MEDICAL
AND
PHILOSOPHICAL
COMMENTARIES.

By a Society in Edinburgh.

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


VOLUME FIFTH.

PART I.

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МЕТЧИК
в 2 ЧАСТА.
ВТОРОЕ ИЗДАНИЕ.

Санкт-Петербург.
Типо-Торговая Компания.
1865.
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 administrante; non deesse
ei et in his quae toleranda crant patientiam, et in his quae agenda,
prudentiam.

SENECA.
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
P R E F A C E.

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.

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A 4. M E D I.
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
nately 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 debility on the whole of the functions, and parti-
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 increased, and continues so till it has had the effect of restoring the energy of the brain; of extending this energy to the extreme vessels; of restoring, therefore, their action; and thereby especially overcoming the spasm affecting them; upon the removing of which, the excretion of sweat, and other marks of the relaxation 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 morbid matter, so far as it is the foundation of the common doctrine of concotion and crisis.
another opinion,' says the Doctor, 'which has been very universally received is, that a noxious 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 expel this morbid matter, 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, however, although of as great antiquity as any of the records of physic now remaining, and although 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 terminating by sweat; and yet, at the same time, without any evidence or suspicion of morbid matter. There have been fevers suddenly cured by an haemorrhagy, so moderate as cannot carry out a matter diffused over the whole mass of blood; nor can we conceive how the morbid matter could be collected, or determined to pass off, by such an outlet as in that case
case is opened. Even supposing a morbidic
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 morbidic matter,
we by no means intend to refuse, that the cause
of fever frequently operates upon the fluids,
and particularly produces a putrefying 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
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I 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 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 reaction; 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 distinchtion 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 shew either an inflammatory irritation, or a weaker reaction. 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 synochea, 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.

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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 putrefaction of the fluids does take place in fevers. This putrefaction, however, often attends intermittents, as well
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 es-
tablised by marking the prevalence of those mo-
tions and symptoms. But the operation of the
re-action, or salutary efforts of nature, is still in-
volved 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 tenden-
cy to death in fevers. In order to this, we must
be acquainted with the causes of death in gene-
ral, and in fevers more particularly. The causes
of death, in general, are either direct or indirect.
The first are those which directly attack and de-
sroy the vital principle, as lodged in the nervous
system, or destroy the organs immediately con-
nected with it. The second are those which in-
terrupt such functions as are necessary to the cir-
culation 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
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Repeated violent excitments, 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 putrefactive 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-
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 sweatin-
ing frequently appears, but is seldom consider-
able; 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 chie-
fly 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
favour-
favourable symptoms on one critical day, that
we can announce a more intire solution on the
next following."

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

1st, To moderate the violence of reaction.
2d, To remove the causes, and obviate the ef-
fects of debility.
3d, To obviate or correct the tendency of the
fluids to putrefaction.

The remedies proposed for fulfilling these in-
dications, 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
      ια. External heat, or,
      ιβ. 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
   ι. The sense of thirst,
   ιε. Crudities, or corrupted humours in the stomach,
   ιγ. The preternatural retention of foeces,
   ιδ. 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. The...
M E D I C A L

a. Those remedies which determine to the surface,
as,
a. Diluents,
β. Neutral salts,
γ. Sudorifics,
δ. Emetics.
b. Those remedies named Antispasmodics,

B. External means, as
a. Blistering,
b. Warm bathing.

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

r. Supporting and increasing the action of the heart
and arteries, by
A. Tonics, as
a. Cold,
b. Tonic medicines, which are either,
aa. Foetid, as
aad. Saccharum saturni, &c. or,
β. Vegetable, as,
ax. Peruvian bark,
B. Stimulants, as,
a. Aromatics, &c.
b. Wine.

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

s. Avoiding the application of putrid or putrescent
matter, by
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 bedcloths 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. Reforming farther putrefaction, or obviating its effects, by
   Supporting the tone of the vessels, by
   Tonic remedies.
5. Moderating the violence of reaction, as in II. A. considered as a means of increasing putrefaction, as in I, C.

The
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. i. 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. i. 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 smallpox, and in continued fevers, shew, that the free admission of cool air to the body, is a powerful remedy in moderating the violence of reaction; 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. i. C. a. Blood-letting. When the violence of reaction, 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 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,
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. i. 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
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 em-
ployed with a great deal of caution, and this
cautions 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, notwith-
standing these doubts, and if, upon occasion, a
moderate evacuation, by purging, has appeared
useful, Doctor Cullen alleges, that it has only
proved so, by taking off the irritation of retained
focces, 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. y. Sudorifics. On this subject,
Doctor Cullen enters fully into the question con-
cerning 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-
C 2 ed
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 inflammatory
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. 3. 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 nausea 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 nauseating 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 tickness, nausea, and some, but not much, vomiting come on. With respect
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 re-
peated 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, how-
ever, produced by blisters, although it does not
affect the system in general, is so considerable as
to affect the neighbouring vessels; and the ma-
nifest 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
feated 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 communica-
tion of the blistered part with the rest of the skin;
and this, he observes, is illustrated by the effect
of blistering in cholic and dyseentery. Our author imagines, that *sinapis*, 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 ancients, 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
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 nature concise, the learned will proceed with reserve, 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 Heylham. 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 opinion
tion 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 symp-
toms.

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 ca-
nine tribe, great heat, putrid aliment, want of
water, worms lodged in different cavities or vis-
cera, 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 re-
marks, that putrid aliment, to a very great ex-
tent, is often taken by dogs without inconveni-
ence; and that, with little probability, it is as-
signed as a cause of madness, since, in this state,
it seems to be most agreeable to them. Respec-
ting 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 con-
siders the supposition of worms in different cavi-
ties 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, listlessness, 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. 1st, To expel the poison from the system as soon as possible. And, 2dly, Where this cannot be done, to destroy the activity of the virus.

Many of the most eminent practitioners, both ancient 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 Ormshill, our author tells us, consists of the following articles.
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.


