here uſed.

According to Doctor Wright, this tree riſes to a conſiderable height, but is of no great thickneſs; and it ſends off its branches about the top of a ſtraight ſmooth trunk. The leaves, when young, are of a light green hue; when full grown, of a dark green colour; and, before, they drop, of a ruſty appearance. The flower-ſpike is long, and beautifully branched. The flowers are numerous; their calyces are of a dark purple colour, and their petals of the colour of the pale

roſe. The pericarpium is a green hard fruit of the ſize of the ſmaller plumb. The ſkin is of the thickneſs of a crown piece, and taſtes very auſtere, and the kernel is covered with a brown ſkin, like that of other nuts. Doctor Wright is of opinion, that the nectaria muſt contain much honey, as thouſands of bees, beetles, butter-flies, and humming birds, are continually feeding on it.

The wood of this tree is, we are told, employed for ſeveral different purpoſes, but it is valued chiefly for its bark, which is externally of a grey colour, and in the inſide black and furrowed. To the taſte this bark is mucilaginous, ſweet, and inſipid. Its ſmell, however, is rather diſagreeable, and it retains it in the decoction; hence it has by ſome been called the Bulge-water tree.

The anthelmintic quality of this bark is now eſtabliſhed by the experience of ſeveral ages. Beſides being in general uſe in the Weſt Indies, it now begins to be known in Europe. Accurate obſervations, therefore, reſpecting its exhibition muſt be of great utility.

Doctor Wright obſerves, that he has employed it in the different forms of decoction, ſyrup, powder,

powder, and extract, and he gives ſome remarks on each.

For making the decoction, he adviſes one ounce of freſh dried, or well preſerved cabbage bark, to be boiled in a quart of water, over a ſlow fire, till the water be of an amber colour, or rather like deep coloured Madeira wine. It is then to be ſtrained off, and ſweetened with ſugar for immediate uſe.

From this decoction, by the addition of a ſufficient quantity of ſugar, the ſyrup is made; and, although the decoction itſelf does not keep many days, this will retain its virtue for years.

An extract may be formed by evaporating the decoction in balneo mariae, to a proper conſiſtence; but, during the preparation, it muſt be carefully ſtirred, to prevent the reſinous part, on which its efficacy probably depends, from riſing to the top.

When the bark is well dried, it is eaſily reduced to a powder, which much reſembles that of Jallap, although it be not of equal ſpecific gravity.

From the narcotic effect which this anthelmintic has, Doctor Wright adviſes, that it ſhould always,

ways, at firſt, be uſed in ſmall doſes. And the obvious operation to be expected from it is, that of exciting nauſea. He tells us, that a ſtrong healthy perſon may, at firſt, take four table ſpoonfuls of the decoction or ſyrup; three grains of the extract, or thirty grains of the powder, for a doſe; and children of two or three years old may take a table ſpoonful of the decoction or ſyrup, one grain of the extract, or ten grains of the powder; and, for intermediate periods of life, the doſe with which the patient begins may be accommodated to the age; but, if ſuch a doſe does not excite nauſea, the quantity may be increaſed till that effect is produced. If, during the operation of this medicine, the patient ſhall drink cold water, it is apt to occaſion ſickneſs, vomiting, fever, and delirium. When theſe ſymptoms take place, either from this cauſe, or from an over-doſe, the ſtomach muſt be waſhed with warm water, the patient muſt be ſpeedily purged with caſtor oil, and beverage of lime juice muſt be uſed plentifully as common drink. For, according to Doctor Wright, the vegetable acid is a powerful antidote in this caſe, as well as in caſes where an over doſe of opium has been taken.

Although

Although the cabbage-bark may be uſed in all the different forms mentioned, yet our author obſerves, that the decoction is chiefly given in Jamaica, and that it ſeldom fails to perform every thing that can be expected from an anthelmintic medicine.

In a former number of this work, it was obſerved, that ſome practitioners at Edinburgh had found it to excite violent vomiting, and that ſome practitioners at London had obſerved from it a conſiderable diſcharge of urine. No ſuch effects, however, are obſerved from it in the Weſt Indies; and Doctor Wright is diſpoſed to believe, that theſe are the conſequences of its being uſed in a mouldy ſtate. The effect moſt obvious from it is that of purging briſkly. This eſpecially happens when it is given in powder; but in this way, Doctor Wright obſerves, that it does not ſeem to kill worms ſo well as in decoction.

Doctor Wright concludes his paper with obſerving, that fatal accidents have ſometimes happened from the imprudent adminiſtration of this bark; yet, ſince this is alſo the caſe with many other of the beſt medicines, he is inclined to look upon

upon it as a valuable addition to the materia medica.

Of the cabbage-bark tree, Doctor Wright has given the following botanical deſcription.

Geoffraea Jamaicenſis inermis.

Fol. Oppoſita oblongo-ovata ternata acuminata, ſuperne glabra, inferne enervia, petiolis brevibus.

Cal. Perianthium monophyllum, campanulatum, leviſſime quinque-partitum, laciniis ovatis brevibus.

Cor. Papilionacea. Vexillum ſubrotundum, concavum. Alae obtuſae concavae longitudine vexilli. Carina ovata patens in duabus partibus leviſſime diviſa.

Stam. Diadelpha, decem, filiformia, in calyce inſerta, longitudine alarum. Antherae ſubrotundae.

Piſt. Subulatum filiforme; Stigma nullum, germen ovato-oblongum compreſſum.

Per. Drupa ſubovata, magna.

Sem. Nux ſubovata ſublignea, ſulco utrinque longitudinali, bivalvis.

VII.

VII.

Diſſertatio Medica de Methodo Medendi Variolae, praecipue auxilio Mercurii. Auctore Thoma Fowler, *Societ. Med. Edin. Soc.* &c.

AMONG the numerous inaugural diſſertations which are publiſhed at Edinburgh, we have oftener than once preſented our readers with an analyſis of ſuch as we thought beſt merited the attention of the public. Theſe almoſt ſolely conſiſted of ſuch as contained ingenious experimental inquiries on ſubjects, ſtrictly ſpeaking, rather philoſophical than medical: And, while they afforded proof of the induſtry and ability of the authors, they, at the ſame time, ſerved to through new light on intricate and important ſubjects. They have, however, been, in general, the works of young men, who wanted experience in the practice of medicine. But, while the preſent treats of a ſubject purely of a practical nature, it is, at the ſame time, the work of one, who, from long and extenſive practice, has been enabled to deliver the reſult of judicious and accurate obſervation.

Although

Although the practice of inoculation has been attended with the moſt beneficial effects in rendering the ſmall-pox a much leſs mortal diſeaſe, yet this practice is by no means ſo general, that bad caſes, from accidental infection, do not frequently occur. The great object of the preſent diſſertation is to deliver proper rules for the treatment of ſuch, and to eſtabliſh the power of mercury as a ſpecific againſt this contagion.

In as far as reſpects the treatment, Doctor Fowler thinks that the ſmall-pox may be moſt properly divided into three ſtages.

1*ſt*, The eruptive ſtage, extending from the firſt acceſſion of the eruptive fever to the termination of the eruption.

2*d*, The inflammatory ſtage, extending from the time that the eruption is compleated, till ſigns of debility or putreſcency occur.

3*d*, The ſtage of debility or putridity, extending from the commencement of the ſymptoms of ſuch conditions, till the final termination of the diſeaſe.

After laying down this general diviſion, he next proceeds to offer ſome obſervations on the treatment to be followed during each of theſe ſtages.

The

The great object which he thinks ought to be aimed at during the eruptive ſtage, is a diminution of the quantity of variolous matter in the ſyſtem. And this, he thinks, is to be effected in two ways: By exhibiting mercury as a ſpecific, and by moderating the re-action of the ſyſtem by the uſe of cathartics, gentle diaphoretics, opiates, blood-letting, antiphlogiſtic regimen, but eſpecially by light clothing, aceſcent watery liquors, and pure free air.

