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MEDICAL
AND
PHILOSOPHICAL
COMMENTARIES.

By a Society in Edinburgh.

Obtinebit igitur apud probos et sequos judices praestantissima philosophandi ratio, quae fundatur in experimentis et observationibus.

COTES.

VOLUME SIXTH,
PART I.

LONDON:
Printed for J. Murray, No. 32. Fleet-street;
M. Drummond, J. Bell, W. Creech,
and C. Elliot, Edinburgh;
M,DCC,LXXIX.
AS THE TRIBUTE OF ESTEEM
FOR A CHARACTER DESERVEDLY EMINENT,
THIS VOLUME

Medical Commentaries
Vol. VI.

J. A. Vander Linden.
P R E F A C E.

It has uniformly been the object of the editors of this work to collect from every source, those modern discoveries, which, in their opinion, tend to illustrate the philosophy of the human body, or to improve the healing art. They are not ignorant that the proper execution of such an undertaking is a task to which neither their abilities nor opportunities are by any means equal. They may, however, venture to say, that they have withheld neither expense nor labour, in endeavouring to render it useful to the public and creditable to themselves. And besides the encouragement, as well as the aid, which they have received from many of the most eminent physicians, the extensive sale of the English edition of their work, and the translation of it into other languages during a series of quarterly publication, for a period of five years, afford them the most pleasing testimony of public approbation.

But they are not more proud in having received such encouragement than they are anxious...
6. PREFACE.

ous to merit the continuance of it. Their readers, therefore, may be assured, that, on their part, every effort will be exerted to en-
crease and extend the usefulness of this undertakings. In endeavouring to accomplish this, they are now furnished with aids which the former success of their work could alone procure to them. These aids, they flatter themselves, will not be withdrawn, while they continue to deserve them; and they will not be more anxious to obtain future assistance, than gratefully sensible of the favour conferred upon them. Yet they now find, that without unnecessary trouble to themselves, and perhaps also to their correspondents, a particular answer cannot be sent to every one who may favour them with communications. They imagine, however, it is unnecessary to give assurance to any who shall hereafter honour them with assistance, that a desire to render their work useful to the public will be the only motive which shall ever determine them with regard to the selection of materials for their publication.

EDIN. 1st JAN.
1779. MEDIC.
MEDICAL

COMMENTARIES.

SECT. I.

An Account of Books.

I.

Du Pronostic dans les Maladies Aiguës. Par M. le Roy, Professeur en Medicine au Ludovice de Montpellier, Membre de la Société Royale de la même Ville, et de celle de Londres, etc. 8vo.

Montpellier.

The author of the treatise before us, very justly remarks, that an intimate acquaintance with the principles of prognostics is absolutely necessary for every physician. For it has not only a material influence on the reputation of practitioners, but is also a circum-
fiance of the greatest importance in the cure or treatment of every disorder.

The works of Hippocrates on this part of medicine are highly extolled by our author, the greatest part of his assertions appearing to be the result of experience, and as it were so many facts noted down by the beds of his patients. But although the writings of this great man contain an infinite store of accurate observations, yet our author is far from being such a blind admirer, as to be ignorant of their being interpersed with numerous errors, both as to reasoning and facts. Many of his prognostics especially, are found to be directly contrary to daily experience; others are given out in a general way, while they evidently apply only to particular cases; on some occasions prognostics are delivered as certain, which experience shews are only to be considered as possible. We frequently find mentioned as the most fatal appearances, symptoms which only indicate a very trifling degree of danger; and in other parts of his works, opinions occur, which, as yet, we have never been able rightly to comprehend, from a want of acquaintance with the cases to which they appear to have applied.

To
COMMENTS.

To remedy these defects is the intention of the present work. Such prognostics of Hippocrates as are found to be confirmed by experience are retained, those again which have failed, are rejected, and a considerable number are added by our author from his own observation in different disorders.

As it is impossible to analyse a book of this nature so as to give our readers a clear idea of the whole, we shall select such parts as appear to be more immediately the result of our author's own observation.

An intermittent pulse, we are told, if it be strong, is not such a dangerous symptom in acute diseases as by many practitioners we might be induced to believe. In old people it is seldom even to be considered as bad, and ought not to exclude blood-letting, when, from other circumstances, that evacuation appears in any degree necessary.

Faintings, which occur in acute diseases, are always to be considered as dangerous, unless when, on examination, they appear to have proceeded, either from the patient having remained too long in an upright posture, or from worms, or from bilious collections occasioning an irritation in the primæ visæ.
In the second chapter of the first section which treats of disorders of the visceræ, we are told, that when a patient in any febrile disorder, complains, from time to time, of feeling a disagreeable sensation about his throat, as of something passing from his stomach to his mouth; and especially, when it comes the length of threatening suffocation, we may conclude with certainty that there are worms collected about the superior orifice of the stomach, which thus occasion an irritation in the œsophagus.

Such inflammatory affections of the breast as occur in the course of continued fevers, do not in general, we are told, prove so fatal as similar affections in the lower belly. This our author supposes to be in a great measure owing to the singular advantages which, in such disorders of the breast, commonly accrue from expectoration, and which, in these diseases, he observes, is the remedy upon which nature seems to place the greatest dependence.

When speaking of delirium as a symptom in febrile disorders, our author observes, that it commonly proves favourable when the delirium appears in nearly the same degree with the fever, that is, when they are augmented or di-
diminished with one another. But when the pulse sinks, and the patient's strength begins to abate, if the delirium either encreaseth, or continues only in the same degree, this, it is said, always affords a very unfavourable prognosis.

Partial convulsive motions which sometimes occur in acute diseases; whether in the muscles of the hands, neck, face, or any other part of the body, when at the same time other bad symptoms occur, almost always indicate, a certain and immediate death.

When speaking of such critical evacuations as occur in febrile disorders, those by stool are particularly taken notice of. On some occasions our author remarks, a diarrhoea proves only symptomatic, and affords little or no relief. At other times it produces a complete crisis, and frequently again it affords some relief, without however proving altogether critical.

Stools of the colour and appearance of clay, give great reason to suspect the existence of worms. When the discharge by stool appears to be symptomatic, if it be liquid, whether it is of a yellow, or greenish colour, danger is then always to be apprehended.
Stools of the atrabilious kind, that is, when they are liquid, brown, livid, or of a blackish colour, announce almost immediate death; as do those with a cadaverous smell. Such again as have a blackish appearance, from an evident mixture of blood, prove commonly favourable. In such cases the blood, we are told, frequently comes from the nose, and they are therefore often observed after violent hæmorrhages from that part.

Among other observations which occur on the urine in febrile diseases, we shall only transcribe the following. It has been proved, we are told, by experience, that such suppressions of urine as sometimes occur in acute diseases, do not prove near so troublesome as a priori might be expected; and on the contrary, that on some occasions they have been known to give a complete crisis. In proof of this the following case is related in a note.

In the month of May, 1770, our author attended a man with all the symptoms of an inflammation in the breast, a disorder which, at that time, generally prevailed. At length the patient was seized with a suppression of urine, which proved an effectual crisis for the other complaints. The suppression continued for
for some days, during which period it was necessary to introduce the catheter different times daily.

Our author, after treating very fully of the doctrine of critical days in fevers, in a great measure denies their influence; and concludes with respect to them, that it does not appear from experience that nature shews any constancy in putting a termination to diseases on such days as have commonly been termed critical. Hence he thinks it would be a very great error in practice, either to form the prognosis, or to fix the method of treatment from any consideration with respect to these days. And a practitioner, in order to regulate his conduct on these two points, without paying any regard to the period of the disease, ought to form his opinion solely from the appearances, which present at the time; and particularly from the fever having been quick or slow in its progress; from the symptoms announcing a sound or diseased state of the different viscera, from the strength of the patient, and other concomitant circumstances.

When speaking of pleuritic and peripneumonic affections, our author remarks that the disorder is always more dangerous, when the pains
pains occupy the back, and mediastinum, than when the sides are the parts affected. When in pleurisy the pain of the side, and the difficulty of breathing, disappear and give place to delirium, the greatest danger is then, we are told, to be apprehended.

If in the course of a pleurisy or peripneumony the patient is suddenly seized with such a difficulty of breathing, as to be obliged to fit constantly in an erect posture, if the preceding symptoms have not given reason to suspect the formation of an abscess, there will be the greatest reason to presume that a serous collection has taken place. In confirmation of this, a case in point is here related in a note, similar, we are told, to several which may be found in Morgagni.

Our author observes, that from the authority of some very respectable writers, an opinion has of late prevailed, that no dependence can be placed in forming a prognosis in pleurisy, on the appearance of the buffy coat of the blood. From much experience, however, on this point he is of a very different opinion, and he concludes his remarks with respect to it, with the following observations.

When
When the *buffy coat* appears on the blood, as it very commonly does in every case of pleurisy; it affords a favourable prognostic, if it be not very thick, and especially if in due time a sufficient quantity of serum be separated.

But on the contrary, when the *buffy coat* occupies almost the whole thickness of the mass of blood contained in the cup, when it has transparence, such as to resemble a jelly, when on its surface there appears a variety of small livid depressions or cavities, and when, at the same time, little or no serum is separated after the blood has been evacuated for a due length of time; these circumstances taken together, afford the greatest presumption, that the disorder is soon to terminate fatally.

From the time of Hippocrates and Galen, downwards, a hardness in the pulse, our author observes, has been considered as an essential symptom in pleurisy; but practitioners, he remarks, must, in order to give credit to such an assertion, yield up entirely the effects of their own experience, as daily proofs occur of the contrary frequently happening in this disorder. In many cases of pleurisy, we are told, that even from the commencement of the disease,
disease, the pulse instead of being hard, is soft, small, and weak, so that this symptom can never with propriety be introduced into the definition of the disease.

When treating of suppuration, as a consequence which sometimes succeeds to the inflammatory state of a pleurisy, our author remarks, that when the matter collected is so situated, as to be under the influence of the pulsatory motion of the heart, or of the larger arteries, the abscess, or swelling on some occasions puts on the appearance of an aneurysm; and accordingly a case of this kind is here related in a note, which occurred to our author in the course of his practice. In giving a judgment, therefore, in such cases, other circumstances, besides the pulsation, must be particularly attended to.
II.

Dissertatio Inauguralis Medica de Urinis, quam in antiquissima, ac celeberrima Universitate Vindobonensi Publice Disquisitioni submittit Georgius Prochaska Lipsicio Moravus. Vienae Austriæ, 8vo.

The author of this dissertation, after giving a general account of urine, proceeds to treat more particularly of different circumstances concerning that secretion. He more especially treats of the quantity, colour, smell, and depositions, observed to take place from it.

As the chief new observations contained in this treatise, seem to be comprehended in the last section, we shall confine our analysis solely to that part of the work: it is entitled, De Urine Sedimento Terrestri, seu sic dicit Cretaceo.

Urine containing this cretaceous matter, is, we are told, for some time after it is passed, of a turbid whitish appearance, and by degrees acquires a natural clearness by the earthy particles precipitating to the bottom.

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This precipitation being very ready to happen in the bladder itself, the urine, which first comes away is frequently clear and transparent, while the rest is very thick and turbid.

By the addition of any acid to urine of this kind, a solution of the cretaceous sediment is produced, attended with a flight effervescence, and the liquid is thereby rendered altogether transparent. But on the contrary, salt of tartar being added, a greater degree of thickness occurs, by the quantity of cretaceous matter being considerably increased.

Urine rendered clear by the addition of an acid as above described, on being allowed to settle, affords a quantity of red crystals which adhere to the sides and bottom of the vessel. The figure of these crystals, is, we are told, very various, being sometimes cubical, and at other times rhomboidal, or oval. Their colour, on some occasions, is of a deep red, and at other times they put on a more dark brown appearance. When thrown into water they sink, but do not dissolve; neither do they dissolve in saliva, and they are altogether insipid after having been once washed in water. They readily dissolve, with a considerable effervescence, on being added to aqua fortis; and when
brought in contact with oil of tartar, they become white and fall into a powder.

If to any urine which was either perfectly clear when passed, or which by being poured off from its sediment, has been rendered so, there be made an addition of oleum tartari per deliquium, the liquor immediately becomes more or less turbid, and deposits a cretaceous sediment. On being allowed to rest, a quantity of crystals also form at the top, and on the sides of the vessel, of a whitish pellucid appearance, and of an oblong pointed shape.

On these crystals being deposited, and the liquor decanted, if any more oil of tartar be added, it does not again become turbid, nor does any more cretaceous matter separate and fall to the bottom.

The following are the conclusions which our author thinks may be drawn from the preceding part of the paper.

1st. That there is no urine, however clear it may naturally be, which does not contain more or less of a cretaceous or earthy matter; and that oil of tartar does not shew such a degree of affinity with this earthy part of the urine, as with the acid usually present in that fluid.

2dly,
2dly. That the acid of urine, after being separated from these earthy particles, forms with oil of tartar a neutral salt, which may commonly be procured under the form of white, sharp, pellucid crystals.

3dly. That in the urine of some people there is such a superabundance of earthy matter, as entirely prevents its solution in the acid naturally contained in that fluid; and hence is produced that thickness, or turbid state of urine, so common with many people, together with the deposition of a quantity of cretaceous matter which follows of course.

4thly. That this earthy matter, when joined with either the acetous, nitrous, or any other acid, forms a species of neutral salt, commonly obtained in the form of red or brown crystals.

III. Johan,
THE treatise now under our consideration is divided into four different sections. The first is entitled, Aetiology Profluviorum Sanguinis Uterini. The second, Physiologia Profluviorum Sanguinis Uterini Salutarium. The third, Nosoologia Hæmorrhagiae Uterine; and the last treats of the Therapia Hæmorrhagiae Uterine.

The menstrual flux, our author observes, seems evidently intended by nature, for carrying off those quantities of the general mass of fluids, which, during pregnancy, are applied towards the nourishment of the foetus, and which afterwards become necessary for a supply of milk to the child.

A variety of causes are enumerated by our author, as having a tendency, in the female constitution, to induce a plethoric state of the system in general, without a particular determination to the uterus: which, by degrees taking off that balance which previously subsisted
between the mafs of blood and the surrounding solids, at last, towards the age of puberty, commonly terminates by the appearance of the menses.

About the period of life when the constitution is already predisposed to admit of this evacuation, different causes occur which frequently accelerate its appearance. In this way any preternatural degree of heat, or fever, or, in short, whatever tends to quicken the circulation, has the most considerable influence. An instance is here quoted from Mauriceau, of an attack of a tertian intermittent having had an evident effect in bringing on suddenly the menstrual flux. Anger, and every other emotion of the mind, we are told, have always very powerful effects on the state of the menses; terror, which not only acts by producing an encreased circulation, but by the spasm which it universally occasions over the surface of the body, is especially productive of this effect. A greater proportion of fluids is thereby sent to the internal organs, than naturally they should receive. Two cases are here related by our author, in which the effects of fear and anger, in bringing on the menstrual discharge, were very remarkable.
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Violent exercise, and likewise a heated state of the atmosphere, are mentioned as powerful causes in inducing the periodical flux in women, and from this last circumstance our author accounts for the appearance of the menfes at a more early period of life with women in warm climates than in cold ones.

A curious fact is here related, which lately occurred to our author in the course of his practice. In an hospital, to which he acts as physician, a very considerable number of the female patients were suddenly seized with a flow of the menfes: what rendered the occurrence more remarkable, was, that several of these women had for a considerable time laboured under suppressions of that discharge; others had been for some time taking a variety of emenagogues to no purpose; and in some the menfes appeared, although they had only been free from their usual monthly return a very few days.

On enquiring into the cause of this phenomenon, it could not, we are told, be accounted for in any other manner than from a great additional increase which at that time appeared to occur in the weight of the atmosphere; the mercury in the barometer having reached to a height
a height at which it had never been in these climates before observed. What this height was however, we are not informed, but it is said to have happened on the 14th of April, 1776. At that time in Britain, according to the observation made at the house of the Royal Society in London, the mercury was under thirty inches, so that the great height to which our author alludes must have been merely local.

Febrile disorders, our author remarks, act in three different ways in producing the menstrual discharge; by debilitating the general system, by inducing a relaxed state of the fo- lids, and by occasioning a more quick circulation of the blood. Different cases are here related in support of the doctrine advanced.