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 everywhere demonstrate so much candour and judgment, as to deserve serious consideration. His additions consist of three parts. The first contains a list of
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 lift of the materia medica, Doctor Baldinger has belttowd 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, balfamum Tolulatum, flores caryophylli, convallaria, cornu cervi uftum, 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 the preparations, he thinks, that the tinctura rofarum 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 syrups 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 activity.
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 Dr. 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 chronic 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.

\[ \text{Pulv. rad. ipecac. } \frac{3}{4} \text{fs.} \]
\[ \text{Aurant. cura. } \frac{3}{4} \text{ij.} \]
\[ \text{Cream tart. } \frac{3}{4} \text{fs. ebul. cum} \]
\[ \text{Aq. font. } \frac{3}{4} \text{iv. Colat. adde} \]
\[ \text{Oxym. scill. } \frac{3}{4} \text{fs.} \]

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 dropical affections, the following vinous infusion of squills.

\[ \text{5i. Rad scil. recen. } \]
\[ \text{Cort. aurant.} \]
\[ \text{Calam aromat. } \]
\[ \text{Infunde cum vin. alb.} \]
\[ \text{ij. Digere per dies tres, et colat. adde} \]
\[ \text{Oxym. scill. } \]

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

\[ \text{5i. Pulv. cort. Peruv. opt. } \]
\[ \text{Rad gent. rub.} \]
\[ \text{Flav. cort. aurant. } \]
\[ \text{Sp. vin. Gal. } \]

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

B. Pulv. flav. aurant. cort.
     Rad. rhei. opt.
     Tart. tartar ³⁄₈ gr. xx. M. pro dist.

By the repeated use of this powder alone, he tells us, that many of the symptoms of hypochondrias 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 fæc-charum 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.

B. Sach. alb.
     Bol. alb. vel rub.
     Cream tart. ³⁄₈ 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 pilulæ 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.

zą. Gum. ammon.

Scil. recent. sing. ʒ̣̝̏̊ṣ. Contunde simul in mortario, et adde.

Cardam. min. trit. ʒ̣̝̏̊ṣ. f. pil. cum.

Balæ. copaiv. q. s.

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

zą. Pulv.
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Pulv. rad. scil. ʒfs.
Sulp. antimon. aur. tert. praecep.
Sal. vol. succin. 22. ʒi.
Extrait. elater. ʒfs.
Ol. desfil. 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 spongy gums, attended with looseness of the teeth, he recommends the following liniment.

Ter. catech.
Sang. dracon. 22. p. ae.
Spir. cochlear. q. f. ut leni digestione solvi possint, et f. linim. spissior. constat. cum penicillo applicandi.

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,
fcription, 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, Holmiac.

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.

**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, focotrina.*
Aloe perfoliata. L. Exotica Indica.

**Anethum.**
*Herba Seminea.*
Anethum graveolens. L. Hortensis annua.

**Arnica.**
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**Arnica.**

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

**Assa Foetida.**

*Gummi-refina.*
Ferula assa foetida. L. Asiatica, perennis.

**Bdellium.**

*Gummi-refina.*
Obscura. Arabic, palma.

**Castoreum:**

*Et ejus axungia.*
Castor Fiber. L. s. n. Europae septentrionalis.

**Cerussa:**

In laminis. *Ptumbum 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 further 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 Monspetica.
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 as the standard of strength, that one dram of it should saturete 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.

1. Butyri recentis, insufli, libram sexism
   Passalarum exacinarum, conscifrarum,
   Pomorum Borstorfienstium exacinatormi
   et conscifrorum,
   Cerae flavae, singulorum uncias duas
   Radicis alcannae drachmas duas
Coque leniter in vafe figulino donec humiditas evaporata sit, seu guttula carboni candenti immissa crepitum non edat. Maffa fervens forti expressione coletur in vas aqua rofarum plenum,
   et refrigerata ab aqua hac liberetur.

E 2

They
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.

8. Manna electae,
Sacchari albiissimi, singulorum uncias duas
Aquae foeniculi, uncias duas cum dimidia
Solutionem cola cum expressione, et ei admistae Radicis Iridis Florentinae, in subtilissimum
pulverem triturae, drachmam unam.

Olei amygdalarum dulcium recentem 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 cercis medicatis, is made in the following manner.

8. Cerae flavae leni igne liquefactae, libram unam.

Aceti saturnini, unciam femis, mixtis, et ab igne remotis, immerge telas tenues ex quibus fiat
ant l. a. cerci.

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...
formulæ, 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 announce 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 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 styled 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 Madame Nouffer in worm-complaints. Into one of these, there enters a considerable proportion of cerussa or white lead. To this formula Doctor Simmons has thought it right to add a note. 'The observations of the learned and ingenious Sir George Baker, Bart. and Doctor Percival,' says he, 'do not permit me to give the present formula to the English reader,
without cautioning him, at the same time, a-
gainst the use of it. Ceruse, 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 in-
formed, 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 phænomena 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 de-
struction would ensue.

In consequence of an admirable contrivance,
introduced by means of projectile forces, com-
bined with those arising from general gravitation,
the planets revolve round the sun, and neither
have a continual approach to it, nor to each o-
 ther. 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 ge-
neral gravitation in a small system, so they con-
jecture, 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 in-
conceivable 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 contem-
plate an endless number of harmonious motions,
all of which loudly proclaim the sustaining hand
of the Deity.

The conjecture thus attempted to be establi-
shed by reasoning, is, we are informed, in some
measure
measure proved by facts. For, our authors ob-
serve, that, agreeably to what has been said, cer-
tain proper motions of the stars begin actually
to be discovered by the nicety of modern obser-
vations. 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 de-
termine how far the observed laws of these ce-
lestial motions shall favour these hints of one
grand universal system.
I.

The History of a Case, in which the Left Arm of a Child was torn off by a Miln, without any succeeding Haemorrhage. 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-mill, going at its full career, and twirled 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 mill; ran down one pair of stairs, and removed the wedge which keeps the millstones affunder, before the mill 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
flretched 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 afraid 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 completed 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 stitch 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 mill 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 contusions
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III.

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 Lifmore 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 spas-
motic contractions. Her countenance became
pale and contracted; her eyes rolled wildly; the
muscles of the mouth were thrown into a convul-
sive 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, im-
mmediately below the false ribs of the left side, a
round and circumscribed swelling, soft, and yield-
ing to the touch; which, in this, and all the sub-
sequent 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 fa-
tal. 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-
fired 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 flools, 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 Gau-
bius,
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. 3fs.

Extract. gentian. 31fs. fyr. zingib. q. s. f.
pilul. No. xxx. quarum duas fumat 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 agreeable
greeable to the girl, who had a difficulty in swallowing pills.

§ Flor. zinc. gr. xxiv.
Sacchar. alb. 3ifs. 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 inconvenience 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 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.
In the new edition of the Methodical Introduction to the Theory and Practice of Physic, by Dr David M'Brine, 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'Brine 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 dilating throbbing under the sternum. It soon afterwards increased, and returned upon him every third or fourth week, accompanied with great anxiety; very laborious breathing; choking; 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 anti-spasmodics 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, dyspnœa, choking, &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-
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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, per-
spirable
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 flock 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 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 constrictor...
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 sedentaries, 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 mor-
ing, immediately after dressing himself; and
which, he thinks, is brought on by the motion
used in putting on his clothes; though, for a
compleat week preceding the day on which I
saw him last, he told me, that he had been en-
tirely 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 adver-
aria, 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 re-
minded 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 exquis-
itive pain under the sternum, that extended ac-
cutely 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.
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 asfa foetida. This he persisted in for about six weeks; in the meanwhile, he had large acrimonious greetings 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 asfa 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,
that the ossification of that bone began
by the arteries offiiying in the centre of the car-
tilage, which, in young subjects, supplies the
place of bony patella. I have prosecuted that
subject, from the first appearance of oniifying ar-
tery, to the perfect formation of the patella. I
supposed that the same thing took place in all o-
ther bones, and accordingly, have made prepara-
tions to demonstrate it, in almost every bone in
the body; and can shew, that ossification is not
only begun, but carried on by the offiiying of
the arteries.