From the perſuaſion that mercury operates as a ſpecific, he holds that it ought to be exhibited in as great quantities, during the eruptive fever, as the inteſtines and ſyſtem can bear. And for that purpoſe he recommends the following formulae:

℞ Mercurii dulcis ſublimati ppt. drachmam dimidiam
Pilularum ex colocynthide cum aloe drachmam unam
Contundendo bene miſce, ut fiat maſſa pilularis.
Doſis pro adultis circiter drachmam dimidiam
Doſis pro aegris, annos decem natis, circiter ſcrupulum unum.

℞ Mercurii dulcis ſublimati, ppt.
Pulveris radicis jalappi
Florum ſulphuris, ſingulorum drachmam unam.
Diligenter miſce.

Doſis

Doſis pro aegris annos quinque habentibus, grana quindecim.

———annos tres habentibus, grana duodecim.

———infantibus annum unum natis, grana octo.

With regard to infants, he lays it down as an univerſal rule, that three fourths of the doſe are to be given at firſt, and the remainder at the end of four hours, if looſeneſs has not come on before that. He adviſes that this mercurial purgative ſhould be repeated every ſecond day. And on thoſe days on which no purgative is taken, he orders for an adult five grains of the common mercurial pill of the London college, or ten grains of that of Edinburgh, and for younger patients in proportion to the age.

With reſpect to moderating the reaction of the ſyſtem, the directions which he gives concerning the uſe of cathartics, diaphoretics, bloodletting, and the like, are very much the ſame with thoſe laid down by other practitioners. But we ought, perhaps, to conſider it as, in ſome meaſure, a peculiarity in modern practice, when he adviſes a doſe of liquid laudanum to be given every night after the operation of the cathartic.

During the ſecond ſtage, our author adviſes, that the attention of the practitioner be directed towards

towards obtaining a laudable ſuppuration. And this, he imagines, is chiefly to be brought about by continuing the uſe of the mercury, and by counteracting the effects of irritation reſulting from cutaneous inflammation.

During the third and laſt ſtage, a laudable ſuppuration is only to be obtained by counteracting the diſpoſition to debility and to putridity. For this purpoſe, the Peruvian bark, acid elixir of vitriol, wine, and opiates, are to be conſidered as the principal aids. But, beſides theſe, he further adviſes, that the patient uſe for aliment farinaceous and aceſcent food, and for drink, acidulated and watery fluids. And he conſiders it as further neceſſary, that care be taken to avoid the accumulation of variolous matter on the ſurface of the body, to avoid unuſual evacuations, and to keep the belly gently open. Beſides theſe means, in ſome inſtances it is alſo neceſſary to have recourſe to bliſters.

While he imagines that, during the two former ſtages, this diſeaſe is to be treated as inflammatory, he conſiders it during this ſtage, when the ſmall-pox are of the confluent kind, as aſſuming the form of a typhus. Hence then a very

different mode of treatment becomes neceſſary, and in place of farther endeavouring to moderate reaction, all evacuation muſt be avoided, and endeavours employed for ſupporting the vis vitae and general tone of the ſyſtem. With theſe intentions the directions which he delivers reſpecting the uſe of Peruvian bark, wine, opiates, and other remedies, are little different from what are delivered by the greater part of the moderns.

Beſides the particulars already mentioned, Dr Fowler obſerves, that much might alſo be ſaid reſpecting the means to be employed for mitigating anomalous ſymptoms. But, as his principal object in this diſſertation was to eſtabliſh the power of mercury as a ſpecific, without entering on the conſideration of theſe, he concludes this eſſay by offering ſome arguments in ſupport of this opinion. Of theſe the following are the principal.

1. He has uniformly obſerved, that, when patients under the proceſs of inoculation had taken calomel by way of purgative, to ſuch an extent as gently to affect the mouth, the diſeaſe was invariably mild.

2. He

2. He has found that, when ſmall doſes of calomel were given to ſuch an extent as to affect the mouth without inducing catharſis, the diſeaſe was equally mild as when it had the effect of producing evacuation by ſtool.

3. He has remarked, that, although the number of puſtles from inoculation, where no mercury was taken, be often but inconſiderable; yet, in conſequence of the uſe of mercury, they never fail to become more mild, and to terminate ſooner than would otherwiſe be the caſe.

4. He has oftener than once had occaſion to exhibit mercury to children in families where the ſmall-pox were particularly ſevere, with the view of their being afterwards inoculated; but, from the occurrence of accidental contagion at the time, the operation has been prevented. And, in theſe caſes, the diſeaſe aſſumed the ſame mild form as if the infection had been given by inoculation.

5. He has often exhibited to patients, after they were affected with the ſymptoms of ſmall-pox without inoculation, calomel, in full doſes as a cathartic, with remarkable ſucceſs, the quantity of the eruption never being ſo great as might be concluded from the preceding ſymptoms.

To theſe arguments, drawn from his own obſervation, he ſubjoins the ſentiments of ſeveral eminent practitioners, which ſeem to confirm the ſame doctrine, particularly thoſe of Boerhaave, Tennent, Mead, Tomlinſon, Blake, and Lettſome. And he concludes his obſervations on this ſubject, by anſwering ſome objections which may be brought againſt this doctrine, particularly thoſe drawn from caſes where the diſeaſe has been very ſlight from inoculation without the uſe of mercury, and thoſe where patients had been attacked with the ſmall-pox during a mercurial courſe for other diſeaſes, notwithſtanding which, this affection was very ſevere. In anſwer to the firſt, he propoſes many circumſtances which muſt at leaſt create doubt; and the latter he conſiders as a very rare occurrence. Hence he thinks it might, with equal juſtice, be contended, that mercury does not cure lues venerea, or Peruvian bark intermittent fevers, becauſe theſe alſo ſometimes fail. While, therefore, he conſiders theſe objections as of no weight, he views the doctrine of the ſpecific power of mercury againſt the variolous infection, as eſtabliſhed both by the ſentiments of others, and his own obſervation.

SECT.

SECT. II.

Medical Obſervations.

I.

Some Remarks on the Treatment of Hydrocephalus Internus, ſuggeſted by a peruſal of Doctor Percival's *paper on that Subject in the* 18*th Number of the Medical Commentaries. In two Letters to* Dr Duncan, *from* Samuel Foart Simmons, M.D.

I Do not in the leaſt heſitate to communicate to you the ideas that occurred to me on reading Doctor Percival's obſervations on hydrocephalus internus, in the 18th number of the Medical Commentaries; becauſe I am perſuaded, from the candour which is ſo apparent in all the writings of that ingenious and celebrated phyſi-

cian, that he will not be diſpleaſed with a few reflections, which are tranſmitted to you from no other motive, than a deſire to aſcertain what degree of confidence may be placed in the method of treatment he recommends, in a diſeaſe which is confeſſedly ſo fatal, and which has hitherto baffled the attempts of the ableſt and moſt experienced phyſicians.