Independently of these general efficient causes of the menstrual flux, there are others, our author remarks, which seem to act more immediately on the uterus itself, and these particularly are too frequent venereal intercourse; extraneous bodies, schirrrous affections of this viscous confined in the uterus; pains and spasm-odic affections in the uterus and its different blood-vessels.

After
COMMENTS.

After an accurate discussion of the physiology and pathology, our author proceeds to the last section of the treatise, in which is comprehended the treatment of uterine hemorrhaiges. What is meant by the term uterine hemorrhaige is every discharge of blood from this part of the system which seems evidently to hurt the health.

The causes in general of this disorder are, by our author, ranked under the following heads; a Relaxed State of the Solids; an encreased degree of Circulation, and an attenuated or dissolved State of the Fluids. In consequence of this view the following indications are laid down for the treatment.

I. To diminish the impetus of the blood in the vessels of the uterus.

II. To increase the elasticity of the uterine vessels. And,

III. To induce a more healthy state of the dissolved fluids.

To accomplish the first of these indications the following remedies are recommended. 1st. Whatever may be considered as refrigerant, or cooling; such as cool air, mineral and vegetable acids, a mild bland diet, and a frequent use of cold water by way of drink, as recommended by Hoffman. 2dly.
2dly. Whatever can occasion a derivation of the fluids from the uterus, and particularly a horizontal posture, with the pelvis somewhat elevated. In particular cases, where the patient has strength to bear that evacuation, blood-letting at the arm is recommended; and with a view to solicit a flow of blood to the surface and superior parts, we are advised to bathe the arms frequently in warm water.

Every stimulating application, and especially whatever can occasion any degree of determination to the uterus must be carefully avoided, particularly warm applications to the inferior parts of the body, venereal intercourse, and drastic purges.

3dly. Very evident spasmodic affections frequently appear as the forerunners of uterine discharges. With a view in such cases to promote a free circulation in the abdomen, gentle laxatives are recommended, particularly those of an oily nature conjoined with anodynes.

4thly. It frequently happens in child-bed, especially after abortions, and likewise in violent hysterical affections, that the pains and spasmodic twitches, which in such cases occur, induce very profuse uterine discharges. Opiates are then recommended as the principal remedies.
With a view to the second indication of cure, which refers to an increase of elasticity in the uterine vessels, astringent remedies are recommended, whether by the mouth, or applied externally to the neighbourhood of the uterus, or more immediately to that viscus itself by way of injection.

It will readily be understood, that while endeavours are making to accomplish this indication, every thing must be avoided which seems to have any influence in counteracting the intention of cure, particularly whatever can have any effect in keeping up a relaxed state of the uterus, such as a moist atmosphere, a too frequent use of tepid watery liquors, &c.

In order to fulfil the third indication, which consists in obtaining a more healthy or inspissated state of the dissolved fluids, a dry farinaceous diet is recommended, together with a course of incassating medicines; and when any putrescent or scorbutive acrimony appears to prevail, the vitriolic acid, when conjoined with Jesuit's bark, proves, we are told, the most effectually remedy.

Independently of these observations on uterine fluxes in general, a variety of others occur
cur, which apply more especially to particular cases.

In profuse discharges of the lochia, if any part of the placenta or membranes has been left in the uterus; or if an inversion of the fundus uteri has in any degree taken place, the most effectual remedy always is the introduction of the hand by the vagina, so as to remove every impediment to the contraction of the womb. When this cannot be got accomplished, mild injections into the uterus sometimes prove serviceable.

When the discharge seems to be kept up by a real debilitated state of the uterus, astringent applications to the loins are recommended, a continued general pressure to the abdomen, a horizontal posture, together with great attention in keeping the patient in every respect easy, both as to the state of body and mind.

In such haemorrhages from the uterus, as sometimes occur during pregnancy, an antiphlogistic course is recommended, with the continued use of the vitriolic acid and tincture of roses. When these do not prove effectual, we are desir'd to have recourse to Peruvian bark,
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bark, and essence of orange-peel, and to use what our author terms the antiscorbutic tincture, a remedy, the effects of which are here greatly extolled, as well as in other parts of this Dissertation. The antiscorbutic tincture is prepared and used in the following manner:

Aurantior. aā 3ß.
Tinct. Antiscorbut. 3ß.—5i. M. Dosis guttae 60. 4ter quotidie.

The prescription for the antiscorbutic tincture itself is as follows:

Instilla successive Olei Vitriol. op. p. I.
Addo Coccionell. q. s. pro Tinct. Saturale rubricaud.
Degere per 3 dies lenissimo igne et cola.

When, during pregnancy, there is reason, from different circumstances, to suppose that hemorrhages from the uterus will probably occur, blood-letting from the arm is recommended, together with rest of body, and the use of nitrous and other cooling medicines.

It sometimes happens, our author observes, that violent floodings occur towards the last days of pregnancy; owing, he remarks, to a partial separation of the placenta from the uterus. For this species of the disorder, no radic-
radical cure can be expected till delivery takes place. Blood-letting is not here of any advantage, so that it should never be had recourse to, as it tends only to increase the patient's weakness. Rest of body and mind are much enjoined, together with cooling nitrous medicines, and a bland mild diet. But when these do not prove effectual, the only remedy to be depended on, is to promote delivery by endeavouring to dilate the orifice of the womb, so as to admit of the introduction of the hand. By this means, the placenta comes to be entirely disengaged, and the cause no longer subsisting, the haemorrhage is thereby most frequently got the better of.

Such cases of haemorrhage as occur during the continuance of the labour, as they frequently depend on the same cause with those last mentioned, viz. on a partial separation of the placenta; are only to be removed by the same remedy. In every such instance, therefore, we are advised to promote delivery as quickly as possible.
THE writings of the ingenious and learned author of this work, have, on many former occasions, furnished materials for our periodical publications; and to the valuable extracts which have been made from his other writings, the present affords an opportunity for making considerable additions.

As the articles which come under consideration in the volume before us are very various, we cannot attempt to give a particular account of each, and shall therefore present our readers with a general list of the contents, together with a more particular detail of a few of the articles.

The different sections are entitled as follows.

I. On the state of population in Manchester and the adjacent places.

II. On the proportional mortality of the small-pox and measles, in the several periods of life and different seasons of the year; toge-
ther with its comparative mortality to males and females.

III. On the different quantities of rain which fall at different heights over the same spot of ground.

IV. On the solution of stones of the urinary, and of the gall-bladder, by water impregnated with fixed air.

V. On the nature and composition of urinary calculi.

VI. On the internal regulation of hospitals.

VII. On the influence of fixed air, on the colour and vegetation of plants.

VIII. On the action of different manures.

IX. On the properties of different absorbents.

X. Miscellaneous observations, cases and inquiries.

And to the whole is added an Appendix, containing, a letter to the author from Dr. Saunders, on the solution of human calculi, with some other papers on different subjects.

As there are contained several interesting facts in the tenth section, under the head of Miscellaneous Observations, Cases, and Inquiries, we shall here select a few of them.

Fatal
Fatal effects of Yew leaves.

On the 25th of March, 1774, three children belonging to a labouring man near Manchester, were killed, we are told, by taking a small quantity of the fresh leaves of the yew tree, or *Taxus Officinalis* of Caspar Bauhin. The oldest child was five, the second four, and the youngest three years of age; they were all supposed to be affected with worms, for which this poison was prescribed, by some ignorant person, as a powerful remedy.

The dried leaves were first employed; a spoonful of them being mixed with brown sugar, was divided into three equal doses, and given to the children, but without producing any evident effects.—Two days thereafter, the mother collected fresh leaves, and administered them in the same dose as before, about seven o'clock in the morning. At eight o'clock the children breakfasted upon nettle pottage, that is, oatmeal gruel with fresh nettles boiled in it. At nine they began to be uneasy; were chilly and listless; yawned much; and frequently stretched out their limbs.
The oldest vomited a little and complained of gripings in his belly; but the others expressed no signs of pain. The second child died at ten o’clock, the youngest about one; and the oldest at three in the afternoon. No agonies accompanied their dissolution; no swelling of the abdomen ensued, and after death they had the appearance of being in a placid sleep.

These particulars our author learned from the parents of the children, whose ignorance, he laments, led them too long to rely on the trifling and ineffectual means of relief suggested to them by their neighbours.

It is asserted by Brookes, in his Natural History, vol. vi. page 306, that the yew is not poisonous.—But Cativulcus, our author remarks, destroyed himself by it, as appears from a passage in Cæsar’s Commentaries.

COFFEE.

Oct. 19th, 1774, a physician was affected with a severe head-ach, in consequence of having been disturbed in the night. At two o’clock in the afternoon, he took eighteen drops of laudanum, and immediately afterwards three dishes of very strong coffee. He lay down upon
upon the bed, and endeavoured to compose himself to sleep, his pain abated in half an hour, and in an hour was entirely removed; but he felt not the least disposition to sleep, although he is often drowsy after dinner, and sometimes indulges himself in sleeping at that time.

Nov. 1st, he repeated on a similar occasion, the use of laudanum and coffee, in the like quantity as before. The effects were precisely the same; he obtained ease from pain, but had no disposition to sleep.

Nov. 16, he took eighteen drops of laudanum, when under the head-ach, but without coffee. The opiate composed him to sleep in an hour, but did not entirely remove the pain in his head.

These facts, Dr. Percival observes, confirm a remark which he made in a former volume, that coffee is taken in large quantities with peculiar propriety by the Turks and Arabians, because it counteracts the narcotic effects of opium, to the use of which these nations are much addicted.

The following curious and important observation our author informs us, is extracted from
from a letter, with which he was favoured by
Sir John Pringle, and which he here introduces
as being connected with the subject.

"On reading the section on coffee, contained
in the second volume of your Essays, one
quality occurred to me which I had observed
of that liquor, confirming what you have said
of its sedative powers. It is the best abater
of the periodic asthma that I have seen. The
coffee ought to be of the best Moccha, newly
burnt, and made very strong immediately
after grinding it. I have commonly ordered
an ounce for one dish, which is to be repeat-
ed fresh after the interval of a quarter, or
half an hour, and which I direct to be taken
without milk or sugar. The medicine in
general is mentioned by Musgrave, in his
treatise De Athritide Anomala; but I first
heard of it, continues Sir John, from a phy-
sician of this place, who having once practised
at Litchfield, had been informed by the old
people of that place, that Sir John Floyer,
during the latter part of his life, kept free
from, or at least lived easy under, his asthma,
by the use of very strong coffee. This dis-
covery it seems he made after the publication
of his book upon that disease."
So far Sir John Pringle; and our author concludes his remarks upon this subject, with observing, that since the receipt of the above letter he has frequently directed coffee in the asthma with great success.

Worms discharged from the Lungs.

Dr. Percival remarks that instances are to be found in different authors, of worms having been discharged from the lungs, particularly in Schenkius, in his Observationes Medicinales de pulmonibus in Morgagni's Epistles, and in Lieut. Hist. Anat. Med. As an instance of the same kind the following case is related.

Mr. Hanforth, aged 49 years, had been long troubled with a cough, and with a fullness and oppression at his breast. He frequently expectorated lumps of black, grumous blood, which gave him relief. In Feb. 1774, the oppression increased, and in the night he discharged, by coughing, two masses, one of the size of a nutmeg, the other smaller. They were of the colour of chocolate. When the larger substance was opened, it was found to contain a considerable number of worms, like maggots, in a very lively state.—His cough

C 3 and
and expectoration, we are told, still continue, but the oppression at his breast is not so troublesome, and the discharge of coagulated blood is less frequent.

This patient's complaints were not attended with any hectic symptoms; and he is unable to give any account of the origin of them. The late Dr. Watson of Stockport, saw and examined the worms which he discharged in this manner.

In these sections of the present work which treat of calculous concretions, different experiments are enumerated, both by Dr. Saunders of London, and our author, as proofs of the lithontriptic effects of water impregnated with fixed air. In all these, distilled water saturated with fixed air, constantly produced a diminution of weight in such pieces of human calculi as were immered in it; while pieces of the same concretions, on being put for the same space of time into simple distilled water, did not undergo any kind of change.
V.


In a former number of this work, we gave an account of the bones of the pubis having been divided at their symphyses, with a view to effect a delivery in the case of a narrow pelvis. This operation was performed by Mr. Sigault, an accoucheur in Paris.

Although Mr. Sigault, however, was the actual operator in the case alluded to, and is, in fact, to be considered as the person who, in the present age at least, first proposed such an attempt; yet as Dr. Le Roy had been very active in his researches for forwarding the operation, and was in reality present with Mr. Sigault, and even acted as his assistant on that occasion, he thinks, therefore, that he is in some measure entitled to a share, of whatever
applause the public may think due to such a discovery.—With a view to have this point ascertained, as well as to communicate to the world a particular account of the operation, and its consequences, he has been induced to publish the present performance.

The treatise before us is divided into three parts; in the first, the author gives an account of the different circumstances which seem to have pointed out the operation in question; and of the different authors by whom it has been proposed. In the second we have an account of the manner in which the operation was actually performed, together with a detail of the consequences which ensued. And in the third part, the author endeavours to account for these consequences; points out the means of preventing them in future, and afterwards proceeds to enumerate such circumstances, as, he thinks, evidently indicate the necessity of having recourse to this operation.

In cases of difficult labour from a narrowness of the pelvis, the Caesarian section has been the only recourse both among the ancients and moderns; but as in that operation the mother almost always falls a sacrifice, the present discovery, if it continues to succeed as well as
as it has hitherto done, will, no doubt, be considered as one of the most material improvements that has occurred in midwifery.

From different passages in the writings of Hippocrates and Galen, Mr. le Roy observes, it is evident that these authors were well acquainted with the mechanism of the bones of the pelvis, as they both speak of the great flexibility of these bones, and of the extension they admit of at their different articulations in the time of labour.

It was not, however, till about the year 1519, that any use was attempted to be made of this knowledge in assisting the labours of women. In this year we were told Jacques d'Amboise, a famous anatomist of Paris, having met with a female subject who had suffered death a few days after delivery, took this opportunity of demonstrating to a number of his brethren, the very great mobility which at that period occurs in the bones of the female pelvis.

One of d'Amboise's hearers, a surgeon anatomist, of the name of Pineau, being thoroughly convinced from what he had seen, that more use might be made in assisting delivery than had hitherto been done, of this great degree
gree of laxity which occurred in the female pelvis; after collecting all that had been said upon the subject into the form of a treatise, proposed, that, in order to assist nature as much as possible in producing a laxity and separation of the bones of the pelvis, emollient cataplasms and embrocations should be kept constantly applied to their symphyses during pregnancy; and particularly to the symphysis of the pubis. He even goes so far as to propose, but with great diffidence, that in difficult cases the pubis might be separated by a section of the symphysis.

No operation, however, was ever attempted in consequence of this doctrine; but in the year 1768, our author informs us, a treatise was presented to the surgeons of Paris by Mr. Sigault, in which it is proposed to divide the pubis at its symphysis, by means of a section in cases where it had been usual to have recourse to the Cæsarian operation.—By this means, he observes, a separation of the bones of the pubis from each other can be obtained, at least to the extent of an inch.

The objection started to this operation, was, that in such cases, where it became necessary to have recourse to the Cæsarian operation, the
the separation of an inch in the bones of the pubis would not be sufficient; and that, from a variety of circumstances, there was reason to suppose that although a delivery should be effected in this manner, the bones would not afterwards reunite.

In a short time, however, this last objection was in a great measure removed, by an experiment of Dr. Camper of Holland, who put the operation proposed in practice upon a sow, newly delivered of her pigs.—The sow continued to give suck to her young, walked about, and the bones to all appearance were soon perfectly reunited.

In this situation the matter rested, when in the year 1773, our author, we are told, commenced his researches on this subject.—The operation of dividing the symphysis of the pubis was performed upon a variety of subjects, both male and female; in the former, any separation of the bones that could be obtained by these means was exceedingly trifling. This was also the case in female subjects who had not died in child-bed; but in these, indeed, a very considerable separation was always obtained, though never near so much as would be necessary for effecting a delivery in the case of a very narrow pelvis.