* * * * *

It gives us particular pleasure to be able to a-
nounce to our readers, the origin and progress
of establishments, calculated for extending to the
indigent those blessings which result from the me-
dical 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 can-
not afford it, at the same time, leads medical
practi-
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 Haddington, 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 expense 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
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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 lift 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
Docteur John David Hahn, professor of medicine at Leyden, in a letter to Docteur Duncan, gives the following intelligence respecting several new books which will soon appear at that place.

Venerabilis nostrer Gaubius curavit nuper editionem duorum libellorum, Gallice scriptorum ab amico suo illustri Sanches Archiatro Russico, in quibus valde probabiliter docetur, luem veneram non ex America in Europamuisse delatam. Si nondum ad vos pervenerint, mittam cum aliis dissertationibus prima data occasione. Nonnulla testimonia quae III. Sanches praetermissis, supplere audet Cl. Henudson, medicus Altonensis, qui in eo est ut versionem Germanicam opusculi Sanchefiani paret et notis augeat.

Schillingii medici Surinamensis observationes de lepra et elephantias, typis Luchtmannianis exscribuntur et brevi edentur. Miferat eas ad me auctorem jam ante biennium. Curavi eas quoad potui, et praefatione comitabor prodituras, faciamque ut ad te oculis perveniant.

Beerenbrockius nostrer in eo est ut versionem Latinam operis Culleniani quam Edinburgi perfe-
cit typis Luzai exscribendam curet; quo in negotii 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 friendship's merit has lost a steady and disinterested patron.

S E C T.
COMMENTS.

S E C T I V.

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.


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.


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 which are added, their several uses in medicine, agriculture, rural economy, 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 Tibertius 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 expos'd, with their antidotes, under the following general heads, viz. stings and bites, vegetables, minerals, fumes, and vapours. By Doctor Ingram. 8vo, London.

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

Memoire pour servir au traitement d'une fivre epidemique, fait et impriné par ordre de gouvernement. Par M. Maret, Docteur en medecine de l'université de Montpellier, &c. 8vo, Dijon.
Observations sur la nature, les causes, et le
traitment de la maladie epidemique des chiens.
Par M. Fournier, Docteur en medecine de la fa-
culté de Montpellier, &c. 8vo, Dijon.

descriptiones animalium, avium, amphibiorum,
piscium, infectorum, vermium, quae in itinere
Orientali observavit Petrus Forskala, post mort-
tem authoris edidit Carsten Niebuhr. 4to, Hav-
niae.

Flora Egytiaeco-Arabica Petri Forskala, edi-
ta a Carsten Niebuhr. 4to, Hanniae.

catachisme de l'art des accouchemens pour
les fages-femmes de la campagne, fait par l'ordre
et aux depens du gouvernement. Par M. Augier,
du Fot, Docteur en medecine, &c. 12mo, Pa-
ris.

Abrége de l'art des accouchemens a l'usage
des accoucheurs, des fages-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 recher-
ches et observasions sur le pepsme, ou coction
pathologique. Par M. Joseph Francois Carrere,
Censeur Royal, Docteur en medecine de l'univer-

verfi-
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verfite de Montpellier; de la Societe Royale
des sciences de la meme ville, &c. svo, Paris.

Dissertationes medicae inaugurales, quas ex
auctoritate reverendi admodum viri Gulielmi Ro-
bertson, S. S. T. P. Academiae Edinburgenae
praefecti; nec non amplissimi senatus academicii
consensu, et nobilissimae facultatis medicae de-
creto, pro gradu doctoratus, summifque in me-
dicina honoribus et privilegiis rite et legitime
consequentibus; eruditorum examini subjecerunt.
Pridd Id. September, 1777.

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

Carolus Webster, A. M. Britannus. De Valo-
rum sanguisferorum libramine.

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

Jacobus Prossor, Hibernus. De Sanitate ad
longe vate ad
tienda.

Alexander Bertram, Britannus. De Phreni-
tide.

Thomas Naysmith, Britannus. De Rachitide.

Henricus Haskey, Britannus. De Ferro ejus-
que 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 Hypochondrias Causis.
CONTENTS.

Books.

Cullen, W. First Lines of the Practice of Physic

Heysham, J. Dissertatio de Rabie Canina

Baldinger, E. G. Pharmacopoeia Edinburgensis, additamentis aucta

Pharmacopoea Suecia, cum gratia et privilegio S:æ R:æ Maj:itis

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

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

Medical Observations.

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

An
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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 Doctor Duncan page 83.
The History of a Convulsive Disorder treated by the Use of Flowers of Zinc. By Doctor Patrick Dugud, Physician at Durham, communicated to Doctor Duncan 84.

MEDICAL NEWS.

Account of a Radical Cure for the Angina Pectoris, confirmed by the experience of Doctors Smith and Macbride of Dublin 92.
Opinions respecting Osification, by Doctor Hunter and Mr Cruickshank 100.
Account of Dispensaries at Edinburgh, Kelso, and Dundee 101.
Intelligence respecting several new medical Publications at Leyden 105.
Death of Archibald Menzies, Esq. 106.
LIST OF NEW BOOKS 107.
MEDICAL
AND
PHILOSOPHICAL
COMMENTARIES,

By a Society in Edinburgh.

Si quis verus medicus est, idem sit, ut veritatis, sic etiam tempes-rantiae amicus; illudque intelligitur eundem esse methodi rationalis studiosum, ut morborum quot genera sint specieisque cognoscat; ut-que in singulis illis quo pacto somenda sit indicatio remediorum inte-gelligat. GALENUS.

VOLUME FIFTH.

PART II.

LONDON:
Printed for J. Murray, No. 32. Fleet-street;
W. Creech, C. Elliot, and
M. Drummond, Edinburgh;
M,DCC,LXXXVIII.
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
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 chronic, 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
knowledge 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 menstures 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.

H 3

Different
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 menstes, 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, hysterical 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 breast: 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 seems, 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, 21,780, 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.


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 sympathizes with every part of an animal, and that every part sympathizes 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 sympathizes 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
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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 flopping 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 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 radish, 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
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 degree
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.


F EVERS 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 epidemic 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.