I ſuſpect, that Doctor Percival, by confining his views chiefly to the effects of the mercurial frictions, in the caſe he relates, has overlooked the effects of the other remedies he employed; and particularly of the bliſters, which were ſo liberally applied, and ſo uniformly productive of relief. This will the more clearly appear, if we take a curſory view of Doctor Percival's very accurate journal of the caſe, in which, or I am greatly deceived, it is much eaſier to trace the good effects of the veſicatories applied to the head and back, than any beneficial operation of the mercury. Doctor Percival informs us, that, previous to his firſt viſit on the 4th of September, *a bliſter had been applied, during the action of which, the patient was thought to be much better*, but that he ſoon relapſed into his former ſtate. On the ſame day, recourſe was had to the unguentum

guentum mercuriale mitius, ten grains of which were directed to be rubbed into his thighs every three hours; but, at the ſame time, *muſk was given to allay the convulſive ſymptoms; ſmall bliſters were applied on each ſide of the head, juſt below the tumour of the bregma, and a folded rag, frequently moiſtened with brandy, was laid upon the tumour, to promote abſorption. Another veſicatory had been applied to the leg, and an emetic had been given, which had diſcharged a great quantity of bile.* The next day, at five o'clock in the afternoon, the tumour was ſenſibly diminiſhed, and the child's mouth moiſt, and often filled with ſaliva, and his tongue appeared to be ſwollen. The ingenious writer aſcribes theſe effects to the two ſcruples of mercurial ointment that had been rubbed in; although he informs us, at the ſame time, that *a large diſcharge of ſerum had been produced by the bliſters*, and that another bliſter was directed to be applied to the head. The following day, (September the 6th), the ſtupor and other ſymptoms were conſiderably abated, and the child was able to diſtinguiſh taſtes, and to ſwallow freely. Half a dram more of the ointment had been conſumed. On the 7th, there was an evident mitigation of all the ſymptoms.

The child's head had ſweated profuſely, and the bliſters had run much. The tumour of the bregma was conſiderably reduced. In the evening, the convulſions recurred with violence, and continued all night. On the 8th, the mercurial ointment had rendered his gums and tongue ſore, and very moiſt, though his breath was not offenſive: *A bliſter was applied to the occiput.* On the 10th, (Doctor Percival not having been able to ſee him on the 9th), he found the child better. He had paſſed two nights free from convulſions. *The bliſter applied to the occiput, like the others, had produced a very copious diſcharge*, and the tumour of the head was ſcarcely perceptible. On the 11th, the convulſions were violent. Four teeth were ſeen nearly protruding through the gums. About one o'clock in the afternoon the child died. Doctor Percival aſcribes the convulſions, under which the child expired, to the irritation of the gums by the protruſion of four teeth, rather than to any remaining water in the brain, the tumour of the head having entirely diſappeared. But I would beg leave to aſk the ingenious writer, Whether the exhibition of the mercury might not keep up and increaſe ſuch an irritation? It ſeems to have been employed in a

ſufficient

ſufficient quantity to render the parts about the mouth ſore and painful, although the breath does not appear to have been rendered offenſive, nor any conſiderable flow of ſaliva excited by it. I have had occaſion to remark, that, in infancy, when the general irritability of the ſyſtem is ſo great, particular organs are not affected by their peculiar ſtimuli ſo readily, and independently of the reſt of the ſyſtem, as they are in more advanced life, when the general irritability is diminiſhed. Thus, for example, a ſalivation from the uſe of mercury, in very young ſubjects, has ſometimes been preceded by convulſions; whereas, in the generality of adults, it is attended with no other ſymptoms than what the affection of the parts about the mouth may naturally be expected to excite in the reſt of the ſyſtem. I am, therefore, induced to be of opinion, that, in Doctor Percival's patient, the diminution of the tumour was chiefly owing to the action of the bliſters, and, in ſome meaſure, perhaps, to the rag dipped in brandy; nor ought the emetic to be forgotten here, which, by its operation, is known to be ſo powerful a promoter of abſorption. Mercury, no doubt, as the learned writer obſerves, by ſtimulating the ſalivary glands, might

diminiſh

diminiſh the fluid diſcharges in the ventricles of the brain; but, in the caſe alluded to, there does not ſeem to have been any conſiderable flow of ſaliva; and, at any rate, the ſerous diſcharge from a bliſter, and that applied near to the ſeat of the diſeaſe, would ſurely produce ſuch an effect with more certainty. I am the more ready to adopt this mode of thinking, becauſe, I remember, during my ſtay at Geneva, to have been told by Doctor Odier, and other phyſicians there, that they had ſucceeded in the cure of ſeveral caſes of hydrocephalus internus, by means of a large bliſter applied to the head. And I have lately had occaſion to ſee an unhappy caſe of this ſort, in which a bliſter applied in that way proved powerfully palliative; but the diſeaſe had made too great a progreſs to yield effectually to any remedies, and the patient died.

It is difficult to aſcertain the effects of any remedy, when other active ones are adminiſtered at the ſame time. Were the public informed of the whole of the method adopted by Doctor Dobſon of Liverpool, in the caſe communicated by him to Doctor Percival, and which, it ſeems, ſuggeſted to the latter the idea of adminiſtering mercury in ſuch a quantity as to ſalivate, we might

might be enabled, perhaps, to ſpeak with more preciſion on this ſubject. If it ſhould appear that Doctor Dobſon owed his ſucceſs ſolely to the uſe of mercury, it ought certainly to encourage us to make other ſimilar trials; but, if it was combined, as in the caſe related by Doctor Percival, with antiſpaſmodics and bliſters, will it not rather tend to confirm the opinion I have ventured to hint, that more ſtreſs ought to be laid on the latter of theſe, than on any other part of the proceſs, and that the uſe of mercurial frictions, in theſe melancholy caſes, ought to be cautiouſly adopted?

* * * * *

Since I had the pleaſure of writing my former letter to you on the ſubject of hydrocephalus internus, I have met with ſome obſervations on that diſeaſe, by Doctor Ambroſe Dawſon, which greatly tend to corroborate the opinion I ventured to communicate to you. Doctor Dawſon lays great ſtreſs on the exhibition of opiates in theſe caſes, probably with a view to obviate ſpaſm; but he by no means neglects the uſe of bliſters. 'Cover the whole head with a bliſter; apply

'bliſters

'bliſters behind the ears, and keep them all 'open.' Theſe are a part of his general directions. And, although in two caſes which terminated ſucceſsfully, Doctor Dawſon ſeems to aſcribe the cure to theriaca andromachi, (the medicine on which he tells us he chiefly depended), yet we are told that bliſters, both to the head and arms, had been applied during the courſe of the diſeaſe; and, in another patient, who likewiſe recovered after taking freely of the theriaca, bliſters were repeatedly applied behind the ears, and to the occiput. As the volume containing this intereſting paper is, probably, already in your hands, I ſhall make no other references to it. I cannot help obſerving, however, that Doctor Dawſon's plan bids fair to be more ſucceſsful than any that has as yet been ſuggeſted for the treatment of this diſeaſe. Bliſters, liberally applied, and particularly to the head, will, there can be no doubt, be of great utility, by promoting abſorption, and, at the ſame time, obviating ſpaſm: And this latter indication will be more fully anſwered by a prudent uſe of opium. The occaſional uſe of a laxative clyſter, and the avoiding every thing that may diſturb or reduce the patient, ſeems likewiſe to be no immaterial

part

part of the plan, and far preferable to the diuretics and purgatives which have been hitherto adopted.

II.

Obſervations on the Hepatitis. *By* Doctor John Clarke, *Phyſician at* Newcaſtle.

AGAINST inflammation of the liver reſiſting the uſual treatment, I have, for ſome years paſt, exhibited mercury with the greateſt ſucceſs. When veneſection, the repeated uſe of cooling purgatives, and a bliſter to the ſeat of pain, have no effect, I, without further heſitation, give mercury, nearly in the ſame manner as recommended in the Eaſt Indies *. One caſe, only, in this country, has happened in the circle of my practice, where the remedy failed, when adminiſtered before ſymptoms of ſuppuration appeared. During the mercurial courſe, I generally preſcribe a ſufficient number of the following drops at bed-time, to procure reſt:

℞ Tinct.

* Vide obſervations on the diſeaſes which prevail in the Eaſt Indies, page 267.

℞ Tinct. thebaic. drachmas duas
Vin. antimon. ſemunciam.

Of ſeveral caſes which I could adduce in ſupport of the efficacy of the above practice, I ſhall only ſubjoin the following, abridged from my regiſter, in which there was ſufficient reaſon to dread that ſuppuration had, in ſome degree, taken place, and which was remarkable for its obſtinacy, and the great quantity of mercury neceſſary to effect a cure.