As
As in all the dissections of this kind, which Dr. le Roy had been concerned, it had uniformly happened that a much greater separation could be obtained, by dividing the pubis at the symphysis, in women, near to, or immediately after delivery, than in other subjects, he naturally endeavoured to discover the cause of this. He soon found, he says, that in proportion as women advance in their pregnancy, a degree of softness and flaccidity takes place, not only in the muscular and other soft parts, but even in the cartilages and bones, and as this change is always most evident in those parts which compose the pelvis, he concludes it to be an operation of nature, intended for promoting a more easy delivery of the child. These cartilaginous substances especially, which form the junction of the bones of the pelvis, are at the time of delivery, he observes, in such a very spongy lax state, that they can be divided with the greatest ease by the point of a lancet.

Having rendered himself absolutely certain with respect to this fact, it next occurred to our author, that if the operation could be performed upon a subject newly dead, before the natural
natural heat was entirely dissipated, a greater degree of separation of the bones would probably be obtained than was found to be produced by the same means upon a subject not so recent.

A subject in this situation, with a liberty of performing the operation, was scarcely to be expected; at last, however, in the year 1774, our author obtained permission of the friends of a woman, newly dead in labour, to put this operation in practice. Every thing now answered his expectations. Instead of an inch and a quarter, which was all the separation of the bones he had ever before been able to obtain, he now found, to his great satisfaction, that an opening of at least two inches and a half could be easily produced, which he supposes would, in the narrowest pelvis that can occur, admit of a free passage equal to every want. After anxiously waiting for an opportunity of putting the operation in practice upon a living person, at last a case occurred on the 2d of October, 1777, in which it was judged proper to have recourse to it. The woman was much deformed, had such a narrow pelvis, that in four former deliveries the children were all dead, and in one of them it was found necessary to bring the child away piece-meal by the crotch.
Mr. Sigault was the person employed to perform the operation, and he, we are informed, desired the presence and assistance of our author.

On examining the patient, the child’s feet were found to present, but as it was thought impossible for the head to pass through the upper part of the pelvis where it rested, and where the diameter did not, to the feel, appear to be above two inches and half, and especially as it had never been found practicable, as was already remarked, to deliver this woman of a living child; it was therefore resolved to proceed immediately to the operation.

The patient being laid upon a table, and properly secured, an incision was made with a bistourie immediately above the symphysis of the pubis through the common teguments, and other soft parts, and afterwards the cartilage was divided by the same instrument. During the operation, the thighs were held up by the assistant, and kept at a proper distance. After dividing the soft parts through one half of their length, the cartilage was then cut, and the division of the softer parts was afterwards completed. A separation of the bones, of fully more than two inches and a half, was thus pro-
procured, and a living child was extracted by the vagina with very great ease.

The separation, we are told, was very soon finished, very little blood was lost; and the thighs—being laid together, after all was finished, a very trifling opening in the pubis was found to remain. A proper bandage being applied round the loins, so as to prevent the motion of the bones as much as possible, the patient was immediately put into bed, and left to rest.

A very circumstantial account is afterwards given by our author, of the appearances of the sore, and state of the patient, at the different dressings. Of these we cannot pretend to give a minute detail; it is sufficient to say, that in less than two months from the operation, the patient was entirely cured of the sore, the bones seemed to be perfectly re-united, and she was in every way so well, as to be able to go and shew herself to a meeting of the faculty of medicine, who, with a view to have every circumstance, with respect to this important operation, thoroughly ascertained, had, as soon as they were informed of its being put in practice, appointed two of their number to make every necessary examination for that purpose.

The
The most material circumstances which happened during the cure were, frequent febrile accessions, and a copious flow of a serous kind of fluid, very much resembling urine. The former of these, the different attacks of fever, were always found to proceed from irregularities in diet, by the patient indulging herself with plentiful meals, at a time when the lowest diet was prescribed for her.

The discharge of considerable quantities of an urinous kind of fluid appeared to retard the cure, and proved a distressing circumstance to the gentlemen concerned, as it was difficult either to detect the cause, or to find out a remedy. The urethra having been cut in the operation, gave some reason to suspect the discharge to come from that quarter, but it afterwards appeared that it could not probably come from thence, that canal having met with no injury towards its neck; and besides, the discharge did not continue constant, but appeared only at times.

Our author here offers a conjecture which, he observes, he has long entertained. He imagines, that we are not as yet altogether acquainted with the organs employed for the secretion of urine; and he adopts an opinion long
long ago proposed by Ruysh, that it is probable the cellular membrane, which surrounds the neck of the bladder, has a considerable share in the production of this secretion. In the directions given by our author for performing this operation in future, we are desired to have a catheter introduced into the urethra, to serve as a direction for avoiding that canal; and for the same reason as the urethra inclines more to the right side than to the left, he advises the incision, both of the soft parts, and of the cartilage, to be somewhat to the left side, and not directly in the middle of the pubis. By keeping to one side, we have also this advantage, that the suspensory ligament of the bladder is avoided.

We are directed, in making the incision of the cartilage, not to keep the thighs widely asunder, to avoid the danger of occasioning a rupture of the internal ligaments, by the sudden separation of the bones which would be thereby produced. It is better, our author observes, to make a gradual extension after the bones are completely separated.

Towards the end of the publication, our author informs us, that the operation had by that time been performed on other two women...
with the greatest success; first, by Mr. Despréts, a surgeon and man-midwife, at St. Paul de Leon, en Bretagne, and afterwards by Mr. Cambon, surgeon at Mons.

These are the most material particulars which relate immediately to the operation in question, and we are sorry the nature of our work does not admit of a more extensive detail of the interesting remarks, which everywhere occur in this performance.

VI.

_Dissertatio Medica Inauguralis de Calculo Renum & Vesicae. Auctore Simone Lanphier, 8vo._

Edinburgi.

Our author, after an accurate enumeration of the different symptoms, found to occur in cases of calculus of the kidneys, and of the bladder, gives the following definition of the disorder of which he proposes to treat.

_Difficilis et dolorifica, guttata sæpius et ardens micīcio, subitanea quandoque inter min-gendum suppressio, urina fabulosa; mucosa; faepe purulenta; et foetida; dolore perinæi gravante; tenesmo._
The remote causes of diseases of this kind, he divides into the predisposing and exciting causes: under the former head are included all such articles of diet, and other circumstances, as tend to the formation of that earthy matter so universally present in urine; and by the term Exciting Causes, is meant, all such as have any tendency to collect the particles of this earthy matter into one body. The occasional, or exciting causes of this disorder, our author remarks, may be ranked under two different heads; those which more especially may be considered as of an internal nature; and those again which have evidently arisen from the introduction of extraneous bodies into the bladder; of the former kind, are, blood, or coagulable lymph extravasated; pus; mucus; the urinary passages being deprived of their natural mucus, so as to give rise to inflammation, and tumours originating from the internal surface of the bladder. Of the latter kind, or extraneous bodies, acting as a nuclei to stones in the bladder, a variety of examples, we are told, are to be found in different authors, but especially in Haller and Nuck, demonstrating the influence of these.

In the method of treatment, we are favoured with the detail of a number of experiments,
made by our author, with a view of determining the effects of different medicines in common use as lithontriptics; but particularly different kinds of alkaline salts, lime-water, soap, uva ursi, fixed air, and different kinds of acids. We shall here recapitulate a few of the experiments upon each of these; and first with respect to alkaline medicines.

Experiment 2.

A piece of human calculus, weighing nine grains and a half, was immersed in three ounces and a half of water and a drachm of caustic alkali; the phial, containing the mixture, being properly corked, was placed in a degree of heat equal to 98 of Fahrenheit’s thermometer. In the space of 25 hours, the stone was found to have lost five grains and a half of its original weight.

Exper. 3.

The fragment of a calculus, weighing seven grains, being added to two ounces of oleum tartari per deliquium, and the mixture being allowed to remain in a degree of heat equal to 98, or 100, of Fahrenheit’s scale, for the space thirty-two hours, the piece of stone was found to have acquired a grain in weight.

Exper.
Exper. 4.

To a mixture, consisting of four ounces of recent urine, and a drachm of caustic alkali, a fragment of a calculus, weighing six grains, was added, and on its being placed, for the space of 24 hours, in a heat equal to 93, or 100 of Fahrenheit, a sandy kind of sediment was observed to be deposited, but the stone had lost nothing of its weight.

Exper. 5.

One hundred drops of mild fixed alkali being added to four ounces of recent urine, and the mixture being placed for the space of 32 hours in the 100 degree of heat, the urine was found to have deposited a sandy sediment.

Exper. 7.

A fragment of a calculus, weighing nineteen grains, being added to a drachm of regenerated tartar, dissolved in three ounces of distilled water, the mixture was placed in a heat of 98 or 100 degrees, and after remaining there 34 hours, the stone was found to have lost none of its weight. The same experiment being repeated with urine, instead of water, the result was exactly similar.
Exper. 8.

To a quantity of spirit of Mindereri, made with juice of lemons, and half a drachm of volatile alkali, three ounces of distilled water were added, together with a fragment of a human calculus weighing 16 grains, the mixture having remained 34 hours, in a heat varying from 95 to 100 degrees of Fahrenheit's scale, the stone was then found to weigh only twelve grains.

Exper. 9.

The same experiment being repeated with fresh urine, instead of distilled water, the result was exactly the same as mentioned in experiment 8.

Exper. 10.

A quantity of fixed air was added to two ounces of caustic alkali, which did not previously produce much effervescence with the vitriolic acid; but which afterwards effervesced very violently with that acid. A drachm of this lixivium being added to four ounces of recent urine, a fragment of a calculus weighing six grains, was immersed in the mixture. After the phial had stood 40 hours in a heat, varying from 96 to 102 degrees, the stone had lost...
lost nothing of its weight, but a copious sandy sediment was found deposited.

From these experiments, the following conclusions, our author thinks, may be drawn. That the caustic alkali is possessed of a solvent power, though only in a small degree when conjoined with urine, and that the milder fixed alkali has no property of this nature. That as the caustic alkali differs only from the latter in being deprived of fixed air; and as fixed air is found in great abundance both in the stomach, intestines, and in the urine, that by the time it reaches a calculus in the urinary passages, it will probably have been in a great measure deprived of its active powers.

As the strength of caustic alkali is also in a great measure destroyed, by its meeting either with an acid, or with any oily substance; and as medicines of this nature must always, our author observes, meet both with acid and oily admixtures in the primæ viæ, he thinks, therefore, that no great dependence can be placed on them as solvents of urinary calculi.
On Lime-water.

Exper. 11, 12, 13, and 14.

In these four experiments, different pieces of calculi were added to lime-water, and kept a considerable time in different degrees of heat, from 62 to 100, without any evident change being produced on the stones. But as these pieces of stone were of a remarkably hard texture, the following among others were put in practice.

Exper. 15.

A piece of stone, of a soft texture, weighing ten grains, was added to three ounces of lime-water, and as much fresh urine. The mixture being placed in a heat varying from 98 to 100 degrees, and having remained there 48 hours, the stone, on examination, had lost none of its weight, but a sandy sediment was found deposited.

Exper. 17.

Three ounces and a half of lime-water were added to a quantity of sandy feces, gathered from urine four days old. The mixture, which at first was thick and muddy, immediately became
became clear, and deposited a white sediment. It was allowed to stand four days, when no degree of sandy or stony matter could be perceived, either on the bottom or sides of the vessel.

Exper. 18.

Five ounces of fresh urine were added to four ounces of lime-water, with one drachm of vinegar, and the mixture left in a heat of 64 degrees.

Exper. 19.

Five ounces of recent urine, together with 18 grains of a calculus, were added to four ounces of lime-water saturated with fixed air, and the mixture was then placed in 64 degrees.

Exper. 20.

Ten grains of calculus were added to five ounces of lime-water, saturated with fixed air, and the phial placed in a heat of 64 degrees.

At the same time, five ounces of recent urine, intended as a standard, was placed in the same degree of heat. After the space of sixty hours, the pieces of calculi had lost nothing of their weight, but the mixture in Exper. 19, had deposited a small sediment; and the standard was found to have parted with a considerable quantity of sand.
From these experiments our author concludes, that the lithontripitic powers of lime-water are but very trifling; but that it seems to have some effect in altering the nature of urine. By this means it may, perhaps, prevent any farther formation of calculi after it has been had recourse to; and from experience it has been known, he observes, to give ease in cases of calculus, without, however, acting as a solvent of the different stones. In proof of this, some quotations are here made from the writings of Doctors Alston and Whytt on this subject.

Some experiments are next related, that were made with a view to determine the lithontripitic effects of soap and of uva ursi. The former was found to have but a very trifling effect as a solvent; and such pieces of calculi as were added to infusions of the uva ursi, instead of losing any part of their weight, uniformly gained considerable additions.

As our author supposes uva ursi to be possessed of a certain degree of sedative power in common with the astringents, he thinks its having been so much extolled by Dr. de Haen, for the relief it affords in cases of stone, may be accounted for upon this principle.
On fixed Air.

Exper. 25.

The fragment of a calculus, weighing seven grains, was suspended in a stream of fixed air. After having remained in that situation twenty-four hours, it was found to have acquired a grain in weight.

Exper. 26.

Twenty-two grains of calculus were immersed in a quantity of water, saturated with fixed air; after the space of a few days, the stone was found to have lost only one grain and a half of its weight, although, during almost all that period, a stream of fixed air was passing constantly into the water from an effervescing mixture.

Exper. 27.

Nineteen grains of calculus being added to eight ounces of water, saturated with fixed air, the phial was immediately sealed up, and placed in a heat varying from the 95th to the 104th degree of Fahrenheit’s scale; after the space of 50 hours, the piece of stone was found to have acquired a grain; for, at the end of that period, it weighed twenty grains.

To
To these experiments it may, perhaps, be objected, that a sufficient quantity of fixed air was not added to the water; but our author observes, that no stone in the bladder, or kidneys, can ever have such a quantity of fixed air applied to it as was here made use of.

Experiments with different Acids.

Exper. 31.

The fragment of a calculus, weighing nine grains, being added to three ounces of water, acidulated with spirit of nitre, the mixture was placed in a heat varying from 94 to 100 degrees. After having remained there fifteen hours, the stone was found to have lost a grain and an half of its weight, and was become much more brittle than it was before.

Exper. 32.

A fragment of a calculus, weighing five grains, being added to five ounces of water, moderately acidulated with the muriatic acid, it did not lose a grain of its original weight, after having remained in it fifteen hours.

Exper. 33.

To four ounces of water, moderately acidulated with the vitriolic acid, a fragment of a cal-
calculus, weighing five grains, was added. After the space of 15 hours, the stone was entirely reduced to a powder. This experiment was often repeated, and always with the same result. A saturated mixture of the vitriolic acid, with the volatile alkali, was likewise found to be possessed of strong lithontriptic powers.

From these experiments, our author is led to consider the acid of vitriol as a powerful solvent of human calculi. And as it may probably reach the urinary passages with as little change as any medicine we are acquainted with, he concludes that it may often be had recourse to with advantage in cases of stone. Independently of its lithontriptic powers, he thinks too that it may be useful as an astringent and sedative in the same manner as uva ursi.

How far accurate observation in future practice will tend to confirm, or refute, the conclusions which Dr. Lanphier draws from the trials he has made, we will not pretend to say; but every attempt to improve the healing art, on the solid basis of rational experiment, demands attention, and merits approbation. And it is much to be wished, that candidates for medical honours would rather give proofs of their in-
industry and genius in this line, than in copying from the lectures of teachers, or the writings of practical authors, which are in the hands of every body.

VII.

Exercitatio Therapeutica Inauguralis exhibens Observationes quasdam de Uso Aque frigide externo. Auctore Samuele Byam Athill, Antiquensi. 8vo. Edinb.

No change has lately taken place in the practice of medicine, which can be considered as of more importance than the use which is made of the influence of cold acting, either generally, or partially, on the human system. And of the different methods of obtaining the effects of it, no one is more frequently had recourse to, than the application of cold water. But when we consider that this mode of cure is not only used by the direction of regular practitioners, but resorted to by numbers influenced chiefly by fashion, there can be no doubt that it will frequently be productive of bad as well as good effects. Every attempt, therefore, to ascertain by experiment its real properties, and the principles upon which
which it acts, must be considered as meriting attention. It is with this view, that we now propose to present our readers with an analysis of Dr. Athill's dissertation, which everywhere affords proof of the judgment and industry of the author.