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 Alimento-rum 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, salivary, 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-
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\textit{f}, 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\textit{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\textit{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 

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tion 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.
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 viscous matter, which evidently appeared to be the remains of the leech. The same experiment was afterwards repeated with the common earthworm, 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.
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 reseal 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, pun- gent, though by no means a putrid smell; while the other appeared perfectly putrid, and afforded a very ungrateful smell.

Although
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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, putrefaction, 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.


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.

_Haemoptysia_ Peruviana 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-ache, 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 jatata.

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 con-
comitant 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 vio-
lent hiccough, on any thing cold being received
into the stomach. Opiates, and all the usual re-
medies, were prescribed, but with no great advan-
tage; and, at length, our author, reflecting up-
on 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 tartarifato 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 im-
mediately suspected that the disease arose either
from some obstructions in the liver, or from a
vitiated state of the bile, the belly being remark-
ably
ably costive, the praecordium hard, and the countenance tinged with a yellow hue. The patient was put upon a course of tartarus tartarifatus, 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 S¢rophulofi 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 disordered, 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 Offium 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. 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 fit 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 colicky 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,
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 haw, being play-fellows; but was not at all affected with either idiotism or mania.

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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 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 seneca 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 bedtime. 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 delivery,
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
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 incontestible evidence that this remedy alleviates the symptoms both of the stone and gravel; that it acts as a powerful diuretic; discharges fabulous 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
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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 anaarca 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 wormwood, 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 fores 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:

**C O L I C**

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 reach-
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 confined 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.
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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 dropy 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.


Small
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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 lighter; his eye is less frequently distorted; and the pupils of each are more contracted. The stuper is considerably abated;
ted; the child seems to take some notice, dis-
tinguishes 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 eve-
ry 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 gent-
ly 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 mi-
nute; 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
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 coltive. 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, and irregular. I directed that the child should be immediately put into a warm bath, and that the following remedies should be administered.

* Injusi. rad. Valer. fortissimi ʒii.

B. Tincl Valer. volat. iii. Dentur guttae jii. Sub-
inde e cochleari parvulo Infusi rad. Valer. sylv
sub forma Theae parati.

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

The deplorable case which I have related, ap-
ppears to have originated from the irregu-
lar 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 pro-
bably increased in the ventricles of the brain.
That these discharges were diminished, and that
the extravasated water was absorbed by the power-
ful action of the mercury, may be presumed from
the mitigation of all the symptoms which succeed-
ed the salivation. And, I am inclined to believe,
that the convulsions under which the child ex-
pired, 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 tu-
mour 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 con-
tains about twenty-two grains of mercury, was
consumed,
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consumed, in the usual way of friction. Perhaps half of this quantity might be absorbed, and carried 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 drop or two 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.
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 cæsamen tum. 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 shirrous 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, es-
specially about the umbilical region, a low and
creeping pulse, and faintness, with a loathing and
fickness about the stomach. In that condition I
saw him frequently, and found him always relie-
ved by emolient and carminative injections, and
anodyne juleps, taken by the mouth. After the
pain ceased, a dose of elixir facrum, was, in gene-
ral, 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 me-
dicines. 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.

\[ \text{Elix. proprietas. fuscunciam.} \]

\[ \text{Tinct. ad stomach. uncias quinque. M.} \]

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 inter-
mitted 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.

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:

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 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
flate 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.
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 Iste, 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 practices 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 generico 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 endowed 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 possessed 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, *chylificationis 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 différentes positions des glandes et sur leur action.'* About this time he assisted the authors of the Encyclopedia. The article *Crises* 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 practice 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 fallutary 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. 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. Garde, 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 inoculation. 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
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oppose themselves to inoculation. 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 phytic. 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 vesicators, 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.

N 2 from
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-
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'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 gi-
ven it as his opinion, that he would one day
or other be exposed to such an attack. The
fame physician had said of the late Professor Ve-
nel, 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 e-
vening had complained of a slight spasmodic af-
fection 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 Bordeaux enjoyed a most extensive practice, chiefly among 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 Bordeaux joined to these a pleasing person, together with a most polite and engaging address, and great affability 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 surprized 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 phænomena 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 one.
one man, the reader will not hesitate to pronounce, that M. de Bordeu was deservedly considered as a great physician.

* * * *

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-

N 4 dersfield
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 fewer 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.
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 circumstan-
ced.

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

Few travellers, either on horse-back or in car-
riages, perceived the earthquake. The paffage-
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 wan-
dering 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 ex-
ceedingly 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 phænomena, by means of a most powerful and magnificent electrical machine, now in the possession of Lord Shelburne,
from which he has seen sparks taken, in the open 
air, at the distance of twenty inches.

* * * *

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 Gaffner, 
in the 15th number of the Medical Commenta-
ries, is, however, misinformed when he says, that 
the celebrated De Haen sided with Gaffner, and 
published a work De Miraculis, which was sup-
pressed. 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, 
many 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, Gaffner's ma-
noeuvres 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 criticize 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 cenfure, is, that it is not unworthy of
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. Gaffiner’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 expense 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 numerosoissimi illi (Energumeni), qui nunc Germaniam inundent, aut simplices, aut vafri homines sint, quorum Sathanas perfonatus, vel ipsis vitam desidiosam ad tempus conciliet, vel infernalem suam aßutiam atque vafritiem explendi facultatem praebat, vel theatram coronam Sycophantis Exorciﬁs impo-nat. Idem pag. 23. Sententia mea de nuperiori-
bus in Gallia miraculis operi deest prae defectu monumentorum ad horum discussionem necessariorum.

qui acta agam, qui Æthiopem lavem, quando-
quidem tantam sapient haecc opera, fatuitatem, va-
nitatem, temeritatem, inanitatem, impietatem,
ut aeternis potius tenebris sepeliri, quam poster-
orum memoriae, conservari deberent. Si omnes
hominis sic judicarent memoriam illorum sufo-
caule, quam refricasse præstaret: Verum, cum
summi in ecclesia atque republica viri, ea ut ve-
ra miracula tueantur, suæque autoritate idem ple-
bi persuadeant, necesse omnino est extrema ten-
tare, ut quid de illis sentiendum sit demonstratur.
Pag. 159. Ita Gassneri lusus theatralis, Gassneri
impietales, Gassneri barbaries, nos in indignatio-
nem erga illum ducunt. Pag. 166. Nonne in
legitimam suspicionem incidat simoniacos, quod
cum suo pharmaco poeo, qui 200 emptores simul
Finis, alter, Gassneri miraculorum est, ut ait ipse
Gassner, ut cogatur Diabolus publice fateri
quantum emolumenti inferno, et quantum detri-
menti ecclesiae societatis Jesu dissolutione acce-
rit. Pag. 170. Hoc jubente Gassnero, in pluri-
bus occasionibus fassus est diabolus, sed nunquam
apertius quam anno 1774 die 8 Decembru. ex pro-
tocollo episcopali. Pag. 171. Responset Diabo-
lus horrendo ejulatu se convolvens. Pag. 173.
Vos,
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 performed
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 osa 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 car-
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 symphyseis, 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 symphyseis 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.