Daniel Mackie, aged 20, was ſuddenly ſeized with a ſhivering fit, ſucceeded by a ſmart fever, pain in the region of the liver, and on the ſhoulder of the ſame ſide. A variety of judicious remedies were preſcribed by Mr Gibſon, one of the ſurgeons to the infirmary here, but without effect.

His complaints daily increaſing in violence, on the 30th of April 1776, I was conſulted. His diſeaſe was now of a month's ſtanding. He was much emaciated, his countenance ſullen and ghaſtly; his pulſe beat 112 ſtrokes in a minute, and he paſſed reſtleſs nights, and ſweated much. His belly was bound, his ſtools were of a white clay colour, and he made his urine in ſmall quantities. Upon examination, I perceived a very

large

large ſwelling in the right hypochondrium, extending to the ſcrobiculum cordis, and over all the epigaſtric region. The coſtae nothae in the right ſide were very much elevated, and the integument retained the impreſſion of the finger, above the two laſt ribs. The abdomen, below the navel, was very ſoft, and in no manner ſwelled. He had a conſtant pain in the region of the liver, and, when it was preſſed, he complained of the moſt exquiſite torture. He had ſtill ſome pain in his ſhoulder, and could not lie on the oppoſite ſide. A grain and a half of calomel were preſcribed night and morning, and two ſpoonfuls of the following mixture thrice a day:

℞ Aq. Menth. vulg. ſimp. uncias ſex
Sal. diuret. drachmas duas
Syr. ſcillit. uncias duas

May 2. Having had only one white ſtool ſince laſt viſit, he was directed to take four of the following pills night and morning, and to continue the diuretic mixture regularly:

℞ Calom. ppt. grana quinque.
Pulv. jalap. ſemidrachmam.
Mucil. gum. Arab. q. ſ. f. pil. octo.

3. The right hypochondrium was ſwelled, and the ſubcutaneous veins very turgid; and on very

very ſlight preſſure betwixt the laſt ribs, he complained of great pain. Notwithſtanding the uſe of the above remedies, he had no ſtool, and ſtill made little or no urine. A bolus, with five grains of calomel, was preſcribed at bed-time, and four ounces of the infuſum ſenae ſimplicis, with half an ounce of ſyrupus de rhamno, at ſeparate draughts in the morning. A volatile camphorated liniment was alſo directed to be applied to the part affected.

4. At night I viſited him, and found his pulſe 120, and feeble. He had only one ſtool from his medicines, but made his urine in greater quantities. For five nights paſt he had ſweated much, but had got little or no ſleep. The diuretic mixture and the pills, with jalap and calomel, were repeated, and a ſufficient number of the following drops, to procure reſt, were ordered to be taken every night at bed-time, in a little barley water:

℞ Spir. nit. dul. drachmas duas.
Tinct. theb. drachmas duas. M.

6. Had ſome reſt laſt night, makes his urine very freely, and had one ſtool, ſtill white; ſwelling the ſame.

7.

7. The pills were continued, and a ſpoonful of ſquill wine was ordered three times a day, as he became tired of the diuretic mixture.

10. Belly regular; makes his urine in proper quantities. In other reſpects no alteration. Four grains of calomel were directed to be taken regularly every night and morning.

12. Being much tormented with an acute pain betwixt the laſt falſe ribs on the right ſide, eight ounces of blood were drawn from the arm, which was ſizy. The calomel was continued; and, as it did not keep him ſufficiently open, a purging draught, with inf. ſenae and ſal. polychreſt. was directed in the morning.

13. In the morning the ſwelling appeared much ſubſided. At night he had three ſtools from the purgative.

15. The pain in the region of the liver being very ſevere, he was bled to ſix ounces. The calomel was continued.

22. The tumour much ſubſided. The calomel gives him a ſtool in the day, which has now a bilious appearance.

28. He has continued the calomel with little or no interruption. He has now ſome ſymp-

toms of an approaching ſalivation. Swelling almoſt totally gone; but he has ſtill pain in the region of the liver when preſſed.

June 1. For three days paſt he has had a moderate ſalivation. The ſweating has left him, and he now begins to have ſome appetite.

In a fortnight, though weak, he was able to uſe a little exerciſe. The ſwelling was totally diſcuſſed; but, as he complained of a dull pain, at times, in the region of the liver, a ſeton was made near the parts affected. He went into the country for the benefit of the air, and of a milk diet, and, in a month, returned in perfect health.

III.

An account of a large quantity of Blood evacuated by ſtool. *By* Doctor William Scot, Phyſician, Hawick, Roxburghſhire.

A Man between thirty and forty years of age, of a middle ſize, and of a robuſt conſtitution, by a fall from a horſe, hurt his right ſide, but thought himſelf little the worſe. Frequently after he was troubled with colick pains, which he imputed

imputed to wind. Coming home late at night, about two months after the fall, he was ſeized with one of them, which increaſed every hour, without vomiting or purging; but he complained of a violent pain about the umbilicus, and all that region. Upon ſending to me, I ordered emollient injections, and an anodyne julep, which preſently gave him eaſe. Next day I viſited him, found him eaſy, ordered a doſe of ſalts, manna, and rhubarb, which operated very well. Two days after, he came from his own houſe, three miles diſtant, to ſee me; but not finding me at home, and being ſomewhat out of order, in returning, he was ſeized with a pain all through his belly, and was, with great difficulty, carried home on horſeback. That night he had the injections and julep renewed, which again relieved him. The ſecond injection brought off ſome hardened excrements and ſlime. Immediately after this, he paſſed by ſtool near two pounds of pure blood, and he had a number of bloody ſtools all that night. Next day when I ſaw him, ſome bloody diſcharge ſtill continued, but mixed with excrements. I ordered a cordial julep, and two days after renewed the purgative. It was repeated two days after this, and freed him of all his complaints. He has kept

well ever ſince, and now it is ſeveral years ſince he was ſubjected to this affection.

IV.

An account of the Diſſection of an extraordinary Tumour ariſing from the fifth and ſixth Ribs. *By* Mr Samuel Gillam Mills, Surgeon *at* Greenwich *in* Kent. *Communicated to* Doctor Duncan.

TOWARD the latter end of the year 1775, Elizabeth Marſh applied to me for relief. Her complaints were a ſhortneſs of breathing, a cough, great pain at times in her ſtomach, but conſtantly in her left ſide, from whence proceeded a tumour of an extraordinary magnitude. The poor woman informed me ſhe had fallen, near thirteen years before, down a pair of ſtairs, and received a very violent blow on her ſide from the edge of a pail; ſince that time, ſhe had continually felt, on the part ſtruck, great pain, which was at times more or leſs ſevere. Six years after the accident, ſhe was ſenſible of an external

external tumefaction; ſhe then diſcerned a ſmall tumour, which ſlowly and inſenſibly increaſed, ſo that, at the expiration of three years, it was ſuppoſed to be near the ſize of a large egg. From this period, to November 1775, (a ſpace of five years), it had become ſo very bulky, that, from its weight alone, ſhe was incapable of doing her uſual buſineſs. At this time it extended from the fourth rib, (reckoning from the clavicle), to the criſta of the ileum, on which it ſeemed to reſt. Its extent, croſs-way, was about two inches diſtance from the two vertebrae that articulate with the fifth and ſixth ribs, to the cartilages that unite thoſe ribs to the ſternum. The whole tumour was unequal on its ſurface, of an irregular form, and felt of a firm hard texture. During the progreſs of this extraordinary tumour, the patient's health gradually declined. November 20th 1776, ſhe died, and the day after I had permiſſion to inſpect the body.