This dissertation is divided into three chapters; in the first of these the author endeavours to determine and explain the operation and effects of cold-bathing on the human system, as a proper basis for future reasoning. Dr. Athill begins this chapter with a relation of the phenomena which occur in cold-bathing; and that he might be able to describe these not from fancy, or the authority of others, but from his own observation, he has had recourse to experiments.

In these experiments, while other appearances are not neglected, his chief aim seems to have been to determine these changes which the cold bath induces, on the state of circulation, on respiration, and on the heat of the body. Without entering into a particular detail of these experiments, we shall reckon it sufficient to take notice of some of the general conclusions, which follow from the trials he has made. From his experiments it appears, that
that notwithstanding the successive feelings of
cold and of heat, which accompany, or immedi-
diately follow, cold bathing, the body has in
general returned to its natural temperature
within the space of half an hour. It further
appears, that during the sense of glowing heat,
which ensues soon after leaving the bath, a
thermometer, by proper application to the
body, is not in an equal space of time, raised
to the same height as before immersion.

The influence of the cold bath on circula-
tion, seems to be still more considerable than
on the heat of the body. When the pulse is
reckoned in the bath immediately after im-
merison, it is found to be very considerably
accelerated, rising in some instances from
seventy strokes in the minute, to an hundred
and twenty. If however the person remain
for a few minutes in the bath, it is found to
be more slow, small, and quick, than before
immersion; and in this state it is in general
found to be soon after leaving the bath, even
in cases where the stay in the water has been
very short. But in a few minutes after
coming out of the water, its celerity is again
so far encreased, as to rise considerably above
the natural standard. On respiration it has
the
the effect either of immediately increasing its celerity, or of rendering it very irregular.

Besides these particulars, he also, with great accuracy, enumerates and describes the various sensations which it excites, and appearances which it produces; and from these phænomena, founded on observation, he next proceeds to deduce the principles on which it operates. He thinks that the phænomena, which attend cold bathing afford evidence that it operates in four different principles; and he refers its effects to its influence as a stimulant, as a tonic, as a sedative, and as altering the course of the blood.

He next endeavours to determine from what causes these effects, taking place upon the employment of cold bathing, are derived; and he particularly considers how far they can be explained, from the pressure of the water on the surface, from the effect arising from different impregnations, whether of the saline, sulphureous, or metallic kind, and from the sudden change of temperature. Although he is inclined to imagine that something may be referred to the two first principles, yet he considers its effects as chiefly preferable to the latter, the sudden action of cold. And he farther observes, that the good effects which
cold bathing has in the removal of diseases, are probably not a little aided from its being performed at watering-places, where the mind is relaxed from business, and exhilarated by amusements.

Having thus endeavoured to determine the effects, and explain the operation of cold bathing, Dr. Athill proceeds in the second chapter to consider, how far these effects are diversified by different modes of applying it, and what advantages are to be expected from each. Here he chiefly considers the effects of diversity in the degree of temperature, and in the manner of application. With respect to temperature, he points out the different effects of spring or sea water, without any artificial change of temperature, and of the same waters artificially heated or cooled to certain degrees. And with respect to the manner of application, he observes, that this is considerably varied as being general or partial. Under the first he considers the effects of sudden immersion, of affusion or the shower bath, and of merely washing the surface; and under the second, he treats of the influence of the partial application of cold water, both as affecting the part to which it is immediately applied, and as affecting the system.
system in general. But any proper analysis of his observations on these subjects, would extend to a greater length than the limits of our publication will allow. We shall therefore conclude this article with a few remarks, drawn from the last chapter, in which he treats of the use and abuse of cold bathing, when employed for medical purposes.

In the third chapter of this dissertation, Dr. Athill first endeavours to point out the general indications of cure which cold bathing is fitted to fulfil; and, after endeavouring to deduce these from what he had before attempted to establish, with respect to its operation, he gives the following view of them, under the form of a table.

General indications which cold bathing may be employed to fulfil.

I. From its stimulant power.
   a. To obviate morbid affections of the circulation.
   b. To remove a morbid diminution of sensë or motion.

II. From its tonic power.
   a. To remove original delicacy of habit.
   b. To restore vigour either to the whole system, or to parts particularly debilitated.
M E D I C A L

c. To produce a constriction on the orifices of ruptured vessels.

III. From its sedative power.
   a. To obviate morbid affections in the state of action of the brain.
   b. To diminish morbid irritability.
   c. To counteract a tendency to inordinate motions.

IV. From its influence, as altering the balance of circulation.
   a. To diminish the impetus of blood on the surface of the body.
   b. To produce a temporary increase of determination to the abdominal and thoracic viscera.

The contraindications to the use of cold bathing, which are nearly the opposite of the circumstances mentioned above, he refers also to the same general heads, and of these he gives the following view.

General effects of cold bathing from which it may prove hurtful.

I. From excess of stimulant power.
   a. By exciting violent agitation of the whole system.
   b. By inducing morbid action of the moving fibres.

II. From
II. From excess of tonic power.
   a. By diminishing the natural disposition to free motion.
   b. By restraining salutary evacuations.

III. From excess of sedative power.
   a. By diminishing the general mobility of the nervous influence.
   b. By destroying the sensibility of particular nerves.

IV. From its producing changes in the distribution of the fluids, to which the condition of the system is not adapted.
   a. By increasing the impetus of the blood to viscera previously in a morbid state.
   b. By diminishing the force of circulation, and heat on the surface of the body.

After these general observations on the good and bad effects which may be expected to result from the external application of cold water, Dr. Athill concludes his dissertation, by applying these doctrines more immediately to use; and with this view he offers many practical remarks on the proper administration of this mode of cure in particular diseases. Here he follows strictly the order laid down by Dr. Cullen in his Nosophology; and from the observations of the most accurate practitioners, he endeavours
deavours to draw a confirmation of his own doctrine, and to point out the good or bad consequences, which may reasonably be expected to result from the external use of cold water in particular diseases. As these, however, are to be considered as chiefly the observations of preceding writers, it would be here improper to give any analysis of them. And we may conclude the present article with observing, that the path which our author has followed, accurate experiments and careful observation, unquestionably lead to the most important improvements in the healing art.
I.

An Extract of a Letter from Mr. Charles Hall, Surgeon to the 14th Regiment of Infantry, to Dr. Ralph Thicknes, at Wigan, in Lancashire, dated St. Augustin, East Florida, the 14th of May, 1774. Giving an Account of a new Species of Palsy. Communicated to Dr. Duncan.

Permit me to take this opportunity of communicating to you the following account of a species of palsy. It arises from one of the vertebrae starting outwards, and forming an acute angle with the medulla spinalis. As the rising is gradual, the numbness increases gradually,
till, by the pressure on the medulla, the patient is deprived of the use of his legs. This takes several months to accomplish, and were nothing further to follow, the patient would remain in this helpless state during life. But as the vertebrae that are in contact with the diseased vertebra are affected, that above begins to rise gradually, but not to a level with the center-vertebra; and afterwards the vertebra below rises to an equal height with the upper one, so as to make the angle less acute; which, I presume, has the effect of taking off the pressure on the medulla. When this is accomplished, the sense of feeling; and the use of the limbs are gradually restored. I have neither seen nor heard of an author that describes a palsy arising from this cause, and therefore apprehend that it is a case that rarely happens. On this account it might be proper to make it more generally known; because two instances have occurred to my knowledge, where ingenious practitioners were perplexed for want of having seen or heard of a similar case; as no symptom led them to suspect the vertebrae to be the cause, there being no pain in the part affected during the confinement of the patient. It is a case that must be left mostly to nature; and though no material benefit can be derived
from medicines, yet it is a great satisfaction to the patient, (after finding no relief from what has been prescribed, and having the prospect of remaining so for life) to hear the case explained, and to be told that nature will probably work a cure in the course of two or three years, so as to enable him to walk with the assistance of crutches: when the patient is on the recovery, stimulating embrocations and frictions to the limbs may assist.

"At the time of writing this, I have a patient, Alex. Cameron, of the 29th regiment, that has remained paralytic a year and half from a diseased vertebra near the centre of the back, who is now on the recovery. The other case, hinted at above, and which happened before I left England, was of Mr.———, in Cheshire; who was a corpulent man, and who lived upwards of eight years after the recovery of his limbs, so as to walk with crutches, without any farther complaint in his back.

"I have heard of an instance of the vertebra colli being diseased in the same way, when the whole body became paralytic excepting the head, and the patient recovered, as in similar cases. But the attendants neither knew the cause of the disease, or the recovery, which therefore was considered as being almost miraculous."
Addition to Mr. Hall's letter by Dr. Thickness.

To the above account, extracted from Mr. Hall's letter, I may add, that the author, being returned from East Florida, has lately informed me, that Alexander Cameron was afterwards able to walk a mile without crutches, and was to have been sent to England, but that a year and a half after recovering so far the use of his limbs, he died of a fever.

Since Mr. Hall's arrival in England he left the contents, he informs me, of this paper in the hands of Dr. Hunter, Professor of anatomy at London; who, with great politeness and candour, favoured him with a description of such cases as occurred to his memory, and which might seem to bear some analogy to those above mentioned. He recollected three paralytic cases in particular, which arose apparently from morbid affections of the spine. Two of them were attended with earies, and both the patients died. In the other, the spine was anchiolosed, and the patient recovered. In all three, the arch formed in the spine was very considerable.
II.

The History of a Case affording a Proof of the Power of extravasated Blood in dissolving Bone; by Mr. Thomas Thomas, Surgeon at Tunbridge Wells, communicated to Dr. Duncan.

A Man of a strong and healthy habit, aged about 45, upon lifting a heavy weight on the first day of October, 1777, thought he felt something give way in his right hip. Immediately after he was very faint, but soon recovered, and for six or seven days followed his usual occupation, which was that of a brewer's servant, with little inconvenience. During that time, he perceived an unusual weakness in the leg and thigh, but attended with little or no pain, and it was treated as a sprain, with spirituous and oily embrocations. At the end of three weeks his thigh was considerably swelled, and in ten weeks time from the accident, (when I first saw him) it was very much enlarged, and the leg and foot oedematous; he had frequent returns of excruciating pain in that thigh, but it was sometimes perfectly easy, and the other leg and thigh would be inflamed and painful; sometimes he was delirious,
lirious, at others had violent pain in his stomach, attended with great sickness and vomiting, which could only be relieved by volatile and cordial medicines.

As I was uninformed of the preceding accident, and could discover no pulsation or fluctuation in the tumor, the patient's history, together with the above symptoms, favouring the supposition, I at first believed the disease to be entirely rheumatic. The thigh continued growing larger till the first of January, 1778, when it became very tense, in continual pain, and I could perceive a deep seated fluctuation; as he had no hectic fever, or other symptoms, that could induce me to suppose this fluid was pus, I began to suspect a false aneurism. The tension and pain being excessive, I recommended emollient fomentations and cataplasm, which, for a fortnight, gave great relief, excepting when these pains, which, by turns, invaded every part of his body, were fixed in the diseased thigh. On the 12th of February, the thigh was amazingly distended in constant and excessive pains, which nothing could alleviate, and a fluctuation was felt in every part of it, from the groin to the knee. At this time it was examined by a surgeon of skill and repu-
reputation, who, considering the exquisite sufferings of the unhappy patient, and being uncertain what was the fluid contained in his thigh, thought proper to open it; and accordingly a small puncture was made through the skin, cellular membrane, and fascia lata. Immediately there issued a fountain of blood, of the consistence of cream, and a darker colour than blood is in general when fresh drawn from a vein. When about a quart of blood was drawn, the thigh was considerably diminished, and the patient easy. We stopped the orifice with a tent, and left the patient till morning.

Feb. 13. He had fainted several times in the night and this morning; the thigh was almost as much distended as before the incision was made; at the same time, the blood was constantly oozing through the orifice.

Feb. 14. His thigh was in the same state as yesterday. He had a return of the pain in his stomach, which yielded to no medicine; in the evening he became delirious, had convulsions, and died.

What induced me to lay this case before you was, the appearance upon dissection. That blood has the power of dissolving bone, if it comes
comes in contact with it in the living body; though a certain fact, yet is not universally believed. This case not only proves the truth of that idea, but it also shews, that extravasated blood, when long confined, has likewise the power of dissolving the softer part.

Having cut through the integuments and tendinous fascia of the thigh, I could pass my hand quite round the bone, the muscles, except their tendinous portions, being dissolved to the consistence of grumous blood, which, with a great quantity of pure blood, was contained, as it were, in a bag, formed by the integuments of the fascia lata, from the groin and crista of the ilium to the point of the knee. The crural artery, vein, and nerve, were entirely dissolved, and the iliac artery, a little way, was very tender. The os femoris was deprived of its periosteum, very rough and full of holes, some of which would admit a probe into the middle of the bone, which seemed destitute of medulla. At the same time there were several exostoses upon it, which were so slender as to be easily broke down by the finger. As I was not permitted to take away the bone, or to open the abdomen, I cannot give a more
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a more-satisfactory account of the case. But I imagine it sufficiently proves the solvent power of the blood as exerted both on the softest and hardest parts of the system.

III.

The History of a Case of the Pemphigus Major of Mr. Sauvages, by Dr. David Stewart, Physician in Aberdeen, communicated to Dr. Duncan.

A private soldier of the 73d regiment, aged eighteen years, formerly a pedlar, and naturally of a healthy constitution, was received into the hospital at Aberdeen, on the 25th of April. About twenty days before that he had been seized with the measles, when in the country, and in marching to town on the second day of their eruption, he was exposed to cold, upon which they suddenly disappeared.

Having arrived in Aberdeen, he was quartered in a damp, ill- aired, under-ground apartment. He then complained of sickness at stomach, great oppression about the praecordia, head-ach, lassitude, and weariness on the least exertion, with stiffness and rigidity of his knees,
knees, and other joints; the surgeon of the regiment visited him: he was purged, but with little benefit. About ten days before, he observed on the inside of his thighs, a number of very small, distinct, red spots, a little elevated above the surface of the skin, and much resembling the first appearance of small-pox. This eruption gradually spread itself over his whole body, and the pustules continued every day to increase in size.

Upon being received into the hospital, he complained of head-ach, sickness at stomach, oppression about the praecordia, thirst, forehead, with difficulty of swallowing; his tongue was foul, his skin felt hot and feverish, pulse from 110 to 120, rather depressed; belly coltive, eyes dull and languid, but without delirium. The whole surface of his skin was interspersed with vesicles, or phlyctænae, of the size of an ordinary walnut, many of them were larger, especially on the arms and breast. In the interstices, between the vesicles, the appearance of the skin was natural, nor was there any redness round their base; the distance from one to another, was from half an inch to a hand-breath, or more. In some places, two or three were joined together, like the pustules in the confluent small-pox. A few vesicles had burst
burst of themselves, and formed a whitish scab, or crust. These were mostly on the neck and face; others shewed a tolerably laudable pus. However, by far the greatest number were perfectly entire, turgid, and of a bluish colour. Upon opening them, it was evident, that the cuticle elevated above the cutis, and distended with a thin, yellowish, semipellucid serum, formed this appearance. Nor was the surface of the cutis ulcerated, or livid, but of a red florid colour, as when the cuticle is separated by a blister, or superficial burning. No other person laboured under a similar disease, either in the part of the country from which he came, or when he resided in Aberdeen.

This case was treated in the following manner. The largest of the vesicles were snipped, and dressed with Uguent. e Lap. Calaminari. In the evening he was vomited with a solution of tartar emetic, given in small quantities, and at intervals. This also procured two loose stools. And he was ordered for drink, water-gruel, acidulated with lemon-juice.

April 16. He still complained of sickness, some oppression about his breast, and sore throat; he had slept little during the night,
his tongue was foul and blackish, his skin, however, was not so hot as the preceding day, his urine was high-coloured, but had the appearance of separation; his pulse 90, and soft; most of the sores on the trunk of the body looked clean. Others, particularly where the vesicles were confluent, seemed beginning to ulcerate, and to have a bluish sublivid appearance. They were dressed afresh with cerate, and he was ordered the following medicines:


His acidulated drink was continued; and, on account of the very offensive smell on approaching near him, some vinegar was placed in a basin before the bed, and sprinkled on the floor; and the room was kept properly aired.

April 17. His sores looked tolerably clean, unless on his arms and thighs; where they were livid, a little ulcerated, and discharged a bloody ichor.