* * * *

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 liberris optimum patrem lugentibus triste et acerbum accidit, id, universa superstitiae familia hortante, obsequiosissime tibi significandum censeo, quod et officii ratio ita postulet, cum vivum in amicorum numero

O 3

* * *

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

O 4 have
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.

* * * *

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.

* * * *

Among other new publications, it gives us pleasure to announce 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.

* * * *

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.

* * * *

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.

* * * *

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
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 Bee-renbroek.

* * * *

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
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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.
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 scharrous 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-
Giambatäfta 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.


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.


Formulæ medicamentorum selectæ; 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 Huffey 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.


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 prevent.
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Semiotice physiologicam et pathologicam generallem complexa. In uulum praelectionum academicarum conscrifit Christianus Godofredus Gruner, M. D. et Prof. cet. cum privilegio Saxonicci Electorali, Halae Magdeburgi.


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.

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AND
PHILOSOPHICAL
COMMENTARIES.

By a Society in Edinburgh.

Volumine mea, quae plurimis profutura videbantur commendare bone,
FALLOPIUS.

VOLUME FIFTH.

PART III.

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M. Drummond, Edinburgh;
M.DCC.LXXVII.
MEDICAL
COMMENTARIES.

SECT. I.

An Account of Books.

I.

Henrici-Josephi Collin, Nefocomii Pazmanniani
Arnicae Vires, seve 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 deorum tendentibus, terrae affixa; extus spadicea, intus albida; odoris fortis et gravis; faporis acris aromatici nec ingrati.

"Folia ex ipfa radice emergunt quina aut fena ovata, basin versus pluriculum elongata, angulata, integra, facie dilute virentia, subtomentofa; dorsi magis canentia, et glabriora, nervis trinis aut quinis longitudinaliter insignita, ad plantaginis mediae folia non nihil accedentia; faporis, dum diutius mafticantur, manifeste falsi cum levissimo amarore."
COMMENTARIES

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

*Flores* prope caulis fastigium ex foliorum axillis progrediuntur singulares, adversum positi; in cecumine vero caulis communiter terni, majuculi, radiati, aurci coloris, faporis intene amari; pedunculis erectis subpilosis sustentati.

*Calix* florum communis ex squamulis conffat elongatus, aequalibus, erectis, canaliculatis, subpilosis, scabriusculis.

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

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

Q 3

*Semina*
‘Semina sequuntur oblonga, nuda, pappō pilōso coronata; receptaculo villoso, parumper convexo, insidentia. Crefcit 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.

Syr. flor. Chamom. unc. i. 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 completed; 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 pa-
tient 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 di-
ninished 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 for-
merly 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
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her pulse small and soft; breathing slow and difficult; digestion natural; belly colicky.

A strong infusion of flores arnicæ, 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 formication, 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:

\[ b. \text{Flor. Arnici. unc. dimid. inf. cum Aq. fervid.} \]
\[ q. f. per \frac{1}{2} \text{ hor. dein per medium } \frac{1}{2} \text{ hor.} \]
\[ \text{bulliant vasel clauso; colat. } \frac{6}{1} \text{ adde Syr. Capill. Vener. unc. } 1 \text{ vel unc. } \frac{1}{2} \text{ Diai unius spatio absumat aeger.} \]

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.
COMMENTARIES. 241

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 immovable, 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 preferred; 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 goldsmith, 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 prescribed, a weak infusion of flor. arnicæ 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**
COMMENTARIES. 243

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 opilhotonus.

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 immovable. 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 this last symptom, emollient poultices were applied over the whole abdomen, and continued constantly, both night and day. By this means the tension 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 dismissioned 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.


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 epidemic, 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 it
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 chronic 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.
tattar. 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-

R 2
merous
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 eighth day, with very little tumor and inflammation, it is found expedient to follow the advice of Baron Dimfdale, in repeating the dose of
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 inflected into those who had before been subject 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 completed, 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...
thofe 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.


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.
COMMENTARIES

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, al-
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.


IT is well known, that herniae occur in a variety of situations, insomuch, that there are scarce any of the abdominal visceras 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 hysterical 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 supression of urine, together with great pain and tenderness in the abdomen. Other remedies failing, the catheter was had recourse to, for evacuating the urine; but it was with difficulty introduced. This supression 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 supression 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 increased, 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 opportuni-
ties 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 au-
thor.

This disorder, our author observes, is very ea-
sily distinguished when it has arrived at any con-
siderable 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 affirms to be con-
stant and never-failing symptoms, viz. a change
of colour, together with insensibility in the parts
affected. The discoloration of the skin which
occurs here, is of two kinds; sometimes the parts
are of a pale red complexion, and on other oc-
casions 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 al-
ways
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 blisters 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, inso much 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, leuco-phlegmatic swellings, dropsey, 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 colitive, and is with difficulty acted upon by purgatives; the feces 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

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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.
COMMENTARIES

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-
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 calllosities 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.

De
V.


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.
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 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 spasmotic 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 feces, in a very obstinate
obstinate case of colic, attended with constipation of the belly.

VI.


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 others,
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 insifted 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
difficulty 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 diffe-
rent directions, so as to detach the lens and its cap-
fule effectually from the surrounding parts. Af-
ter 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 au-
thor remarks, that the vitreous humour will ve-
ry 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
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 fores, we are directed to open every abscess of any considerable size, by means of a seton or cord
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 abscesses.

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 scorbustic, 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 affirms, from extensive experience on this point, that no inconveniences 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 alleges, 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

T t 4 emollient
emollient poultries 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 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 fore, 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 fides, 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 surface 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 feton 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 feton.

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 fores 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.

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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
There 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 forementioned causes, yet if they be attended to soon after their commencement, there is always a considerable difference to be observed. The pain, in the species of the disorder from a rheumatic disposition, is always, we are told, from the beginning, diffused over the whole joint, and, on some occasions, 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 exceedingly evident; but, in the latter, there is seldom, 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 scrofulous nature.

In the scrofulous 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 mercurials, 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 ankylosis, 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.


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-
flory; 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 Nîmes, 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 Auenbrugger 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 Ernfing 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 Sir 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
that some foreign articles, which cannot be had but at a great expense, 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.

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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 future. This method I have always experienced to be attended with so many painful inconveniences, that I determined to try if a single point of the interrupted future, 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 future. A small pledget 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-

U u 4 ritation,
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 Obstruption, 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 colliqueness, 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 efficacious.

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, hiccups, and cold sweats.

Her diet, during the whole of her illness, consisted of thin broths, 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 swollen 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 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 completely 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 quicksilver 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 lift 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.