On removing the integuments, the ſurface of the tumour ſeemed ſtudded over with knobs of a glaſſy, horn-like appearance, but eaſily divided by the knife. On diſſection, I found the whole tumour to originate from the fifth and ſixth ribs. The fourth and ſeventh ribs were in

a ſound ſtate. I divided the cartilages that connect the fourth, fifth, and ſixth ribs to the ſternum, and forced the ribs backwards, ſo as to procure an inſide view of the thorax, the cavity of which I found to be much diminiſhed by the intruſion of the diſeaſe, and it contained about a pint of bloody ſerum. The pleura, throughout the left ſide, was exceedingly thickened, and almoſt inſeparably adhered to the tumour. The heart was thruſt under the ſternum, the lungs were conſiderably diminiſhed, and a ſmall portion ſo firmly attached to the pleura, that it was with difficulty ſeparated. Toward the lower part of the thorax, the tumour preſſed upon the diaphragm and ſtomach. On ſeparating the fifth and ſixth ribs from the back, the whole diſeaſe was removed, and weighed fourteen pounds. On cutting into its ſubſtance, there iſſued from the center, and from that part that had lain pendent towards the ſtomach, a gelatinous fluid. The reſt of the tumour was compoſed of a ſubſtance exactly reſembling an incompleat callus, of an uniform firmneſs. From the exterior parts, to the center, was a regular progreſs from the firm hard texture to the gelatinous fluid. On cleaning the fifth rib, which alone I had leave to

take

take away, and from which the greateſt part of the tumour ſprung, no veſtige of a fracture could be diſcerned. The perioſteum was deſtroyed as far as the rib was diſeaſed, which was nearly its whole extent; the internal ſurface of the rib was rough; the external ſurface was, (as far as it was diſeaſed), ſo connected to the callus as to form a perfect union.

SECT. III.

Medical News.

DOCTOR Matthew Guthrie of St Peterſburgh, in a letter to Dr Duncan, gives the following account of a remedy which is uſed in Siberia againſt gouty and rheumatic affections.

"Permit me to give you an account of a plant which has been long uſed in Siberia for different diſeaſes, but in arthritical diſorders with very great ſucceſs, and alſo in caſes of rheumatiſm. I ſend you, at the ſame time, a ſmall bag of the dried plant, to try its powers in your part of the world.

"It is the Rhododendron chryſanthemum, nova ſpecies, belonging to the claſs of Decandria, diſcovered by my learned friend Profeſſor Pallas, in

in his tour through Siberia. This Alpine ſhrub grows near the tops of the high mountains named Sajanes, in the neighbourhood of the river Jeniſe in Siberia, and delights in the ſkirts of the ſnow covered ſummits, above the region that produces trees.

"When the inhabitants of that country mean to exhibit it in arthritic or rheumatic diſorders, they take about two drams of the dried ſhrub, ſtalk and leaves, with nine or ten ounces of boiling water, and putting them into an earthen pot, they lute on the head, and place them in an oven during the night. This infuſion, for it is not allowed to boil, the ſick man drinks next morning for a doſe. It occaſions heat, together with a degree of intoxication, reſembling the effects of ſpirituous liquors, and a ſingular kind of uneaſy ſenſation in the parts affected, accompanied with a ſort of vermiculatio, which is likewiſe confined to the diſeaſed parts. The patient is not permitted to quench the thirſt which this medicine occaſions, as fluids, particularly cold water, produce vomiting, which leſſens the power of the ſpecific. In a few hours, however, all the diſagreeable effects of the doſe diſappear, commonly with two or three ſtools. The patient then

then finds himſelf greatly relieved of his diſorder, and has ſeldom occaſion to repeat the medicine above two or three times to compleat a cure.

"The inhabitants of Siberia call this ſhrub Chei, or Tea, from their drinking, in common, a weak infuſion of it, as we do the Chineſe plant of that name. This practice ſhews, that the plant, uſed in ſmall quantities, muſt be innocent.

"Profeſſor Pallas informs me, that he ſent, ſome time ago, ſome of this ſhrub dried to Profeſſor Koelpin at Stetin; and he ſhewed me a letter from that gentleman, where he ſays, that he has given it with ſucceſs in ſeveral caſes, particularly in what he calls the Arthritica Venerea, with a tophus arthriticus on the carpus, and it produced a compleat cure.

"It muſt be remarked, that the doſe which theſe hardy Siberians take, who are alſo in the habit of drinking it as tea, would, in all probability, be too ſtrong for our countrymen; however, it is a medicine which we may certainly give with ſafety, beginning with ſmall doſes. And the uſeful public charity of which you have the direction, ſeems to afford ſufficient opportunities of trying its virtues."

Doctor

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Doctor Johnſtone, Phyſician at Kidderminſter, in a letter to his ſon, Mr Edward Johnſtone, ſtudent of medicine at Edinburgh, gives the following very ſingular account of the effect of an obſtinate ſuppreſſion of urine.

"Mr W——— died here lately, in the 74th year of his age. He had been much ſubject to attacks of the gravel, and had long made water with difficulty and pain.

"In his laſt illneſs, he had a total ſuppreſſion of urine, and of ſtools. Delirium ſoon followed, and he died in about a week afterwards.

"Some days before his death, his ſkin was all over as white as if it had been powdered. This white duſt being gathered, was found to have the taſte of crude ſal ammoniac. The bladder was found full of coagulated blood.

"The ſecretion of urine being here prevented, the perſpirable matter became ſo much ſuperſaturated with the ammoniacal ſalt, that it cryſtalized on the ſkin. I have attended many other patients who died from ſuppreſſion of urine, but I never obſerved this circumſtance before."

In

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In a former number of the Commentaries, we mentioned the eſtabliſhment of a Medical Society at Paris, by royal authority. And we gave a liſt of the names of ſeveral eminent Britiſh practitioners who had been admitted members of it. The following copy of a diploma from them, which has lately been ſent to Doctor Duncan, will ſhew the extenſive and liberal views with which this ſociety is eſtabliſhed, and, at the ſame time, it may give ſome idea of the beneficial effects which may reſult from this and ſimilar inſtitutions.

Talis eſt rerum naturalium inter ſe connexio, Doctor illuſtriſſime, nullus ut in earum ſtudio progreſſus fieri poſſit quamdiu benevolos inter illorum cultores non exiſtet mutua voluntas, ſeſe reciprocis adjuvandi conſiliis et obſervationibus. Hoc effatum, in Medicina praeſertim certiſſimum, quotidiana demonſtrat experientia; quando quidem Medicinam temporis filiam celebrent authores in eo meritiſſime. Nil igitur optatius quam ſi variarum provinciarum medicis, quidquid imperiorum fortuna moliatur, ſtricto ſemper nunquamque ſatis colendo veritatis, amicitiae, exiſtimationiſque nexu devinctis, quodcumque notatu dignum

dignum viderit unus, aliis aperiat et profiteatur. Tunc omne quod habebitur in uno climate noxium vel utile erit et in omnibus. Talibus rationum momentis perculſus, Rex Galliarum Chriſtianiſſimus, die ſecundo menſis Aprilis, anni 1777, in Sanctiori conſilio ſedens, Medicam Societatem eo fine creavit, ut cum celeberrimis et praeſtantiſſimis totius Europae medicis haud interruptum inſtituat commercium, optimas colligat obſervationes, Epidemicorum omnium imperii cujuſcunque flagellorum reproductioni ſedulo proſpiciat, ſicque medicina perfectior evadat ſimul et utilior. Poſtquam autem Regia Societas Medica Pariſienſis, Regicolarum Socios ut correſpondentes ſufficienti numero ſibi ſumpſerit, extraneos laboris ſui coadjutores acquirendos etiam hodie deſiderat. Ipſoſque in duplice claſſe pro celebritatis et meritorum vario gradu collocandos eſſe ſancivit. Erant igitur inter peregrinos, 1*mo*, Socii, 2*do*, Correſpondentes. Te vero in Praxi Medica verſatiſſimum, in Theoria perſpicaciſſimum, Socium uno ore proclamavit Regia Societas. Tecum dulci conſuetudine jungi, tuis ditari opibus vehementer exoptat, voluitque perpetuum ſuum Praeſidem promptiſſime haec conſociationis teſtimonia tibi praeſtare.