His head-ach, sickness, &c. were mostly gone; his tongue was rather cleaner; pulse 68, and soft. As the decoction of the bark fit easily on
on his stomach, the following prescription was ordered.

℞ Pulv. Subtiliss. Cort. Peruv. 3s. Vini Rubri
Lusitan. Aquae fontan. 3a 3s. M. ft. Haust.
tertia quaque hora repetend.

The acidulated drink was continued, and fresh dressings applied to the sores.

April 18. The little ulcers on his arms and thighs still discharged a bloody ichor, and
looked ill; his other complaints were better; pulse 82. The bark had not nauseated him,
and it was continued as well as his former drink.

April 19. His sores looked greatly cleaner
and better; the fever was gone, his pulse nat-
ural, and had no complaint but weakness, and
a troublesome itching of the skin: the Per-
vian bark, &c. were continued.

April 20. Some of the ulcers still poured
forth a bloody ichor; most of them, how-
ever, looked well, and had begun to heal—
fever gone—medicines continued.

From the 21st of April, he went on gaining
strength, and his sores appeared to heal fast;
he was desired to take only four doses of bark
every day; and by the 27th, his sores, &c.
were totally dried up—he had no complaint—
was dismissed cured.
Although I had never before seen a case similar to the above, yet I did not hesitate to conclude, that the disease belonged to the tribe of exanthemata; and had, in a greater or less degree, a putrid tendency: having formed this idea, it was evident, that if a remission of the fever could be procured, the bark, with acids, were the remedies most to be trusted to.

Upon looking into the Nosologia Methodica of M. de Sauvages, and examining the different genera of the order of exanthemata, I found that the character of his 93d Genus, to which he gives the name of Pemphigus, almost coincided in every particular with the history given above; and that of the four species into which he divides this genus, the present case was clearly the first of these, or the Pemphigus Major.

Both Dr. Cullen and Vogel nearly agree with Sauvages in their character of this genus of the exanthemata. The former also, gives it the name of Pemphigus, and the latter that Febris Bullofa. Carolus Pifo too, in his Consilia Selecta, gives the history of a case nearly similar; and the Febris Syneches cum Vesiculis per pecus & Collum Sarpis of Dr. Morton, seems also to belong to the same genus.

IV. His
History of an uncommon Case in Delivery. By Dr. Robert Maitland, of Edinburgh. Communicated to Dr. Duncan.

EARLY in the morning of the 5th of August, I was called to the assistance of a poor woman, in labour of her first child. She was about 28 years old, and of a very small stature, though without any apparent deformity. I was informed by the midwife who attended, that her pains had been frequent and severe since the morning of the preceding day, that the membranes had burst, and the waters come away, mixed with blood, an hour before my arrival; and that ever since, pure blood had continued to flow copiously from the vagina. I was further told, that there was something extraordinary in the case, and that I must immediately take some method of delivering the patient, who was sinking under a violent flooding.

The pulse was indeed feeble, and I was a good deal alarmed, when upon touching to examine the progress of the labour, and dis-
cover what there might be uncommon in the case, I found, covering the os externum, a large soft tumor, very much resembling in feel the membranes of the foetus, when far protruded before they break in delivery. So, much, indeed, had it this appearance, that I did not, for some time, find out the deception, till by gliding my finger all around the base of the swelling, I came at last to the os externum, where I found the child’s head presenting, and strictly locked in the pelvis. The tumor, though it thus spread itself all over the mouth of the vagina, now evidently appeared to be an enlargement of the right labium pudendi only. It was nearly as large as a new-born child’s head, and the inside of the labium was turned so much outwards, that on the first application of the hand, the skin and hairs of the parts was not at all felt. In short, on the surface there was no mark by which to distinguish it from the protruded membranes; and I am apt to suspect the midwife had in reality fallen into this mistake; and that an opening into it, which I now discovered on the inside, had been made by her on that supposition. It was big enough to admit my middle finger, and from it the discharge of blood, formerly mentioned, evidently proceeded.

Having
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Having never read of any complaint of this kind happening during delivery, and never before met with any such in practice, I immediately resolved to consult Dr. Young, a gentleman to whom I lie under the greatest obligations. He was of opinion, that little or no danger was to be apprehended from the bleeding; as in these parts, a rupture of any considerable blood-vessels was scarcely to be suspected, and advised to wait patiently for the delivery, when he imagined the swelling would subside.

In the mean time, it was fomented with a strong infusion of chamomile flowers, and the hard parts, round the base of it, rubbed with camphorated spirit of wine; but this last application was afterwards laid aside, as occasioning severe pain when it touched, or approached the lips of the orifice. In the intervals of the fomentation, a warm cloth was kept constantly applied.

The birth advanced with a gradual, though slow progress, and before night, the size of the swelling was considerably diminished; the flow of pure blood had stooped, and only clots continued from time to time coming away.

F 4 Aug.
Aug. 6. This morning the tumor was much the same as last night, and remained so till six in the evening, when the patient was delivered. Three hours after this, it had very much subsided, and I ordered the same applications to be continued.

Aug. 7. She had an incontinence of urine, and complained much of pain in the bottom of the belly; and I discovered, that in the birth, the perineum had been lacerated almost quite to the anus, though it had escaped the observation of the midwife who delivered her. The swelling was almost quite gone, and only discharged a small quantity of purulent matter from the edges of the orifice.

The parts were washed frequently with milk and water, and the lacerated perineum dressed with Ung. Basil. Flav. The discharge, which was at first extremely offensive, soon became less so, and diminished in quantity. The incontinence of urine continued only two or three days, and the patient had a very good recovery.

Some Observations on the Case.

The case of our patient is one that very seldom occurs; Dr. Young, in the course of a long
long and extensive practice, never met with an instance of it; the only person, indeed, that I know of who has seen or described it is Dr. M'Brice, of Dublin, Vid. Lond. Med. Observ. Vol. V. But there is a difference between the two examples he relates, and the one now under consideration, both the former appeared after delivery, the later began during the labour, and therefore we have thought proper to describe it, especially with a view to prevent the danger of mistaking it for the protrusion of the membranes of the foetus, distended by the waters, a mistake which could not fail to occasion much confusion and groundless apprehension.

After finding that the swelling was confined to one of the labia pudendi, I suspected it to be a hernia; but as the patient had never perceived any enlargement in that place before her in-lying, this supposition was not probable; and upon introducing my finger at the opening, I was soon convinced that there was nothing contained in it but coagulated blood.

It would seem that by the pressure of the child's head, and the violent stretching of the parts during the labour pains, some of the small blood-vessels had been burst, and had depo-
deposited a quantity of blood in the cellular membrane, which is interposed betwixt the doublings of the skin that form the labia pudendi. That this is the nature of the swelling appears more probable, when we compare it to the haemorrhoids, which it exactly resembles; and I am persuaded that the same astringent applications which are proper in them, would, likewise, in this case, be the best remedies. With regard to the orifice, which we have conjectured to have been made by the midwife, it must be allowed, that the swelling may have burst of its own accord; yet I am inclined to think otherwise, from its having happened before the internal lining of the vagina, (a firm, compact, membrane) could, in all probability, have given way, and from the great difficulty there was of distinguishing the swelling from the surface of the protruded membranes.

I purposely avoid saying any thing of the incontinence of urine, or the laceration of the perineum; they are not uncommon accidents in laborious cases; nor would an account of them contribute to the right understanding the swelling, which alone I meant to describe.
MR. Andrew Lumisden, in a letter to Charles Webster, one of the physicians to the Public Dispensary at Edinburgh, dated at Montbard, Sept. 20, 1778, gives the following account of a work in which that justly celebrated philosopher M. le Comte de Buffon has been lately engaged.

"M. le Comte de Buffon has been pleased to communicate to me, partly printed, and partly in manuscript, Les Epoques de la Nature, which he will soon present to the public. The learned, eloquent, and amiable author seems to have excelled even himself, in this ingenious and sublime work. I have not
at present time to analyze, and shall therefore only attempt to give you a slight idea of it.

"As in civil history we consult records, we examine medals, we decipher ancient inscriptions, to determine epochs of human revolutions, and to establish the dates of moral events; so in natural history we must examine the archives of the world, draw from the bowels of the earth its ancient monuments, collect its ruins, and unite, in a body of proofs, all the marks of phylcal changes, which may point out to us the different ages of the world. This is the only means to fix some epochs in the immensity of space, and to place a certain number of mile-stones in the road of time.

"This is what M. de Buffon has done in his History of the Epochs of Nature. His theory is founded on the following principles, viz.

"1st. The earth is elevated at the equator, and flattened at the poles, in the proportion that the laws of gravity and centrifugal force require.

"2o. The terrestrial globe has interior heat, which is proper to it, and which is independent of that which the rays of the sun can communicate to it.

"3o."
"3°. The heat which the sun bestows on the earth is small, compared to the proper heat of the terrestrial globe; and the heat of the sun would not be sufficient to keep nature alive.

"4°. The matter of which the terrestrial globe is composed, is, in general, of the nature of glass, and may be reduced to glass.

"5°. We find on the surface of the earth, and even in mountains from 1500 to 2000 toises high, a vast quantity of shells, of the production of the sea.

"Having established these principles, by a variety of proofs and observations, he traces seven epochs of nature.

"1. When the earth and planets acquired their form.

"2. When matter, being consolidated, formed the interior rock of the globe, as well as the great vitrifiable masses which are on its surface.

"3. When the waters covered our continent.

"4. When the waters retired, and the volcanos began to act.

"5. When the elephants, and other animals of the south, lived in the countries of the north.

"6.
6. When the continents were separated.
And,
7. When the power of man seconded that
of nature.

In establishing these epochs, he is obliged
to make the world much older than we com-
monly suppose it. He therefore interprets
Moses's six days of the creation, to mean six
different periods, distant from each other.

It was on account of Les Epoques de la
Nature, that M. Gueneau de Montbeillard,
the friend and associate worthy of M. de Buff-
on, made him the following compliment on
his birth-day, the 7th of this month.

O jour heureux qui vis naitre Buffon
Nous te benissons tous avec effusion
Et tu fera chez la race future
Pour les amis du vrai, du beau, de la raison
Une Epoque de la Nature.

* * * *

The following account of a method by
which the inhabitants of the western isles of
Scotland, excite a fever and cure the rickets,
has lately been communicated to Dr. Duncan,
by an ingenious gentleman, in whose veracity
and accuracy our readers may put great de-
pendence.

" We
"We are indebted to the most uncultivated part of mankind for many useful discoveries, especially in medicine; and however inexplicable they may be by our theories, yet even the most unpromising of them deserve attention and trial, more especially when they may prove useful in saving the lives of many of our fellow-creatures.

"The medicine made use of in the western islands for the cure of the rickets, is an oil extracted from the liver of the skate-fish. The method of application is as follows. First, the wrists and ankles are rubbed with the oil in the evening; this immediately raises a fever of several hours duration; when the fever from the first rubbing subsides, the same parts are rubbed again the night following, and repeatedly, as long as the rubbing of these parts continues to excite the fever: after no fever can be excited by rubbing the wrists and ankles alone, they are rubbed again along with the knees and elbows. This increased rubtion brings on the fever again; and is practised as before, till it no longer has that effect. Then the vertebrae and sides are rubbed along with the former parts, and this rubtion, which again brings on the fever, is repeated as the former. When
no fever can be longer excited by this unction, a flannel shirt, dipped in the oil, is put upon the body of the patient; this brings on a more violent and sensible fever than any of the former unctions, and is continued till the cure is completed, which commonly it is in a short time.

* * * *

The following account of the good effects derived from the powder of the Verrucæ Equinæ in cancerous affections, has been recommended to Dr. Duncan, by Mr. John Bell, one of the clerks in the Royal Infirmary at Edinburgh.

"I lately received a very extraordinary history of the effects of the powder of the Verrucæ Equinæ, in a case of cancer, from a surgeon in very great practice in the south of Scotland.

"A lady had been cut for a scirrhous mamma, and in about a year and a half after the operation, several small ill-conditioned ulcers appeared about the cicatrix of the former wound. Two eminent physicians were consulted: they advised the use of mercury, with the decoct. lignorum; and at the same time observed that they did not expect to be of much service to her,
her, as, from all appearances, she was dying very fast. These remedies were tried without any benefit, and when she was reduced to the lowest state, this medicine was eagerly grasped at by her friends. Her surgeon, in order to please them, prepared a quantity of it, and gave it to her in the dose of ʒij twice or thrice a day. Its operation was by sweating, which, he says, it produced very powerfully. Soon after this, the ulcers began to look better, the flying pains abated, her appetite and colour returned. She was again restored to as good health as she had enjoyed for some years before. However, she at the same time had a prolapsus uteri, and several other bad symptoms concurring, unconnected with the complaint of her breast, she was brought to the same weak state in which she had formerly been, and is now either dead or dying. Still, however, she continues the Pulvis Verrucæ Æquinae, and since she began the use of it, has been free from the pain in her breast, and the flying pains over her body, which formerly gave her so much uneasiness. The sores never healed, but the discharge from them was perfectly mild.

"I am also informed by the same gentleman, that a lady in Cockermouth has been
completely cured of a cancer in her breast, which had returned after the operation, entirely, as he says, by the use of the same remedy. She continued it for three months or upwards.

* * * * *

There is perhaps no function of the animal economy which has been more the subject of inquiry and experiment, than that power by which living animals generate heat. Although many hypotheses have been offered concerning this function, yet no theory has been presented to the public, supported on arguments so convincing, as to obtain general belief, at least for any length of time; and indeed, almost every ingenious physiologist, probably from his being sensible of the objections which occurred to the theories contended for by others, has on this subject held an opinion peculiar to himself.

While Dr. Duncan taught the institutions of medicine in the University of Edinburgh, during the winter 1774, he endeavoured to refute not only the common hypotheses on this subject which are to be found in physiological systems, and which refers animal heat to mixture, putrefaction, friction, or similar causes, but
but likewise the doctrines which were taught by those ingenious and learned professors, Dr. Cullen and Black; the first of whom imagined that animal heat was to be explained from oscillations excited in the nervous fluid, while the last referred it to the effect of respiration on the living system. After stating what to him appeared to be objections sufficiently valid for overturning their opinions, he submitted to the consideration of the students, a conjecture of his own with respect to the cause of this property, possessed by living animal bodies.

Dr. Duncan's hypothesis is, that animal heat is produced by the evolution of the phlogiston, or principle of inflammability, contained in the blood; and that this evolution is brought about by the action of the blood-vessels.

This doctrine, which Dr. Duncan then taught and still teaches, he endeavours to prove by attempting to demonstrate the following propositions.

1. That the blood does contain phlogiston.
2. That this phlogiston is evolved, extricated, or brought into a state of activity and motion, by the action of the blood-vessels to which it is subjected in the course of circulation.

3. That
3. That the evolution of phlogiston is a cause which, through nature, produces heat, whether that heat be apparently excited by mixture, fermentation, percussion, friction, inflammation, ignition, or any similar cause.

And lastly, that this heat, which must be produced in consequence of the evolution of the phlogiston from the blood of different animals, is, in all probability, equal to the highest degree of heat which these animals in any case possess.

Having thus endeavoured to prove, that the cause which he assigns for animal heat, does exist, and is adequate to the effect which he ascribes to it; he next attempts to shew, that this theory explains all the phenomena of animal heat; and he thinks that upon this ground, a rational and satisfactory explanation may be given of all those circumstances which have been employed by modern physiologists as arguments in support of particular theories, or as objections to them. Among other phenomena, he endeavours to account for the general connection which the heat of the human body has with the motion of the blood; for those striking exceptions to this which occur in some particular instances, and which afford un-
surmountable objections to the theories referring animal heat to friction or similar causes; for the equality of heat in every part of the system in a state of health; for the increase or diminution of it in particular parts, which sometimes takes place in disease; for the stability of heat in animals of every different genus, while they continue in a healthful condition, although they be exposed to very different degrees of heat in the surrounding atmosphere; for the connexion which the heat of animals of different genera, and even of the same animal at different times, has with the state of respiration; and lastly, for the degree of heat which different animals possess, being greater or less in proportion as their circulating fluids have more or less of a red colour. From the consideration of these different particulars, Dr. Duncan is led to conclude, that the ready explanation which this theory affords of the leading phenomena, tends greatly to confirm the evidence in support of it, drawn from other circumstances.