Mary 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 ankle. 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;
flipped; 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 cloth 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 there 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 furrow, 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 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 paeonia, 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 menstes. It had no sensible operation, excepting that now and then it produced a slight degree of nausea.
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 lighter. In these also it has been employed with success. And I cannot help thinking that it will succeed in most cases, if it be persevered in for a sufficient length of time. But, without proper perseverance, nothing is to be expected.

X x 2
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 Fetus 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 coltive. 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 tunicæ was not dilated; and that she 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,
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 cafe was dropical, 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 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 bregmati, 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 vomiting 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-

X x 4

ing
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 Oakham, Doctor Aldershaw of Stamford, and
and Mr. Larrot 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 futures. 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.

S E C T.
COMMENTARIES

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.

| Morning, greatest height of $|$ | Bar. | Ther. |
|-----------------------------|------|-------|
| in the                     | 28.8 | 77    |
| Least                       | 28.6\frac{1}{2} | 70    |
| Medium                      | 28.7 | 73    |

| Evening, highest of the $|$ | Bar. | Ther. |
|-----------------------------|------|-------|
| Lowest                      | 28.6\frac{1}{2} | 79    |
| Medium                      | 28.7 | 84\frac{1}{2} |

Highest of $|$ for the month

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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.

| Morning, greatest height of $|$ | Bar. | Ther. |
|-----------------------------|------|-------|
|                           | 28.7\frac{1}{2} | 80 |
| Least                       | 28.6\frac{1}{2} | 71 |
| Medium                      | 28.6\frac{3}{2} | 74 |

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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 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 inadvisable, 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 scrobutic complaint, which had afflicted him several years, notwithstanding he had taken Mare-
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 surprized at his own extraordinary cure, he administered the same medicine to several of his boys who were affected with scurvy 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!"

* * * *

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,
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 scientific 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 completing 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 Muñis in Mexico, from Koenig in India, and several other places. These, added to the inestimable

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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.
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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.

* * * *

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.

Y 2

Upon
Upon opening the letter marked with the same lines which accompanied this dissertation, it appeared to be written by Mr Charles Darwin, student 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 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
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...
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-ache. 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-ache there supervened other febrile symptoms. And, in a short time, from the hemorrhages, 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 whole industry and genius, there was reason to entertain the most languid 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.

This
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?

* * * *

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 expedite 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."

S E C T.
MEDICAL CASES, selected from the records of the public dispensary at Edinburgh, with remarks and observations, being the substance of cafe-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 clapsis seculis ab ipius natali.
natali. Autore Andrea Duncan, M. D. Col.

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 aca-
demia Edinensi ad rem medicam pertinentium, a
collegio instituto ad hoc usque tempus, delectus,
Tom. I. 8vo, Edinburgi.

Two cases of the hydrophobia, with observa-
tions 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 syste-
matic and philosophical botany. By Colin Milne,
L.L.
LL. D. The second edition, with many additions and illustrative plates. 8vo, London.


An Essay on the method of treating the fluor albus or whites. By Mrs Le Febure of St Ilesphont. 8vo, London.

Recueil des memoires et observations sur la formation et le fabrication du salpetre, par les commissaires nommés per l’academie pour le juge-ment du prix du salpetre. 8vo, Paris.


Méthode éprouvée pour le traitement de la rage, publié par ordre du gouvernement, 4to, Paris.


Dissertationes medicae inaugurales, quas ex auctoritate reverendi admodum viri Gulielmi Robert-
bertson, S. S. T. P. Academiae Edinburgense praeside; nec non amplissimi senatus academicorum 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 Christopheri, De Sanguinis Circuitu.

Seguinus Henricus Jackson, Anglo-Britannus, De Physiologia et Pathologia dentium.

Zacharias Neufville, Carolinensis Meridionalis, De Natura Aeris Fixi.

Samuel Curtin, Jamaicensis, De Febre Flava Indiae Occidentalis.

Robertus Steavenston, Britannus, De Electricitate.

Johannes Temple, Anglo-Britannus, De Dyspepsia.

Johannes Willis, Anglo-Britannus, De Ictero.

Ricardus Worthington, Britannus, De Natura et Ufu Tartari.

Johannes
Johannes Evans, Britannus, De Foetus Humani Nutrimento.

Jacobus Mackenzie, Britannus, De Paralyfi 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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Sandifort. Ed. De Hernia vesicae Vaginali

Schillingii, G. G. De Lepra Commentationes

Richterus Aug. Got. De Herniis Dissertatio

Richterus Aug. Gottlieb. De Cataraeæ extra-
hendae methodo nova

Bell, Benjamin, A Treatise on the Theory and
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Coste, M. Effais Botaniques, Chemiques, et Phar-
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MEDICAL OBSERVATIONS.

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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.
M E D I C A L
C O M M E N T A R I E S.

S E C T. 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.
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 phænomena 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 flow, 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 frequent
quent ramifications and anastomoses of the extreme vessels are very favourable to this.

In the second place, the supposition of a preternatural lentor, or vicidity 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 Langrishe 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.

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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 excites 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
COMMENTARIES.

Veisels 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 other
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 anaestomoses, 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
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 instanes 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 subjests, 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
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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 Tarfin; 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 age..."
of age being affected with it. It attacks children 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 repeated in the same child. It is often manifestly the effect of cold applied to the body, and therefore appears most frequently in the winter and spring seasons. It very commonly comes on with the ordinary symptoms of a catarrh, but sometimes 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 found both in speaking 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 found in inspiration, as if the passage of the air were straitened. The cough which attends it is commonly dry, and if anything is spit up, it is a matter 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 inflammation.
inflammation, but frequently a redness, and even a swelling appears, and sometimes there is an appearance of matter like to that rejected by coughing. When the symptoms now described run to a great height, and particularly, when there occurs a great difficulty of breathing, and a sense of strangling in the fauces, the patient is sometimes suddenly cut off.

Diflectio 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 pneumatic 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
afcerain 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 practiced 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 quantity below twelve is a small bleeding. A quantity 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 employed, 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.

Blistering 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 fquils, as not being very powerful; and he thinks the volatile alkali should be referred to an advanced state of the disease. He seems to approve of mucilaginous and oily demulcents, and of the receiving the fteams of warm water impregnated with vinegar into the lungs. But, above every medicine of this kind, he prefers antimonial 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 Nosophology; yet he does not treat it in this place, because he cannot say by what symptoms inflammations of the peritoneum 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 erysipelasous inflammation of the stomach. The first may be seated in what is called the nervous coat of the stomach, or in the peritoneum 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 erysipelasous inflammations of the stomach are more frequent than those of the phlegmonic kind. It appears, at least, from descriptions, 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 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 stom-
mach vomitings, the diarrhoea ceasing when the
vomitings come on, and, on the other hand, the
vomitings ceasing on the coming on of the di-
arrhoea.