Quod

Quod feci lubenter
Obſequentiſſimus tuus Collega
Laſſone
Regiae Societatis Praeſes Perpetuus.

Praeſentes autem literas R. Societatis deliberationibus et commentariis conſentaneas, ejuſque ſigillo munitas, Nomine Celeberrimi Duncan hac die 8vo menſis Auguſti 1778, conſcriptas ac miſſas fuiſſe obteſtor.

Vicq d'Azyr.
R. Soc. Secretus Perpetuus.

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While it appears from the article mentioned above, that a ſpirit for collecting uſeful medical diſcoveries has led to the eſtabliſhment of a new inſtitution in the metropolis of France, on the moſt liberal footing, the ſame deſire to extend the improvement of a ſcience of the higheſt utility to mankind, has had a like effect in other kingdoms of Europe. And of the ardent zeal which ſubſiſts for medical improvements in Denmark, ſome idea may be formed from the diploma granted to foreign members, by the medical ſociety of Copenhagen, of which the following is a copy.

Societas

Societas Medica Havnienſis ſedula cura, cujus ſpecimina una cum inſtituti ratione in publicum prodierunt, in artis augmentum incumbens, propriis viribus minus confidens, id potiſſimum in votis habet, ut ab ingenuis cordatiſque et clare doctis viris, quotcunque eodem ſtudio ardent, et communicandi fervore conſpirant, amicam et correſpondentem operam ſolemni invitatione obtinere et exorare valet. Unanimi itaque deſiderio ducta virum celeberrimum, et in arte illuſtranda feliciſſimum Andream Duncan, Medicinae Doctorem Edinburgenſem experientiſſimum, humaniſſime rogat et obteſtatur, ut ſodalis nomen benevole accipere, ſymboloque interdum ad ſe tranſmiſſo, nova ſua acta ditare et exornare velit.

Dabat in pleniore conſeſſu d. xii. Aprilis M,DCC,LXXVI.

Johannis Clemens Tode, M. D.
Et Profeſſor Regius,
Aulae Regiae Medicus
Societati ab Epiſtolis
Ad Exteros.

* * * *

A gentleman who can be actuated by no other motive but an earneſt deſire of diffuſing the knowledge and extending the utility of an important diſcovery in medicine, has printed, in the form

form of a letter, the following obſervations reſpecting the ſolvent power of fixed air on the urinary calculus. Among other people to whom this letter has been circulated, a copy has been ſent to the editor of the Medical Commentaries, who flatters himſelf that the reprinting of it in this publication will not be unacceptable to his readers.

A review of the diſcovery of the ſolvent powers of fixed air on the urinary calculus; of the aplication of this remedy to other diſorders of the kidneys and bladder; and of the ſucceſs which has attended the uſe of it.

'A late amiable and learned philoſopher, (the Rev. Dr Hales), whoſe experimental inquiries were generally directed to the good of his fellow-creatures, firſt obſerved the lithontriptic powers of certain fermenting mixtures: But he acknowledges the impracticability of injecting ſuch mixtures into the bladder with ſufficient frequency for the purpoſe of ſolution; and he recites his experiments chiefly with a view to engage others in the ſame laudable and important purſuit. The ſubject, however, ſunk into oblivion; and no farther attempts of this kind were made, till the notice of the public was again excited towards the properties

perties and uſes of factitious air, by the writings of various learned and ingenious men. At this time, 1774, Dr Saunders, a phyſician in London, eminent for his knowledge of chemiſtry, applied himſelf to proſecute the experiments which Dr Hales had begun; and he found, that the ſolvent power, aſcribed to the fermenting mixtures, reſided only in the fixed air ſeparated during the act of effervescence. Dr Percival heard an imperfect account of this diſcovery. His curioſity was excited: The acquiſition of a remedy for the ſtone was highly intereſting to humanity; and he engaged with ardour in the purſuit of it, though ignorant of the manner in which Dr Saunders had conducted his trials. He recollected that Dr Black and Mr Cavendiſh had proved the ſolubility of various earthy bodies in water, either by abſtracting from, or ſuper-adding to the fixed air which they contain: And, as the human calculus is diſſolved in the former way by lime water and the cauſtic alkali, it appeared highly probable that the like effect would be produced, in the ſame ſubſtance, by the latter mode of operation. Analogy ſeemed favourable to the hypotheſis; and his experiments have, in the fulleſt manner, confirmed it.

'In the year 1776, a very ingenious phyſician at Bath (Dr Falconer) engaged in the ſame inquiry; and the reſults of his trials coincide with thoſe related by Dr Percival. Perhaps it may be doubted whether fixed air can be conveyed, by the urinary courſe of circulation, to the kidneys and bladder. In an elaſtic ſtate, it certainly cannot; but diſſolved in water it may paſs through the vaſcular ſyſtem, without creating the leaſt diſturbance or diſorder; and, by its diuretic qualities, will be powerfully determined to the urinary organs. Dr Percival has given a deciſive proof of the truth of this obſervation. For a young gentleman, Mr Thomas Smith, at his deſire, drank large quantities of mephitic water daily, during the ſpace of a fortnight. And, whilſt he continued this courſe, his urine was ſtrongly impregnated with fixed air, as appeared not only from the precipitation which it produced in lime water *, but alſo from the bubbles which it copiouſly emitted, when placed under the receiver of an air pump, and from the ſolution of ſeveral urinary ſtones which were immerſed in it.

'The

* The precipitation of lime from lime water, by urine, is mentioned by the late Dr Whytt, and confirmed by Dr Macbride.

'The following paragraphs are extracted from Dr Prieſtley's ſecond volume of experiments and obſervations on air.

'It might be queſtioned, whether the fixed 'air, contained in our aliment, can be con- 'veyed, by the courſe of circulation, into the 'blood, and by that means impregnate the 'urine. I have found, however, that it may do 'it; having more than once expelled, from a 'quantity of freſh made urine, by means of heat, 'about one fifth of its bulk of pure fixed air, as 'appeared by its precipitating lime in lime water, 'and being almoſt wholly abſorbed by water; 'and yet a very good air-pump did not diſcover 'that it contained any air at all.

'It muſt be obſerved, however, that it requi- 'red ſeveral hours to expel this air by heat; and, 'after the proceſs, there was a conſiderable whi- 'tiſh ſediment at the bottom of the veſſel. This 'was probably ſome calcareous matter, with 'which the fixed air had been united; and by 'this fixed air, the calcareous matter, which 'would otherwiſe have formed a ſtone or gravel, 'may have been held in ſolution. And, there- 'fore, drinking water, impregnated with fixed 'air, may, by impregnating the urine, enable it 'to diſſolve calcareous matters better than it

'would otherwiſe have done; and may, there-
'fore, be a means of preventing or diſſolving the
'ſtone in the bladder, agreeable to the propoſal
'of my friend Dr Percival.'

'Thus has the diſcovery been eſtabliſhed of a new lithontriptic medicine, that is at once grateful to the palate, ſtrengthening to the ſtomach, and ſalutary to the whole ſyſtem. Lime water often nauſeates the patient, deſtroys his appetite, and creates the heart-burn. And the ſoap-ley is ſo cauſtic and acrimonious, that it can be taken only in the ſmalleſt quantity; frequently produces bloody urine, and aggravates the tortures it is intended to relieve. Both theſe remedies, alſo, require a very ſtrict regimen of diet; and their qualities are liable to be changed either by acidity, or the fermentation of our food in the firſt paſſages. But the mephitic water may be drunk in the largeſt quantity, without ſatiety or inconvenience: It requires no reſtrictions in diet, and its medicinal virtues will be undiminiſhed in the ſtomach or bowels.