Among the gentlemen who attended Dr. Duncan’s lectures at the time when he first taught this doctrine was, Dr. Patrick Dugud Leslie, now physician at Durham, who not
only adopted the opinion, but soon afterwards made it the subject of his inaugural dissertation, when he obtained the degree of Doctor of Medicine from the university of Edinburgh. In that Dissertation, which is entitled, De Caloris Animalium Causa Dissertatio, and which Dr. Dugud publicly defended on September 12, 1775, besides employing the reasoning which had before been used by Dr. Duncan, he supports the hypothesis by many other ingenious arguments. Since that time Dr. Dugud's attention has, it seems, been much employed upon this subject, and he lately distributed the prospectus of a work which is already in the press, and will speedily be published. This work is entitled, A Philosophical Enquiry into the Cause of Animal Heat, with incidental Observations on several Physiological and Chymical Questions connected with the subject.

According to the analysis which has been distributed, the principal subjects incidentally treated of are the following:

1st. Nature and properties of phlogiston, or the elementary principle of fire.

2. The cause of the augmentation of weight in metallic calcinations.

3. The cause of colour in the blood and bile.

4. The
4. The final cause of respiration.

5. The changes which atmospherical air suffers by contributing to inflammation, or by entering the lungs of living animals.

6. The principal doctrines of the nature of fire.

7. The phenomenon of the ethereal medium, the electric fluid and phlogiston, with proofs of their identity.

8. The nature of light.

9. The extensive influence of the phlogistic fluid in the operations of nature.

10. The general laws of heat, &c.

Although many of these inquiries cannot be considered as strictly connected with the cause of animal heat, yet they respect interesting questions in natural science; and the presumption is, that the lover of philosophy, as well as the physiologist, may find amusement in the perusal of what is said with respect to them.

* * * * *

We have already given some account of the building erected at Edinburgh, for the use of the Medical Society of that place. Every one who has formerly been acquainted with the
the Society, and who has still an opportunity of visiting it, is now fully sensible of the advantages which have resulted from this measure. We cannot give a better account of its present state than in the words of a very elegant valedictory address, delivered by Dr. Parry, one of their presidents, at the conclusion of the last winter session.

"Ever since the institution of the Medical Society, it has continued to grow and flourish. Its debates have been conducted with a liberal spirit of inquiry. Truth has been allured from her deepest recesses, and exhibited in all her native charms.

"Error, however sheltered, and however disguised, has been boldly arrested, stripped of every adventitious ornament, and exposed in all his genuine deformity. The knowing have freely communicated their knowledge; the uninformed have profited; and all have reaped their share of the general harvest of science.

"During a long residence in this university, I have been myself a witness of its growing worth; and I can with truth declare, that I have never seen that period when it has been adorned with so many able speakers, or enriched
siched with so many excellent dissertations, as during the past session. We have been fa-
voured with numerous essays, which would have done honour to the most active experi-
menter, the profoundest reasoner, the most experienced practitioner, and even the ablest rhe-
torician."

But even in this flourishing state, the so-
ciety still found, that from their not being a corporate body, there were difficulties in obtaining complete titles to their real property, and in securing and managing both it and their valuable collection of medical books, and other moveable effects, so that they might remain with the society in perpetual succession, agree-
able to the design of the contributors. They were therefore advised to present a petition to his majesty, praying, that he would be most graciously pleased to grant his royal charter, or letters patent, erecting them into a body politic, or legal incorporation. In consequence of this petition, his majesty has granted a warrant, dated at St. James's, the 14th day of December, 1778, from which the following clause is extracted.

"His majesty being satisfied that the design of the petitioners is laudable, and that they de-
deserve encouragement, does therefore ordain a patent, or charter, to be passed, or expedite under the seal appointed by the treaty of Union, to be kept and used in Scotland, in place of the great seal formerly used there, constituting, erecting, and incorporating, as his majesty, by his prerogative royal, and special grace, for himself, and his royal successors, hereby constitutes, erects, and incorporates, and perpetually establishes and confirms, the said Robert Freer, James Melliar, Andrew Wardrop, and Caleb Parry, and their successors, presidents of the said society for the time being; and other persons, who now are, or hereafter shall be, members of the said society, into one body, politic and corporate, or legal incorporation, under the name and title of The Medical Society of Edinburgh; and as such, and by such name, to have perpetual endurance and succession; and to be able and capable to take and hold property, real and personal, and to sue, plead, defend, and answer; and to be sued, impleaded, defended, and answered, in all, or any of his majesty's courts of justice, and in other respects to act, or do, agreeable to the law and practice of his majesty's kingdoms in like cases.

While
While this grant will put the property of the society, on the most secure, convenient, and honourable foundation, it cannot fail also, to contribute to the extension of their literary usefulness; and it must prompt every member to exert redoubled efforts, in endeavouring to render the society worthy of this pre-eminence.

That the expence of this charter might not prevent the society from speedily completing those parts of their building which are still unfinished; and particularly that it might not retard them in fitting up the apartments intended for chymical and philosophical experiments, a subscription was some time ago set on foot among the members of the society, for defraying this additional expence; and many of those who formerly contributed towards the building of the hall, have again become contributors for this purpose, among which number are all the present medical professors. It is hoped also, that many others, who neither want ability nor inclination to give aid to an institution calculated solely for the advancement of medical science, will not overlook the present exertions of the Medical Society; and that its members in particular, wherever they are, will, according to their respective
pective powers, contribute, and promote contributions, which may tend to the completion of those valuable objects at which the society aims.

Contributions are received at Edinburgh by Dr. Andrew Wardrop, Dr. Edward Stevens, Mr. Stephen Pellet, and Mr. John Ford, present annual presidents of the society; or by Dr. Andrew Duncan, present treasurer. Contributions will also be regularly transmitted to the society when paid at London, to Mr. John Murray, Bookseller, No 32, Fleet-street.

* * * * *

The History of Epedemics, by Hippocrates, in seven books, translated into English, with notes and observations by Samuel Farr, M. D. has been for some time in the press, and will speedily be published. It is in general allowed that this work of Hippocrates contains not only the most ancient but the most valuable observations in physic and surgery. The presenting it therefore to the public, in a proper English dress, is an undertaking well meriting approbation and encouragement. And the proofs which Dr. Farr has already, on many occasions, given of his literary abilities, sufficiently
ciently demonstrate that he is by no means unequal to the task he has undertaken. We may therefore hope that the loss which many practitioners sustain, from their not being able to have ready access to the original, will be in a great measure compensated by this translation.

* * * * *

A Medical Register for the year 1779 is proposed to be printed at London, and continued annually. This work is intended to include a general catalogue of the physicians, surgeons, and apothecaries in Great Britain and Ireland, and likewise of the professors of medicine in our own and foreign universities, and of many eminent physicians and surgeons on the continent. But in the prospectus of this work, which has been published, the editors observe, that they do not mean to offer it to the public merely as a register of names. They propose also to give short accounts of all the incorporated medical bodies in Great Britain and Ireland, of the different medical charities throughout these kingdoms, and of the British and foreign universities, as far as least at respects the medical department. Besides these, many other articles are mentioned in the general view of
of the contents of the work, which must equally serve to gratify curiosity and to afford instruction. Among other particulars, they propose to conclude the work with a catalogue of the medical books published in different parts of Europe during the year 1778, giving a concise character of such as are worthy of notice. This article alone, if it be properly executed, cannot fail to render the work highly acceptable to every lover of medical science. And as it is intended that the publication shall be an annual one, under this head, new and important materials will constantly be afforded. The editors strenuously solicit the kind assistance of gentlemen of the faculty resident in the British dominions, in sending lists of the practitioners settled in different cities and towns, and accounts of the several county infirmaries. And they desire that correspondents will be pleased to send their letters addressed to Mr. John Murray, bookseller, No 32, Fleet-street, London.

* * * * *

We formerly mentioned that Mr. Andrew Bell, an eminent engraver in Edinburgh, was engaged in preparing for publication a new edition of the tables of the skeleton and muscles
COMMENTARIES. III

cles of the human body, by Dr. Bernard Siegfried Albinus, translated from the Latin. And as a specimen of this work, three tables of the bones, and one of the muscles, were published about a year ago. We have the pleasure of informing our readers, that the remaining part of the tables are now finished, and that the whole will be speedily published. As far as we are capable of judging, these engravings are executed in such a manner as must render this work a very valuable addition to the library of every lover of anatomy. And if it has suffered in some particulars from the reduction of the size, it is thereby rendered both more commodious, and much cheaper than any former edition, while at the same time all the parts and characters appear to be expressed with equal distinctness. And the outlines are engraved in a bolder manner than in the original, which renders the expression of the different parts more apparent.

* * * * *

Dr. Alexander Monro, professor of anatomy at Edinburgh, has lately taught in his lectures many particulars respecting the brain and nerves, which are entirely new, and which must
must lead to very different opinions respecting these organs, from what any physiologists have hitherto entertained. He has also read a paper on the same subject in the Philosophical Society of Edinburgh.

Of his descriptions, which are founded entirely on microscopical observation, conjoined with nice dissection, and which are illustrated by numerous engravings, we cannot at present pretend to give a sufficient account. We may only observe, that he finds the structure of these parts to be very different from what was formerly imagined. He has discovered that the brain and nerves, in all classes of animals, in place of straight fibres are everywhere composed of convoluted fibres, nearly part of an inch in diameter, which do not seem to be hollow, but solid.

He finds that their extent in the system is much greater than has ever been believed; and that they not only enter the composition of parts intended for sense and motion, but also of every other part of the body. Thus he has discovered them penetrating to the very extremities of the longest hairs; and in great numbers entering the composition of the cuticle and nails. He farther alleges, that the bulk
bulk of all our organs depends chiefly on their nerves; and that when muscles or bowels are cut transversely, many more nerves are divided than when the same operation is done upon the cord, called by anatomists the nerve of that part.

He finds also, that a system of convoluted fibres, in every respect analogous to the nerves of the human body, is to be discovered throughout the whole vegetable kingdom. Nay, that the metals, semi-metals, earths, and salts, consist almost entirely of convoluted and serpentine fibres, similar to the nerves of animals in size and shape.

How far the testimony of future observers will confirm Dr. Monro's descriptions, is not for us to determine. But we may venture without hesitation to assert, that if the account which he has given stands the test of sceptical scrutiny, it must be considered as the greatest anatomical discovery which has been made for many years.

* * * * *

A History of Edinburgh, by Hugo Arnot, esq. advocate, is in the press, and will speedily be published, in which a full and accurate account is given of the Medical schools at that place.

Vol. VI. No. 21. H SECT.
An enquiry into the original state and formation of the earth; deduced from facts, and the laws of nature. To which is added an appendix, containing some general observations on the strata in Derbyshire, with sections of them, representing their arrangement, affinities, and the mutations they have suffered at different periods of time; intended to illustrate preceding inquiries, and as a specimen of subterranean geography. By John Whitehurst. 4to. London.

Historical and practical enquiries on the section of the symphysis of the pubis, as a substitute for the Caesarian operation, performed at Paris by Mr. Sigault, October 2d, 1777. By Mr. Alphonse le Roy, Doctor Regent of the Faculty of Physic in Paris, and Professor of Midwifery, &c. Translated from the French by Lewis Poignand, of the Corporation

An experimental system of metallurgy, with general remarks and explanations. By the late John Henry Hampe, M. D. fellow of the Imperial Academy; and of the Royal Society of London. Folio. London.

An essay on the erysipelas, or that disorder commonly called St. Anthony's fire. By James Bureau, member of the corporation of Surgeons. 8vo. London.

Thesaurus medicus sive disputationum in academia Edinensi, ad rem medicam pertinentium a collegio instituto ad hoc usque temporum defunctus, a Gulielmo Smellio, S. P. E. S. Habitus. Tom. 2. 8vo. Edinburghi.

Memoires sur la maniere dont les animaux sont affectes par differens fluides aeriformes, mephiliques et sur les moyens de remedier aux effets de ces fluides. P. M. Bucquet. 8vo. Paris.

Memoire sur le philogistique consideré comme le cause du developpement de la vie. Par M. Senebier. 8vo. Geneve.


Dissertation sur l' huile de Palma Christi ou l' huile de Ricin que l'on appelle communément
ment huile de Caflor, &c. par le Docteur Pierre Canvane, medecin a Bath; ouvrage traduit de l’Anglois, par M. Homart de la Chapelle, medecin de Paris. 8vo. Paris.

Detail des succés de l’établissement que la ville de Paris, a fait en faveur des personnes noyées & qui a été adopté dans diverses provinces de France. Cinquieme partie. On y a joint differentes observations & divers avis sur les personnes suffoquées par des effets mephitiques quelconques, dont la plupart ont été rappelles a la vie par des moyens analogues a ceux qu’on emploie en faveur des noyes: par M. Pia, ancien echevin de la ville de Paris.

Memoire fur les funestes effets du charbon, allumé, avec le detail des cures & des observations faites a Nancy sur le même sujet, par M. Harmant, membre de l’Academie des Sciences, & conseiller-medecin ordinaire de feu S. M. le roi de Pologne, Duc de Lorraine & de Bar. 8vo. Nancy.

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MEDICAL
AND
PHILOSOPHICAL
COMMENTARIES.

By a Society in Edinburgh.

L'Impatience du mal, l'amour de la vie, l'horreur de la mort,
sentiments aussi naturels que celui de notre existence, firent
chercher aux hommes la guérison de leur maux.

DUJARDIN.

VOLUME SIXTH.

PART II.

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M.DCC.LXXIX.
MEDICAL
COMMENTARIES.

SECT. I.

An Account of Books.

I.

Joannis Steidele Chirurgiae, et Artis Obelixtriciæ in
Univeritate Vindobonensi Professoris publici ex-
traord. Observationes de Rupto in Partus dolori-
bus Utero, Epicrisibus illustratæ. 8vo. Vindo-
bonæ.

In this treatise five cases are related of diffi-
cult labours, in which ruptures of the uterus
occurred. In some of them our author was
immediately concerned as a practitioner in mid-
wisery; the others were communicated to him
by friends and acquaintances.
In the first of these cases, our author was called to the assistance of a woman who had been twelve days in labour. The account he got from the midwife, and another practitioner who attended, was, that the patient had formerly been delivered of eight children, and of all of them with tolerable ease; that the midwife, who now attended, and who officiated on all the other occasions, on being called at this time, found the abdomen exceedingly tumid; but as the orifice of the uterus was somewhat dilated, and the head of the child presented very favourably, she had not the least doubt of the labour going on easily. The membranes had burst on the second day from the commencement of the pains, and nothing farther had as yet been done than prescribing some internal remedies for the relief of a most violent pain in the region of the os sacrum. Our author, on examining the patient, found her very weak, her pulse exceedingly quick, and frequently intermitting; she was obliged to sit in an erect posture, as she found herself in danger of suffocating on attempting to lay down in bed. He was told by the midwife, and likewise by Mr. Lebmacher, the other practitioner who attended, that the head of the child had always continued to present, and that the pain in
in the region of the sacrum had continued without intermission, till lately, that a sudden cracking noise had been observed even by the bystanders; immediately upon this the pains had abated, but a very considerable haemorrhage had occurred from the vagina.

The head could not now be discovered, and the woman being in a very desperate situation, our author judged it advisable to effect a delivery immediately by the feet, which was accordingly done, the child being dead; but as it did not appear to have been long so, some attempts were made for its recovery, though without effect.

Nothing was omitted that could with any probability be of service to the mother; but no relief being obtained, she at last died on the twelfth day after delivery. The belly had swelled to a very great degree, and any lochial discharge that had occurred was exceedingly foetid, and of a dark brown colour. On opening the abdomen, after death, a vast quantity of bloody water was discharged, and also a great deal of very foetid air. Theomentum, stomach, and intestines, were greatly swelled and distended, and considerable adhesions occurred between different viscera; an
extensive rupture was found in the uterus, being internally of about four inches in length, and externally very nearly six inches.

The cavity of the uterus contained a quantity of black putrid blood, the body of the uterus itself, near to the ruptured parts, was gangrenous, but the peritoneum covering that viscus was not in any degree affected.