On the subject of the cure of this disease, Dr Cullen observes, that when it is owing to ac-
rid matters taken in by the mouth, and when these are supposed to be still present in the stom-
mach, 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 phleg-
monic inflammation of the stomach are to be
employed more or less.

When an erysipelatous inflammation of the stom-
ach has arisen from internal causes, if pain
and pyrexia accompany the disease in persons not
COMMENTARIES.

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 acetic cent 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 erysipelasous 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 erysipelasous 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 account 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 sanguineous system, there is also a peculiar affection of the muscular fibres, which has a considerable share in producing the phænomena of the disease. From the phænomena 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 morbid matter always present in the body; and that this matter, by certain causes, thrown upon the joints, or other parts, produces the several phænomena of the disease. This doctrine
doctrine Dr Cullen endeavours to refute by many arguments. He contends, that there is no evidence of any morbidic 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 morbidic matter is inconsistent with the phænomena of the disease, particularly with the frequent and sudden translations of the affection from one part to another; that, if a morbidic 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 morbidic 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 morbidic matter; and, lastly, that the nature of the disease can
can be explained in a manner more consistent with the phaenomena, with the laws of 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.


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 Margraaff'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 Macquar, 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 factor.

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 Scarlatica.

The scarlet fever being so liable to be confounded with different eruptive disorders, our author, with a view to prevent any mistakes,
in practice of that kind in future, has here fa-
voured 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, hor-
ripilatio, and fever.

About the same time, particularly in the ma-
lignant species of the disease, the patient is at-
tacked with an intense pain of the head, deliri-
um, 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 af-
ford 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.

C c c 2
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 endanger 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 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 generally
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. haemorrhages 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 feat 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,
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 sauces 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 viscer, 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 paregories 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-berr-ies, and other diuretics, are chiefly recommend-
ed.

In very obstinate cases of this kind, mercury, together with aurum fulminans, are mentioned as very effectual remedies, and are recommend-
ed in the following forms:

R. Rhei electi
Spirit. fa/is coagulati utriusque drachmas duas
Mercurii dulcis
Auri fulminantis
Extract. Scillae, singulorum semidrachmam
M. & pill. cum Rob. Juniperi pondere unius al-
teriusve 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 laxa-
tive conjoined with the pills, so as to produce that effect, and to prevent salivation, which other-
wise might probably take place.

Aurum fulminans is here recommended in every case where a sure and safe laxative is want-
ed, as it does not operate in that violent manner that many practitioners have asserted.
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 Debray, Apothecary to Addenbrooke’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 ground 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 existence,
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 Debray 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 Debray, 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 piece 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
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These experiments seem incontestibly to establish the doctrine of the impregnation of eggs by the males.

In the course of these experiments, however, Mr Debray 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 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 Debrav 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 Debrav 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.


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 rusky green, and the young buds of a blueish 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 dusky 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 mixture
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 characterize 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 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, quinquesidum, minimum, persiftens, campanulatum, obfoletissime quinquedentatum.


Stam. Filamenta quinque, filiformia, erecta e medio tubi, longitudine corollae, antherae longissimae obtusae erectae supra basi exterio-rem, affixae in facie corollae.
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Caps. Bipartibilis in duas partes dissepimento parallelo latere inferiore dehiscent.

Sem. Plurima, compressa, marginata, oblonga.

VI.


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 rufiy 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.
rofe. 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 au-
fire, 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 anthelminthic has, Doctor Wright advises, that it should al-
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, Dóctor 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, laciniiis ovatis brevibus.


Píst. Subulatum filiforme; Stigma nullum, germen ovato-oblongum compressum.

Per. Drupa subovata, magna.

Sem. Nux subovata subligneae, fulco utrinque longitudinali, bivalvis.

VII.
VII.


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 throw 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.

1st, The eruptive stage, extending from the first accession of the eruptive fever to the termination of the eruption.

2d, The inflammatory stage, extending from the time that the eruption is compleated, till signs of debility or putrefcency occur.

3d, 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 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, acefent 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:

Θ. 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.

Θ. Mercurii dulcis sublimati, ppt.
Pulveris radicis jalappi
Florum sulphuris, singulorum drachmam unam.
Diligenter miscce.
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, blood-letting, 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 countering the effects of irritation resulting from cutaneous inflammation.

During the third and last stage, a laudable suppuration is only to be obtained by countering 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 farinaeous and acetose 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
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 pustules 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.
Some Remarks on the Treatment of Hydrocephalus Internus, suggested by a perusal of Doctor Percival's paper on that Subject in the 18th 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 physician.
cius, 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
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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 ascerten 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 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 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.


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:

₈ Tinct.

* Vide observations on the diseases which prevail in the East Indies, page 267.
Ex. Tinœt. 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 llen 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 xerobiculum 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:

B. 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:

B. Calom. ppt. grana quinque.
Pulv. jalap. semidrachmam.
Mucil. gum. Arab. q. f. f. pil. octo.

3. The right hypochondrium was swelled, and the subcutaneous veins very turgid; and on
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 syrups de rhamno, at separate draughts in the morning. A volatile camphorate 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:

5. 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. 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 fizy. The calomel was continued; and, as it did not keep him sufficiently open, a purging draught, with infr.senæ and fæl.poly-chreæt, 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 falivation. Swelling al-
most totally gone; but he has still pain in the re-
gion 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
discoursed; but, as he complained of a dull pain,
at times, in the region of the liver, a feoton 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 constitut-
ion, 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.
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 Tu-
mour arising from the fifth and sixth Ribs. By
Mr Samuel Gillam Mills, Surgeon at Green-
wich in Kent. Communicated to Doctor Dun-
cau.