'As the vapour of chalk and oil of vitriol have been found ſo efficacious in correcting the ſanies, and abating the pain of foul ulcers, when externally applied, we may reaſonably preſume that the internal

internal uſe of the ſame remedy will prove beneficial in ſimilar affections of the urinary paſſages. Such complaints frequently occur in practice, and may ariſe either from calculi in the kidneys and bladder; from the receſſion of ſcorbutic eruptions; from the venereal diſeaſe; from ſtrains, contuſions, or various other cauſes. And water, impregnated with fixed air, ſeems well adapted, by its diuretic, healing, and antiſeptic powers, to waſh off and ſweeten the acrid matter; to abate the defluxion on the mucous membrane; to contract the flabby edges of the ulcers, and to diſpoſe them to a ſpeedy granulation. If the pain, inflammation, and abſorption of the pus have excited a hectic fever, the patient may drink plentifully of Seltzer water, which is of a cooling quality, although it abounds with mephitic air: Or a ſmall quantity of Rochelle ſalt may be added to the mineral water artificially prepared. Thus will the increaſed action of the heart and arteries, which may ariſe from the ſtimulus of the fixed air, be entirely obviated, without the leaſt diminution of its medicinal powers.

'Theſe obſervations on the medicinal and lithontriptic qualities of fixed air, may now be regarded as practical truths, which have been eſta-

bliſhed by experience. 'Since the publication 'of my experiments,' ſays Dr Percival, in a letter to the editor of the Medical Commentaries, 'I have had the moſt incontrovertible evidence, 'that this remedy alleviates the ſymptoms both 'of the ſtone and gravel; that it acts as a power-'ful diuretic; diſcharges fabulous concretions; 'heals the ulcerations in the urinary paſſages; in-'vigorates the organs of digeſtion; and ſtrengthens 'the whole ſyſtem. In ſaying ſo much, I am war-'ranted by my own experience, which has been 'confirmed by ſimilar obſervations, tranſmitted 'to me from various parts of England. But you 'muſt be ſenſible how difficult it is to aſcertain 'the ſolution of a ſtone in the bladder by any 'medicine. And you will not, therefore, be 'ſurpriſed, that I have yet ſeen no deciſive caſe, 'in the circle of my practice, of the compleat ef-'ficacy of this new ſolvent. A phyſician of e-'minence in London has, however, been more 'ſucceſsful; having brought away, (to uſe his 'his own words in a letter to me), in ſmall frag-'ments, and in a whitiſh, chalk-like ſubſtance, a 'ſtone from the urinary bladder, by adminiſter-'ing fixed air to his patient, during the ſpace of 'a few weeks.' The hiſtory of this caſe has been

been offered to the public by Dr Hulme, with ſeveral others, which, though leſs deciſive and important, tend to evince the lithontriptic action of fixed air. And another reſpectable phyſician, Dr Saunders, has lately given the following teſtimony of the ſame remedy. 'I am fully con-'vinced, from a variety of trials, that water, im-'pregnated with the mephitic acid, is carried 'unchanged to the human bladder; and that 'this remedy has done great ſervice in calculous 'complaints.' But, when fixed air is employed as a diſſolvent of the ſtone, the uſe of it muſt generally be continued for many months. Relief is often obtained by it in a ſhorter time; but few caſes will occur like the one recorded by Dr Hulme, in which the calculus appears to have been of a remarkable ſoft and friable texture. The reputation of the moſt efficacious remedies is frequently injured by the unwarrantable expectations of mankind concerning them. And, in chronic diſorders, many a cure is deſpaired of, which might be accompliſhed by more patience in the ſick, and greater perſeverance in the practitioner.

'Human calculi vary in their ſtructure and compoſition. For it appears, from the experi-

ments of Dr Percival, that calcination converts ſome into quick lime; that others are conſumed entirely in the fire; and that a third ſort yield, after burning, an inſipid earthy *reſiduum*, which is incapable of giving any impregnation to water.

'Theſe facts explain the obſervation of Dr Ambroſe Dawſon, that ſome ſtones which are ſoluble in an alkaline, are but little affected by an acid menſtruum; whilſt others will reſiſt the action of an alkali, and yet be readily diſſolved by an acid. Even in the ſame ſubject, he remarks, there may be found calculi of oppoſite kinds; ſome of which will diſſolve in acids, ſome in alkalis, and ſome in neither. This judicious writer has, therefore, recommended an attention to the fragments, ſcales, or films, which the ſtone in the kidneys or bladder may caſt off; and alſo to the contents and ſediment of the urine, that a diſcovery may be made, whether the proper ſolvent be an acid or an alkaline menſtruum. If it appear to be the former, the ſpiritus vitrioli tenuis may be uſed, in conjunction with mephitic water, to which it will be no ungrateful or unſalutary addition. And there is reaſon to believe that this acid may be conveyed to the kidneys, without any conſiderable change in its properties.

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It is not ſubject to fermentation, and is diſpoſed to paſs off by urine. The ſucceſsful exhibition of it in the itch ſeems to evince, that it is capable of being received into the vaſcular ſyſtem, and of being excreted, probably in a volatiliſed ſtate, by the pores of the ſkin. Even when given to nurſes labouring under this complaint, it is ſaid both to cure them, and the children which they ſuckle.

'Sir John Pringle has known great benefit to accrue from the uſe of honey, in caſes of the gravel, or when the kidneys are loaded with ſand. He directs about a pound and a quarter of this remedy to be taken every week; and, as it perfectly coincides with the artificial mineral water, being diuretic, and containing much fixed air, he has recommended to Dr Percival the trial of them together.

Directions for adminiſtering fixed air in caſes of the ſtone or gravel.

'Give the patient, every ſixth hour, three ounces of the aqua mephitica alkalina, prepared according to the directions of Mr Bewley, (ſee Dr Prieſtley's 2d vol. on air, page 346.), and ſweeten it to the taſte with honey. Direct him to drink, at proper intervals, a glaſs of the mephitic water acidulated

acidulated with the ſpiritus vitrioli tenuis, and ſweetened with honey. Two or three pints of this beverage ſhould be conſumed in 24 hours; and, indeed, it is ſo pleaſant, that it may be taken at meals, with or without the addition of a little wine. In lieu of the mephitic alkaline water, half a dram of ſalt of tartar may be diſſolved in three ounces of ſimple water, ſweetened to the palate with honey, to which half an ounce of freſh lemon-juice muſt be added, at the time when the draught is ſwallowed. The lemon-juice will neutralize about one ſcruple of the alkali, expelling the fixed air which it contained; and this fixed air will combine partly with the water, and partly with the remaining ten grains of unneutralized alkali.

'If honey agree with the bowels of the patient, it may be taken at pleaſure.

'Cyder, perry, briſk fermenting wines, and bottled beer, all contain much fixed air, and may therefore be temperately uſed, as they coincide with the courſe here directed. If the patient be coſtive, magneſia alba uncalcined will be the beſt purgative. If he be too lax, the chalk julep of the London Diſpenſatory may be preſcribed.

'N.B.

'N. B. This paper has been compiled chiefly from the following books: Dr Hales's Statical Eſſays, vol. 2d; Dr Percival's Philoſophical, Medical, and Experimental Eſſays; Dr Prieſtley's Obſervations on Air, vol. 2d; Dr Saunders's letter to Dr Percival; Dr Falconer's Experiments on fixable air; the Medical and Philoſophical Commentaries of Edinburgh, vol 5th, part 2d; and Dr Hulme's Safe and Eaſy Remedy for the Stone and Gravel.

'If the editor ſhall happily contribute to diffuſe the knowledge, and extend the uſe of the ſolvent here recommended, his purpoſe will be fully anſwered.'

Sept. 5th, 1778.

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MEDICAL LECTURES.