The second case here related was communicated to our author by Mr. Cranz. A woman having died in the course of a tedious labour, the Caesarian operation was performed, soon after death, when the uterus was found ruptured to such an extent as to admit of the body of the foetus being almost wholly protruded into the cavity of the abdomen. The only circumstance which occurred on dissection as the cause of the rupture of the uterus, was, the size of the foetus, which was much larger than usual; and, from the account given by the midwife who attended, it had probably presented in a preternatural direction.

Cases third and fourth occurred, we are informed, to Mr. Lebmacher of Vienna. The Caesarian operation was in both performed soon after the death of the mothers, but we are not informed whether either of the children were saved or not.
As a more concise and distinct account is given of the different circumstances which occurred in the fifth Case related by our author, than any of the preceding, we shall here transcribe the history.

He was called on the 22d of June to a woman newly dead in labour, with a view to save the child by the Cæsarian operation. The abdomen, instead of being tense, and of a roundish shape, was soft and collapsed, and the limbs of the child were very perceptible to the touch, upon pressure on the right side of the abdomen.

On making an incision into the left side of the abdomen, a great quantity of fluid blood burst out, together with the head of the child, and a dead foetus was immediately extracted.

The size of the foetus was less than usual at the eighth month of pregnancy, the colour of the skin appeared natural, nor was there anything morbid discovered, and the placenta, being separated from the uterus, was extracted entire.

A rupture of considerable extent was detected in the anterior part of the uterus, a little above its neck, between that and the fundus;
the peritoneum, near to the laceration, was every way separated from the uterus. The uterus appeared of a natural healthy colour externally, but its internal surface was somewhat spongy and gangrenous; the ligaments of the uterus, together with the ovaria and Fallopian tubes, were of a deep red colour. All the rest of the viscer a appeared natural, but a considerable quantity of blood was found extravasated in the abdomen, and the entrance to the pelvis, between the pubis and sarcrum, was somewhat more narrow than usual.

The following is an account of circumstances which preceded this woman's death, as obtained from the midwife, the husband, and other relations. She was 35 years of age, had been liable to some abortions, but had nevertheless been delivered of ten children, of which several were then living. All her labours were tedious, and attended with convulsions; during this last pregnancy, she frequently complained of a pain above the ilia, and upon the pelvis, which, at times, was very acute, and on other occasions more tolerable; and about seven weeks before her death, she fell upon the street, with her abdomen towards the ground, which left a kind of hot burning pain upon the
the parts thus particularly exposed to the violence.

The day preceding that of her death, the patient was seized with burning pains over the abdomen, and on the region of the os sacrum; and in the evening a small degree of haemorrhage from the pudenda was observed. On the midwife being called, she could not distinguish properly whether the head of the child presented or not, although the orifice of the uterus was somewhat dilated, and a very considerable weight was discovered about its neck.

The burning pains in the region of the sacrum, and on the anterior part of the abdomen, became more violent, so as to be very tormenting. About two in the morning, the patient raised herself up in bed, passed her urine, and immediately fell down again, crying most violently with pain. The pain above the pubis was so excessive as to give a sensation as if fire was actually applied to the parts, and delirium, attended with convulsions, immediately occurred.

The midwife, at this time, although the orifice of the uterus still remained dilated, could not discover any part of the foetus; the haemorrhage had now disappeared, the patient some-
sometimes vomited, and was troubled with frequent faintings; the face, hands, and feet became cold, and in a short time thereafter she died. A physician, who had been called in about an hour before death, prescribed blood-letting, and some other remedies, but without any effect.

The midwife still asserted that she never could distinguish the head of the child; and she likewise said that she could not discover the membranes, and that the waters never appeared. The patient during the last day of her life, lost the use and feeling of her left arm, and could not move it in any degree, but with the assistance of her right hand. Our author, in his remarks on this and the preceding cases, observes, that in this last case, the signs which commonly precede a rupture of the uterus were pretty manifest, particularly these pains in the regions of the osa ilia and pubis; that burning pain which in the beginning of the labour became so intolerable; the neck of the uterus always continuing high, and the child making no progress, although the labour-pains were pretty severe.

The symptoms which occurred on the rupture actually taking place, he observes, were very
very characteristic of this event, particularly that acute burning pain which instantly succeeded an effort to make water; the want of that weight at the orifice of the uterus, which the midwife had previously observed; together with the vomiting, delirium, and convulsions, which afterwards took place.

The causes which evidently occurred here for the rupture of the uterus, were, the many difficult labours which the patient had formerly undergone; a circumstance which our author remarks, might probably tend to weaken the uterus; but the most immediate cause he supposes to be an inflammation, with that tendency to gangrene observed after death, and which, he thinks, might probably be induced by that fall, we are told the woman met with, a short time before her being taken ill.

When, from a very tedious labour, or other circumstances, there is reason to suspect that a rupture of the uterus may occur, we are directed, as the most certain preventative, to effect a delivery as quickly as possible, by turning the child, if the head presents, and extracting by the feet.

In the five cases here related by our author, the ruptures all occurred in different situations of
of the uterus, which gives him occasion to remark, that every part of that viscus is equally liable to be ruptured.

II.

Georgii Haffner Nosocomii Pazmariani Chirurgi Dissertatio Medico-Chirurgica, de Hydrope Articulorum. 8vo. Vindobonæ.

By dropical swellings of the joints, our author here means those tumors whose contents are either preternatural quantities of the synovia of joints, or collections of purulent, serous, or watery fluids. All the joints of the body are subject to this disorder, but it occurs more frequently, we are told, in the knee than in any other.

The following are enumerated by our author as the symptoms of the first stage of the disease.

A pain is perceived on motion, which at first is slight, but afterwards becomes very severe. A soft colourless tumor is observed, which yields so much upon pressure, as to admit, when it affects the knee, of the condyles of the femur being felt. The swelling is at first equally diffused over the patella and neighbouring parts; but as it increases in size, it becomes frequently confined to
to particular parts, insomuch, that on some occasions no tumor whatever is perceptible about the insertion of the tendon into the patella, while on one or both sides of it a very considerable degree of swelling takes place.—As the disease advances, the tumor, in some instances, arrives at very great degrees of magnitude, extending from two or three inches above the patella to an equal distance below it. In general, the fluctuation of a fluid is very evident; but when the matter happens to be deep, and especially when any degree of rigidity in the ligaments occurs, the fluctuation then becomes less perceptible.

These are the symptoms which usually occur in the more recent state of such swellings; but when the disorder has either been of long continuance, or has been improperly treated, it forms, as it were, a new disease, perfectly different from the original dropsy of the joint, to which, indeed, it at last comes to retain no kind of analogy.

In some such instances the collection of matter becomes so considerable as to occasion real dislocations of the joints; but when, from the strength of the articulation in the joints, dislocations do not occur, the flagrating fluids, either
either from the heat of the parts, or from their own proper acrimony, come to produce erosions, inflammations, and suppurations of the ligaments and other soft parts, with various affections of the bones, which at last are commonly succeeded by fever.

The cause of dropsical swellings of the joints, are referred by our author to two general heads. The first comprehends whatever can produce an accumulation of the synovia of the joints, and the second includes all such causes as can occasion a deposition of any other kind of fluid in the cavities of joints.

Some affections of the joints are enumerated, with which disorders of this nature are apt to be confounded; the first of these are swellings of the fungous kind. The following are the means of distinction pointed out by our author.

In the first place he observes, that fungous excrescences are commonly situated without the cavities of the joint, and are moveable with the skin, whereas dropsical collections of this nature are always contained in the capsular ligaments of joints.

2d. The former most frequently proceed from external violence, whereas the latter usually arises from some internal cause.

3d. The
3d. The want of fluctuation in tumors from fungous excrescencies afford another ground for distinction.

4th. The duration of fungous swellings, without an aggravation of symptoms, is commonly much more considerable than ever occurs from dropsical collections.

And, lastly, astringent caustic applications, which, in fungous swellings, are commonly recommended, frequently here do mischief.

Hydropic swellings in the cavities of joints may sometimes too be confounded with oedematous tumors; but, by attending to the following circumstances, the one may always be readily distinguished from the other. An oedema always occupies the cells of the adipose membrane, whereas the other is always confined to the cavities of capsular ligaments. In the latter, a fluctuation is always more or less evident; whereas in the former no fluctuation ever takes place, and the swelled parts are easily pitted by pressure.

In the cure of disorders of this kind, we are directed, in their incipient states, always to attempt discussion. With this view, cold water poured upon the parts is recommended; frictions, frequently repeated; fomentations of wine, salt, vinegar, urine, and other acrid
substances; embrocations of any of the warm mineral waters, and more particularly fomentations of cicuta, which are advised as the most effectual application for every swelling of this nature. Hydrogogue purges, diuretics, sudorifics, and other internal medicines of the same nature, are directed to be used at the same time with these external applications.

By a proper continuance of a course of this kind, many hydropic swellings of the joints, we are told, have been removed; and one very bad case is related of a swelling of this nature, in the joint of the foot, attended with severe pains, and a considerable collection of a fluid, which was cured by the use of fomentations of cicuta alone.

But when disorders of this kind have been of long continuance, so as to have occasioned any considerable degree of swellings, we are directed not to have much dependence either on internal remedies or external applications. In such instances we are desired, as the only effectual method, to evacuate the contained matter by a small opening into the cavities of the joints. Different modes of opening such collections have been adopted; the most frequent is by means of a lancet, or trocar, and afterwards introducing small doses of lint, or other substances, to prevent a too sudden coalescence.
alescence of the parts. This method our author long pursued; sometimes it proved successful, but much more frequently it failed, from the formation of matter, febrile affections, and other bad symptoms which often ensued. At last, accident discovered a mode of proceeding, which he has ever since followed, and always with success.

A swelled joint was opened in the usual way, and it was intended also to prevent the sides of the wound from coalescing, by the introduction of proper dressings; as without attending to that precaution, it was not supposed that a cure could be obtained. When the parts came to be examined, however, with a view to their being dressed, the dressings were found to have been improperly applied, so that the wound in the capsular ligament of the joint was healed up. In consequence of this, our author never doubted but the operation would be to do over again, but was greatly surprised to find that the result proved otherwise, a speedy and lasting cure being obtained without any farther remedy than the use of cicuta fomentations to the parts. Since that period, our author has always practised this operation, in the following manner. Supposing the disease is seated
in the knee; as the swelling is commonly more prominent above the patella, and somewhat to one side than at any other part, the outer side of the joint is fixed upon for the opening, which he directs to be made with a small lancet, between the insertion of the tendon of the rectus muscle of the thigh, and the external hamstrings. After the opening is effected, all the contained matter is directed to be evacuated, either by proper pressure, or by a gentle rotatory motion of the leg and foot. This being done, the opening is to be as exactly united as possible, by means of an adhesive plaster, and a proper bandage.

On some occasions, we are told, a second opening has been rendered necessary, but this, our author says, occurs very seldom. Any small quantities of fluid, which sometimes remain in the parts, after every method has been tried for their evacuation, will in general be easily dissipated by the use of cicuta fomentations.

Our author does not mean to say, that the mode proposed will ever prove effectual, when the disorder has proceeded to any of its more advanced stages. In such instances, when the ligaments, bones, &c. become affected, very different methods of cure become necessary; it
is only in the simple state of a collected fluid that he means to recommend the practice. Having finished his observations upon dropsical swellings of the joints, our author then proceeds to favour us with some miscellaneous remarks on the treatment of other disorders.

A similar mode of treatment to that which is above recommended for collections about the joints, will probably be found to answer, we are told, in all tumors of the hydatide kind, in cases of encysted dropsy wherever they are situated, and in the empyema—Of this last disorder a case is related, where the practice proved effectual.

The following history being very remarkable, we shall state it fully. A woman, who for several weeks had complained of a violent pain in her right arm and shoulder, was, at her own earnest desire, let blood. The blood was taken from the found arm; in a very short space after the operation, she was seized with anxiety, difficulty of breathing, and heat about the precordia. These symptoms encreasing, the patient was at last seized with a difficulty of swallowing, which gradually became worse, so that for five days before death, she was not able to swallow any thing.

K 2

On
On opening the body after death, the pericardium was found so distended with an ichorous kind of purulent matter, that almost the whole cavity of the chest was filled with it; and no other cause for the difficult deglutition could be detected.

A very bad case of fistula in ano is related, that was cured by injections of a decoction of cicuta. The disease had been of two years standing; penetrated several inches up the rectum; and as there was a suspicion of the os sacrum being carious, a palliative treatment was attempted; in the space of six weeks from the commencement of the cicuta injections, a complete cure was obtained.

The last remark made by our author respects incarcerated hernia, in which the application of oats, moderately heated, to the swelled part, is recommended as a practice frequently found effectual at Vienna. It was among the common people only, that the practice took place. Our author acknowledges, that, for a long time, he placed no dependence upon their effects; at last, by repeated evidence of their influence, he was convinced of the contrary; and a case of hernia is related, in which, after it had resisted the use of tobacco-smoke, and every appli-
application common in such cases, the operation was resolved upon; but the patient's wife insisting on a trial of dried oats, the request was agreed to, and a cure was thereby obtained.

III.

Jacobi Kostrzewski; Poloni, Nobilis Patritii Varsoviensis A. A. L. L. et Philosophiae Doctoris, Dissertatio Medica de Gratiola. 8vo. Vindobonæ.

We are here favoured with a Dissertation on the medicinal effects of hedge-hyssop, the Gratiola of Linnaeus, Bauhin, and other botanical writers.

Before proceeding to the experimental part of the treatise, it may not be improper to give our author's description of the plant; and, with a view to avoid every risk of misrepresentation, we shall here deliver it in his own words.

Planta descriptio.

"Ex Radice alba, teretiuscula, geniculata, calami mediocris caffetie fibris albidis deorsum tendentibus, horizontaliter repente, stolonibus aucta, perenni emergunt."
"Caules dodrantales, aut aliores, ima parte, præsertim submersa, teretes, subnudi; reliqua parta subangulosi, erecti, intus spongiosi, meditullio inanes, jam simplices jamque ramosi.

"Folìs hi ornantur ex adverso poitis, glabrís, subtrinerviis, unciam aut fuscunciam longes, quatuor ad quinque lineas latis; ex basi latiore caulem amplexante & quasi in eo decurrente, unde caulis subangulosus adparet, ultra medietatem integris; altera vero parte apicem versus argute ferratis.

"Flores e foliorum axillis prodeunt solitarii, pedunculati; quorum.

"Calyx monaphyllus, in quinque lacinias tubulatas profunde partitus, vix non femper duobus alis foliolis linearis patentibus, nonnunquam vero cum ipso calyce coalitis, auctus est.

"Corolla monopetala tubo guadet calyce duplo longiore, deorsum incurvato, superius fuscecente, parumper conplanato, inferius ferdide luteo, sriato; ore partito in lacinias quatuor purpureascentes, obtusas, patentes; lacinia suprema leviter emarginata, parumper latiore magisque erecta, unde ringens quodammodo adparet flos."
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"Stamina intra corollæ saucem subvillosam latent duo antherisera, filamentis brevibus superiori parti tubi adcreta; alia duo filamenta ad basin corollæ egrediuntur libera, tenuia, tubi longitudine; anthera deficiente, cujus loco minutiusculum apice capitulum gerunt.

"Germen e fundo calycis persistentis exsurgit conicum, in flillum simplicem elongatum, stigmaté uncinato terminatum; quod in capsulam abit ex ovato acuminatam, dilute rufescientem bilocularem, bivalem, feminibus exiguis rufis feetam.

"Tota planta fapore insigniter amaro prædata est. Crescit passim in rivulis aliisque locis inundatis aut uliginosis.

"Floret mensæ Julio, et Augusto."

The second chapter of the Dissertation, contains the different appellations by which the plant, now under consideration, has been distinguished; and likewise the opinions of various authors with respect to its medicinal qualities.

In the third chapter are related three cases, which place in a striking point of view the good effects of gratiola in maniacal disorders; and in the last chapter we are favoured with an account of its effects in a variety of other complaints.
A stout robust man, aged 32 years, in the year 1772, was seized with a kind of melancholy, which very soon terminated in real mania; when he became so furious as frequently to break the chains with which it was found necessary to bind him down to his bed. After repeated blood-lettings, and various other remedies had been tried in vain, the patient was brought to the Spanish hospital at Vienna, in the month of October, 1774.