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 proceed-
ed 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 con-
tinually 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
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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 cri-sla 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 glasy, 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 found 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 periossteum 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.
DOCTOR Matthew Guthrie of St Peterburgh, 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 arthritic 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 Sajanés, 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 Arthritis 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 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 super-saturated with the ammoniacal salt, that it crystallized on the skin. I have attended many other patients who died from suppression of urine, but I never observed this circumstance before."
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 illustriissime, nullus ut in earum studio progressus fieri poslit quamdiu benevolos inter illorum cultores non existet mutua voluntas, se se reciprocos adjuvandis consiliis et observationibus. Hoc effatum, in Medicina praeertim certissimum, quotidiana demonstrat experientia; quando quidem Medicinam temporis filiam celebrent auctores in eo meritissime. Nil igitur optatius quam si variarum provinciarum medicis, quidquid imperiorum fortuna moliatur, stricto semper numquamque fatis colendo veritatis, amicitiae, existimationisque nexus devincentis, quodcumque notatum dignum.
dignum viderit unus, alis aperiat et profiteatur. Tunc omne quod habebitur in uno climate noxi-um vel utile erit et in omnibus. Talibus ratio-
num momentis perculsus, Rex Galliarum Christ-
tianissimus, die secundo mensis Aprilis, anni 1777,
in Sanctiori conilio sedens, Medicam Societa-
tem eo fine creavit, ut cum celeberrimis et praef-
tantissimis totius Europae medicis haud interrup-
tum instituat commercium, optimas colligat ob-
servationes, Epidemicorum omnium imperii cujuf-
cunque flagellorum reproductioni sedulo prospi-
ciat, sicque medicina perfectior evadat simul et
utilior. Postquam autem Regia Societas Medi-
ca Parisiensis, Regicolarum Socios ut correspon-
dentes sufficienti numero sibi sumpserit, extraneos
laboris fui coadjutores acquirendos etiam hodie
defiderat. Ipsoque in duplicate classe pro celebrita-
tis et meritorum vario gradu collocandos esse san-
civit. Erant igitur inter peregrinos, 1ma, Socii,
2do, Correspondentes. Te vero in Praxi Medica
verfatisimum, in Theoria perspicacissimum, Socium
uno ore proclamavit Regia Societas. Tecum
dulci confuetudine jungi, tuis dicti opibus vehem-
ter exoptat, voluitque perpetuum fuum Prae-
sidem promptissine haec confociationis testimo-
ia tibi praestare.

Quod
Quod feci lubenter
Obsequentissimus tuus Collega
Lafione
Regiae Societatis Praefes Perpetuus.

Praefentes autem litteras R. Societatis delibera
tionibus et commentariis consentaneas, ejusque
figillo munitas, Nomine Celeberrimi Duncan
hac die 8vo mensis Augusti 1778, conscriptas ac
missas fuisse obtestor.

Vicq d’Azyr.
R. Soc. Secretus Perpetuus.

* * * *

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 util-
ity to mankind, has had a like effect in other
kingdoms of Europe. And of the ardent zeal
which subsists for medical improvements in Den-
mark, some idea may be formed from the diplo-
ma granted to foreign members, by the medical
society of Copenhagen, of which the following
is a copy.  

Societas
Societatis Medicae Havniensis fedula cura, cujus
specimina una cum instituti ratione in publicum
prodierunt, in artis augmentum incumbens, pro-
priis viribus minus confidens, id potissimum in
votis habet, ut ab ingenuis cordatissime et clare
doctis viris, quotcunque eodem studio ardent, et
communicandi fervore conspirant, amicam et cor-
respondentem operam solemni invitione obti-
nere et exorare velat. Unanimi itaque desiderio
dueta virum celeberrimum, et in arte illustreada
felicissimum Andreas Duncan, Medicinae Doc-
torem Edinburgensem experientissimum, huma-
nistime rogat et obtestatur, ut sodalis nomen be-
nevole accipere, symboloque interdum ad se trans-
miuo, nova sua acta ditare et exornare velit.

Dabat in pleniore confessu 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 im-
portant discovery in medicine, has printed, in the
form
form of a letter, the following observations re-
specting the solvent power of fixed air on the u-
rinary 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 ap-
lication 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 lithotriptic powers
of certain fermenting mixtures; but he acknow-
ledges the impracticability of injecting such mix-
tures 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 pro-
perties
properties 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.

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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 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 conveyed, 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 required several hours to expel this air by heat; and, after the process, there was a considerable whitish 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, therefore, drinking water, impregnated with fixed air, may, by impregnating the urine, enable it to dissolve calcareous matters better than it would
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 grate-
ful 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 in-
tended to relieve. Both these remedies, also,
require a very strict regimen of diet; and their
qualities are liable to be changed either by acidi-
ty, or the fermentation of our food in the first
passages. But the mephitic water may be drunk
in the largest quantity, without satiety or incon-
venience: 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 fanies,
and abating the pain of foul ulcers, when exter-
nally 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 scurvy 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 established.
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 powerful 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 *'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 lithotritic action of fixed air. And another respectable physician, Dr Saunders, has lately given the following testimony of the same remedy. 'I am fully convinced, from a variety of trials, that water, impregnated 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 experiments.
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 tenus may be used, in conjunction with mephitic water, to which it will be no ungrateful or unfalutary addition. And there is reason to believe that this acid may be conveyed to the kidneys, without any considerable change in its properties.
COMMENTS.

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 Statistical 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.

* * * *

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 Cafe-Lectures for the summer-session, and of remarks on the Pharmacopoeias of the Colleges of Physicians of London and Edinburgh.
SECT. IV.

List of New Books.


A treatise on the various kinds of permanently elastic fluids, or gases. 8vo, London.

Considerations on the nature, quality, and distinctions of coal and culm, with inquiries philosophical and political, into the present state of the laws, and the questions now in agitation, relative to the taxes on these commodities, contained in a letter from Doctor James Hutton, Physician in Edinburgh, to a friend. 8vo, Edinburgh.

Mineralogia Cornubienfis. A treatise on minerals, mines, and mining; containing the theory
ry and natural history of strata, fissures, and loads, with the method of discovering and working of tin, copper, and lead mines, and of cleaning 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.


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 ascerten the true causes of the gout. By James Hardy, M.D. of Barnstaple Devonshire. 8vo, London.

A practical treatise on the diseases of the teeth, intended as a supplement to the natural history of
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.


Description et traitement d’une affection catarrale epidémique observée en 1732, parfaitement semblable a celle qui s’étend journellement en Europe, vulgairement appelée la Grippe. 12mo, Paris.

Lettre
Lettre de M. Carrere, Professor Royal eme-rite de Medecine, Censeur Royal, &c. a M. Ba-cher, Medecin de la faculté de Paris. 8vo, Paris.

Codex Physiologicus quam ad usus domesti-cos, ac in favorem auditorum suorum edidit N. F. Rougnon, Regius Medicinae Antecessor Bisuntinus. 8vo, Venfontione.

Lettra full' aria fissa, &c. per Signore Andria. 4to, Naples.

Dissertationes medicae inaugurales, quas ex auctoritate reverendi admodum viri Gulielmi Robertson, S. S. T. P. Academiae Edinburngensae 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, Antiguenis, De Ufu Aquae Frigidae Externo.


Hugo Dougall, Scoto Britannus, De Haemorrhagiis.

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Bartholomaeus Dillon, Hibernus, De Rheumatismo Acuto.

Gulielmus Drennan, Hibernus, De Venaexcisione in Febribus continuis.

Thomas Fowler, Britannus, De methodo medendi Variolam praecipue auxilio Mercurii.

Gulielmus Fearne, Anglo-Britannus, De Tympano, 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.

Johannes Vize, Hibernus, De Ascite.

Carolus Wade, Olisophonensis, De Nutritione.

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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

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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 lustre one compleat and connected work. Even to those who possess extensive libraries 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.
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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.
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