I. On Thurſday the 29th of October, Doctor Duncan will begin, at Edinburgh, his courſe of lectures on the Theory and Practice of Medicine. This courſe is chiefly intended for affording to thoſe who are but beginning the ſtudy of medicine, a proper introduction for afterwards hearing lectures on the different branches of that art on a more extended ſcale. But, although it be principally meant as an introductory courſe, thoſe who are farther advanced in the ſtudy will have an opportunity

portunity of hearing new opinions delivered, reſpecting many doubtful, yet important queſtions in medicine.

II. On Saturday the 31ſt of October, Doctor Duncan will begin a courſe of lectures on the caſes of patients ſubjected to Chronical Diſeaſes. The moſt important caſes which occur at the Diſpenſary, during the winter-ſeſſion, will be ſelected as the ſubject of theſe lectures. And, with reſpect to each, ſuch remarks will be offered on the hiſtory, theory, and practice, as ſeem principally calculated to render it an uſeful example in the future treatment of ſimilar caſes.

III. About the beginning of May, Doctor Duncan and Doctor Webſter, Phyſicians to the Diſpenſary, will begin their courſe of Caſe-Lectures for the ſummer-ſeſſion, and of remarks on the Pharmacopoeias of the Colleges of Phyſicians of London and Edinburgh.

SECT.

SECT. IV.

List of New Books.

PHILOSOPHICAL Tranſactions of the Royal Society of London, vol. LXVII. For the year 1777. Part 2d. 4to, London.

A treatiſe on the various kinds of permanently elaſtic fluids, or gaſes. 8vo, London.

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Mineralogia Cornubienſis. A treatiſe on minerals, mines, and mining; containing the theo-

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ry and natural hiſtory of ſtrata, fiſſures, and loads, with the method of diſcovering and working of tin, copper, and lead mines, and of cleanſing and metalizing their products; ſhewing each particular proceſs of dreſſing, aſſaying, and ſmelting the ores. To which is added an explanation of the terms and idioms of miners. By W. Pryce of Redruth in Cornwall. Fol. London.

Obſervations made during a voyage round the world, on phyſical geography, natural hiſtory, and ethic philoſophy. Eſpecially on, *1ſt*, The earth and its ſtrata; *2d*, Water and the ocean; *3d*, The atmoſphere; *4th*, The changes of the globe; *5th*, Organic bodies; and, *6th*, The human ſpecies. By John Reynold Foſter, L.L.D. F.R.S. and S.A. 4to, London.

A candid examination of what hath been advanced on the colic of Poitou and Devonſhire, with remarks on the moſt probable, and experiments intended to aſcertain the true cauſes of the gout. By James Hardy, M.D. of Barnſtaple Devonſhire. 8vo, London.

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of thoſe parts. By John Hunter, Surgeon extraordinary to the King, and F. R. S. 4to, London.

A ſafe and eaſy remedy propoſed for the relief of the ſtone and gravel, the ſcurvy, gout, &c. and for the deſtruction of worms in the human body. By Nathaniel Hulme, M. D. 4to, London.

Farther obſervations on the effects of calomel and camphire. By Daniel Lyſons, M. D. 8vo, London,

Calendarium Medicum, ad uſum celeberrimae facultatis, in quo habentur laudabiles ipſius uſus, et conſuetudines. Quaeſtiones omnes per annum academicum agitatae, aliaque quam plurima tum publice tum privata celebrata. Adduntur nomina Doctorum, actu regentium, et ſeries Decanorum ejuſdem facultatis. Edente Theodoro Petro Cruchot, majori facultatis apparitiore et ſcriba. 12mo, Paris.

Deſcription et traitement d'une affection catarrhale epidémique obſervée en 1732, parfaitement ſemblable a celle qui s'etend journellement en Europe, vulgairement appellée la Grippe. 12mo, Paris.

Lettre

Lettre de M. Carrere, Profeſſeur Royal emerite de Medecine, Cenſeur Royal, &c. a M. Bacher, Medecin de la faculté de Paris. 8vo, Paris.

Codex Phyſiologicus quam ad uſus domeſticos, ac in favorem auditorum ſuorum edidit N. F. Rougnon, Regius Medicinae Anteceſſor Biſuntinus. 8vo, Venſontione.

Lettra ſull' aria fiſſa, &c. per Signore Andria. 4to, Naples.

Diſſertationes medicae inaugurales, quas ex auctoritate reverendi admodum viri Gulielmi Robertſon, S. S. T. P. Academiae Edinburgenae praefecti; nec non ampliſſimi ſenatus academici conſenſu, et nobiliſſimae facultatis medicae decreto, pro gradu doctoratus, ſummiſque in medicina honoribus et privilegiis rite et legitime conſequendis; eruditorum examini ſubjecerunt, ad diem 12. Septembris, 1778,

Samuel Byam Athill, Antiguenſis, De Uſu Aquae Frigidae Externo.

Gulielmus Bouſh, Virginienſis, De Hyſteria.

Edvardus Brereton, Hibernus, De Scorbuto.

Alexander Campbell, Britannus, De Acido Vitriolico.

Hugo Dougall, Scoto Britannus, De Haemorrhagiis.

Bartholomaeus

Bartholomaeus Dillon, Hibernus, De Rheumatiſmo Acuto.

Gulielmus Drennan, Hibernus, De Venaeſectione in Febribus continuis.

Thomas Fowler, Britannus, De methodo medendi Variolam praecipue auxilio Mercurii.

Gulielmus Fearne, Anglo-Britannus, De Typho, vel Febre Nervoſa.

Jacobus Johnſton, Britannus, De Dyſenteria.

Gulielmus Keir, Britannus, De Attractione Chemica.

Simon Lanphier, Hibernus, De Calculo Renum et Veſicae.

Samuel Moore, Hibernus, De Rachitide.

Joannes Nankivell, Britannus, De Catarrho.

Alexander Scott, Hibernus, De Hydrope.

Robertus Scott, Hibernus, De Hepatitide.

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WE have now brought the fifth volume of this work to a concluſion. And, throughout the whole, it has been our ſole aim to preſent our readers with a conciſe view of the principal diſcoveries and improvements in medicine, which have been made for ſeveral years paſt. While, therefore, it has already ſerved as

a means of giving early intelligence, it may hereafter be of great utility, as affording a compendious view of medical inventions.

As theſe, however, are now extended through five volumes, there may be ſome difficulty, notwithſtanding the aid of an index to each, in readily finding particular articles. To obviate this difficulty, the preſent table of contents is intended. We are hopeful that it will, in ſome meaſure, render the product of our firſt luſtrum one compleat and connected work. Even to thoſe who poſſeſs extenſive liberaries of modern publications, theſe volumes may yet ſerve as a convenient and uſeful repoſitory of medical literature, while ſtill greater benefit muſt reſult from them to ſuch as are deprived of that advantage.

But, beſides articles extracted from works of merit, this collection is now enriched with many original papers, containing information highly intereſting in the practice of phyſic; and not a few of them are communications from men whoſe names are of the firſt eminence in the line of medicine. A liſt of theſe, therefore, cannot fail to be highly uſeful in facilitating the inquiry of the induſtrious practitioner.

To

To render this general index ſtill more uſeful, we have alſo added an alphabetical liſt of the moſt important articles contained in thoſe ſections which bear the title of Medical News. For, although ſome of theſe articles ceaſe to be any longer intereſting, yet there are others which contain the beſt accounts yet extant of ingenious opinions ſuggeſted by men of the firſt abilities. And even although theſe doctrines ſhould afterwards be publiſhed at greater length, yet the account given in this work will ſtill ſerve to aſcertain the date of the diſcovery.

Theſe obſervations will ſufficiently explain to our readers the nature and deſign of this addition to our fifth volume. With the commencement of the ſixth volume we ſhall begin a new ſeries of numbers. And we flatter ourſelves, that the continuance of unremitting induſtry will merit and obtain from the public the ſame ſucceſsful reception with which our former labours have been rewarded.

An

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