He was now as bad as ever; his appetite, however, was good, his pulse full, and the state of his belly and urine natural. Here also repeated blood-lettings were prescribed, with aperients, and large quantities of camphor; as also blisters, both to the neck and legs. But no beneficial effects being observed from these remedies, the powder of gratiola was at last had recourse to.

Half a drachm of the powder was exhibited at eight o'clock in the morning, and four pounds of decoction of grafs was allowed each day for ordinary drink. In an hour after taking the powder, both vomiting, purging, and a copious flow of urine were produced. Ten grains of the powder were also given in the evening.
Next morning another half drachm of the powder was prescribed; the patient was this day constantly delirious, and his pulse had suffered no material alteration. The same effects of vomiting, purging, and a copious flow of urine, were again the consequence of the exhibition of the powder. The evening dose was now omitted.

The same quantity of the powder was exhibited on the third day, and with the same effects. On the fourth day, the patient appeared more serene, his appetite was good, his sleep quiet, and no medicine was this day given, but the decoction of grass.

On the fifth day he was much more furious than in the preceding day: half a drachm of the powder was given in the morning; and in the evening four grains of pills, of the Cynoglossus, were prescribed.

On the 6th, 7th, and 8th days, the patient still continued delirious, and the medicines on these days were altogether omitted: on the 9th, 10th, and 11th days, he was somewhat more quiet, and the medicine was again prescribed, and with the same sensible effects as before.

On the 12th day from the commencement of the remedy, the patient was in every respect
Spect much better; he answered questions distinctly, and did not now practice a variety of absurd gestures, he had formerly done. The decoction of græs was continued, but the grætiola was omitted. On the 13th day he was so well as to write a well-connected letter. On the 15th day he was still better, reasoned sensibly upon every subject; his pulse, tongue, and state of rest, were now all natural. A scruple of the powder was this day exhibited, and with the same effects as before, of vomiting, purging, and a copious flow of urine.

From this period, to the time of his dismissal from the hospital, which happened about seven weeks from the day of his admission, he continued in perfect health, and did not shew the least appearance of mania.

In the treatment of the other two cases of mania, cured by the use of grætiola, the remedy was exhibited in nearly the same doses, and in the same manner as related in the preceding case, and it uniformly produced the same effects of vomiting, purging, and a copious flow of urine.

We shall now give the particulars of a few of the other cases related by our author, wherein the effects of the remedy under consideration
derationf appeared remarkable. In these cases the powder was prepared as follows, and exhibited according to the following directions.

R. Extra.t. Gratiol. 5j.
Semen Fænic. 5j. M. f. pulvis tenuissimus, de quo sumantur ab initio ter de die grana decem augendo fessim dosim, donec diei spatio drachma integra absumatur.

The first of these histories contains the case of a girl, who laboured under an obstinate ozena, from a venereal taint. Having, for the space of six months, made frequent trials of all the usual antivenereal remedies, without any advantage, recourse was then had to the pulvis gratiolæ. The medicine being continued for the space of two months, or little more, a complete cure was thereby obtained.

A young man, aged 21, was affected with obstinate ulcers in the fauces, cariosities in the bones of the nose and palate, and tophi; and exostoses of the bones of the extremities. For the space of two years, every antivenereal remedy in common use had been had recourse to, but with no beneficial effect whatever, and at this time the pulvis gratiolæ was prescribed.

The usual symptoms of nausea, a copious flow of urine, and frequent stools, were the only
only effects at first observed from the medicament. On the 36th day from the commence-ment of the remedy, the ulcers on the fauces began to put on a better appearance, and in a short time thereafter were perfectly cured.—

The bones of the nose and palate exfoliated, the tophi and exostoses were by degrees dissipated, and the patient was dismissed entirely cured on the fortieth week from his admission to the hospital.

A man aged 92 years, after having for a great length of time made use of various remedies for ulcers in his forehead and arm, attended with various affections of the bones underneath, but without any advantage from them, was at last put upon a course of pulvis gratiolae.—Nausea, a copious flow of urine, frequent stools, and violent head-aches, were the first evident effects of the medicine; and in the course of a few weeks, a cure of the different symptoms was obtained.

A man, aged 34 years, was advised to have recourse to the same remedy for a venereal, cancerous-like ulcer on the penis, conjoined with a phymosis; the inguinal glands were also swelled and indurated.
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The usual consequences were first observed from the medicine; and to these a copious salivation supervened, about a month from the commencement of the remedy; and in the space of another month from that period, a complete cure was obtained.

The powder of gratiola was prescribed for a young man labouring under a swelled testicle, from a venereal infection. The medicine produced the usual effects of vomiting, purging, an increased secretion of urine, and it also acted as a powerful sudorific. In little more than a month the man was dismissed cured.

A girl, aged 24 years, was admitted for a fluor albus, conjoined with buboes, from a venereal taint; the pulvis gratiolae was here also prescribed.

On the 15th day from the commencement of the remedy, the fluor albus still continued violent, but the buboes were sensibly diminished; and in five weeks from the time of her admission, both the buboes, and discharge from the vagina, were entirely removed.

From the events of the cases above related, as well as from a variety of others in which this medicine proved equally efficacious, the follow-
following conclusions, our author observes, may be drawn with respect to it.

1st. The gratiola may be given with safety, both to male and female patients.

2d. In all disorders proceeding from a superabundance of serum in the fluids, it appears to be a most effectual remedy.

3d. In consequence of this, it is had recourse to, with very great advantage, in melancholia and mania, arising from that state of the system.

4th. As it powerfully promotes purging, vomiting, sweat, and urine, it is hence much superior to any of the usual evacuating remedies, most of which prove only active in inducing one of these discharges at once.

5th. The most obstinate cases of gonorrhoea, fluor albus, and venereal ulcers, are cured by the powder.—In some instances it has induced salivation; but whether or not it can always be made to produce that effect, is not as yet altogether certain.

6th. The powder of gratiola, prepared from the extract, and exhibited with sugar, does not induce vomiting; and on the contrary, the powder of the root always promotes that evacuation.

After giving a description of the insects termed cantharides, the following chemical analyses of them is related by our author. A pound of cantharides being put into a glass retort, properly fitted with a receiver, the retort was then placed in a sand heat; the fire was at first very moderate, but was gradually increased to a high degree of heat.

Three ounces and a half of an urinous kind of spirit, with a very disagreeable flavour, were first brought over. Six drams of a fœtid, brown, viscid oil, and two ounces of beautiful white crystals adhered to the receiver. The insects remaining in the retort still retained their original figure, although converted into a coal.—This coal, however, was not entirely deprived of its oil, as appeared from its being very inflammable, but on being lixiviated with water it did not appear to contain any fixed salt.

The spirit obtained by this process seemed evidently of a saline nature; blue vegetable

infu-
infusions were changed by it to a green colour. It effervesced with a solution of mercury in the nitrous acid, and yielded by precipitation a white powder.

As an opinion has very generally prevailed among practitioners, that the activity of cantharides depends upon the quality of the salt contained in them, several experiments were tried with a view to ascertain the fact.

A scruple of this salt being mixed with a drachm of melilot, was applied to the back of the hand, after the part had been rubbed with a woollen cloth wet with vinegar. As neither pain, vesication, nor even the least degree of inflammation was produced, after the plaster had been applied twenty-four hours, the quantity of salt was doubled, and a little of the oil and spirit of cantharides being added to the composition, the application was again renewed, but no effects whatever were observed from it.

With a view to ascertain the effects of the medicine, when exhibited internally, our author thought it prudent to proceed with more caution. On the first day of the experiment he took one grain; on the second, two grains;
grains; on the third, four grains; on the fourth, six grains; on the fifth, eight grains; on the sixth, ten grains; on the seventh, twelve grains: each dose being dissolved in a spoonful of water. And as no effect was produced by any of them upon the kidneys, he went on, increasing the dose four grains daily, till at last he came to take two scruples at once; and as even then no evident effects resulted from the medicine, he concludes, that it is not from the salt contained in cantharides, that they either blister when applied externally, or affect the kidneys when internally exhibited.

As our author did not propose, in this dissertation, to carry his enquiry farther than to determine the effects of the salt of cantharides, he does not pretend to say in what parts of these insects their activity resides.
In the volume now before us, we are favoured with a variety of interesting cases and observations, which appear to have been noted down by our author as they occurred to him in the course of his practice. Of these we shall here give an account of some of the most remarkable.

*De Tumore in Regione Umbilicali.*

A woman, who, for some time, had perceived a tumor on the umbilical region, applied to a person for advice, who had long been famous for the efficacy of a plaster in cases of hernia. As the case, now mentioned, was suspected to be of that nature, the plaster was applied, with a very tight bandage over it.

The tumor, which, till then, had not given much uneasiness, became painful and inflamed; and
and an abscess was soon produced, which terminated in an ulcer, by which the excrements from the intestines were discharged.

As the patient became daily worse, the assistance of our author was desired. On examining the parts, he found the opening in the gut was in that portion which forms the small intestines; at least he suspected so, from the food being now discharged at the opening, and with very little change being produced on it from the time of its being taken in at the mouth. With the excrements discharged by the anus, there were found mixed quantities of putresced worms.

As the woman, before the appearance of the tumour, had been liable to frequent pains in the abdomen, and had at different times both vomited and passed by stool worms of a very great length; our author immediately suspected these animals to have been the original cause of the disorder; instances of which he remarks are mentioned both by Tissot in his Avis au Peuple, and in the Physical and Literary Essays of Edinburgh.

On this supposition, the ulcer was dressed with simple digestives, and the opening was preserved with a view to encourage a discharge
of worms. At the same time, a course of anthelmintic medicines was prescribed.

In the space of ten days, or so, from the commencement of this treatment, a very great number of worms were discharged by the opening, some of them almost a yard in length. After this, the sore was allowed to heal; and a firm cicatrix being produced, a complete cure was obtained. With a view to prevent a farther generation of worms, a course of limatuta Martis was prescribed, with gentle purgatives at proper intervals.

De Ulceribus benignis intermptiive Sanatis.

The following is given as a remarkable instance of the bad effects of healing old ulcers, without the previous introduction of adequate drains.

A woman, aged 55, whose menses had left her five years before, consulted our author for an ulcer on each leg, which had been of a twelve-month's duration.

As the sores did not give much uneasiness, and as the woman enjoyed exceeding good health, she was advised to allow them to remain open, especially, as from their continuance the constitution had become habituated to
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to the discharge. If, however, she was resolved on having them dried up, two issues were recommended, with a view of discharging the same quantity of matter. The patient went away determined to follow the advice she had received. Unluckily, however, in a short time thereafter she happened to meet with an itinerant practitioner, who promised her a certain cure, without any risk to her health, and without the trouble of substituting any drain whatever.

By the use of strong astringent applications, a cure of the sores was very soon obtained, and the patient continued to enjoy her usual good health for the space of fourteen days. But about that period she began to complain of want of appetite, and a general lassitude; and, in eight days thereafter, she was seized with a violent hard cough, great heat upon her skin, a tenesmesis of the abdomen, and great difficulty of breathing.

These complaints becoming alarming, the assistance of our author was again called for. All the remedies usual in such cases were had recourse to, but with no advantage whatever. The difficulty of breathing, in the mean time,
increasing to such a degree, as to endanger suffocation.

It now occurred to our author, that nothing would probably prove so effectual for the removal of these complaints as the renewal of the drains to which the constitution had formerly been accustomed. And with a view to obtain as quick a discharge in that way as possible, several scarifications were made upon the seats of the former sores, all of such depths as to admit of the introduction of small pieces of Radix Iridis Florentina. The wounds being dressed with basilicon, and covered with a plaster, were left in that state for the space of three days without being looked at.

At the first dressing, the ointment and plaster were found wet with a kind of sanies; by degrees the discharge increased, and in proportion as the matter increased in quantity, the patient got gradually better; so that in the space of fourteen days, she was almost entirely well. Her appetite returned, she could now go to sleep with ease, and the difficulty of breathing very soon disappeared.
História valde curiosa Brachii Sphacelo corrupti.

A man, aged 72, was seized with a large inflammatory tumour on the back of his left hand, attended with continued violent pains, thirst, a smart fever, and delirium.

A plaster, and some other improper applications were, for some time, made use of, till a blackness had been observed over all the hand and part of the fore arm; the assistance of our author was then desired.

His first visit was on the 13th of July, 1772: the patient was at that time very low, his pulse small; a gangrene occupied the fingers, hand, and one half of the fore-arm. The parts were as hard as a piece of wood, and he complained of little or no pain.

Amputation of the limb was recommended by our author, as the only probable means of saving the patient's life, as it did not appear to be a case that could admit of any attempt for saving the limb, as recommended in cases of gangrene by Mr. Bilguer. But the operation was not agreed to, and our author not being in that part of the country for a good many months, did not again see the patient till...
the 18th of December following. At this time the patient did not complain of any pain, had no want of appetite, and his pulse was better. The gangrene had by this time spread up to the joint of the elbow.

As it was not supposed the man could live long, no farther enquiries were made about him, till a full year thereafter, viz. on the 19th of December, 1773, when our author called at his house, to learn the event of the case. The patient was still as firm and stout as ever, although at this time he laboured under a tertian intermittent; he had lost one of his eyes, the sphacelus had spread over the whole arm up to the shoulder-joint, the parts still continued hard, were equally black as a bit of smoked meat, but did not emit any cadaverous smell. At last, towards the end of that month the arm fell off, without the least haemorrhage ensuing, the remaining parts dried without any discharge whatever, and the old man, at the time of this publication, continued to enjoy very good health.

*De Tendine Achillis discefo, artificiosi deligatione feliciter sanato.*

A young healthy man, having unluckily got the tendo Achillis of one of his legs divided by
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by a cut, had recourse for relief to an ignorant practitioner, who, not regarding the wounded tendon, stuffed the cavity, occasioned by the wound, full of lint. This occasioning a great addition of pain, the assistance of our author was then desired. It was now two days from the time that the wound had been inflicted, which made it doubtful whether a re-union of the divided tendon could be expected or not. This, however, being attempted, a complete cure, we are told, was in due time accomplished.

The principal part of the cure consisted in keeping the divided parts as near together as possible, by the leg being kept bent, and the foot drawn backwards, and secured in that position, by means of proper ligatures, carried between it and a circular bandage placed upon the thigh.

VI. Ca-
VI.

Carol de Mertens, M. D. Observationes Medicæ
de Febribus putridis, de Peste, nonnullisque aliis
Morbis. 12mo. Vindobonæ.

Our author, who for several years practised as a physician in Moscow, in the first part of this treatise gives a very distinct and particular account of the rise, progress, and method of treatment of a putrid catarrhal fever, which prevailed in that city in the years 1768, 1769, and 1770.

In the second part of the publication, we are favoured with an account of the plague, which raged with such violence at Moscow, in the year 1771, as to carry off 70,000 of the inhabitants in the space of a very few months. In the month of September of that year, upwards of 22,000 died of it. There were even different instances of 1200 being carried off by it in the space of twenty-four hours.

The war which commenced between the Russians and Turks in the year 1769, and the intercourse which that event occasioned between the two nations, was the means, we are told,
told, of the plague being, at this time, introduced into Russia. For some time, the practitioners of Moscow were at a loss to discover how the contagion had been brought to that city, till at last it was discovered to have come from the army with two soldiers, who died in the military hospital of Moscow. Their bodies being given to an anatomist, he thereby received the infection of which he died. From him, and from the hospital where the soldiers had lodged, the disease very quickly spread over the city. The disorder shewed itself by different symptoms, according to the constitutions attacked by it, and according to the state of the weather at the time; but in general it began with head-ach, giddiness, horripilatio, prostration of strength, a slight degree of fever, nausea, vomiting, redness of the eyes, a dejected countenance, and a white foul tongue. A tickling attended with slight pains were perceived in these places where the buboes and carbuncles afterwards broke out. Many died on the first or second day of the attack, before any of these tumours made their appearance. In such instances, however, an eruption commonly appeared a few hours before
before death, of petechiae and red spots, but in a few even these were wanting.

The buboes and carbuncles commonly appeared on the second or third day; seldom on the fourth. In some few instances, the disease on its first attack, put on an inflammatory form, as appeared from the burning heat which took place, together with the intense thirst, high-coloured urine, redness of the cheeks, and a high degree of phrenitis. But much more frequently the fever from the beginning appeared evidently to be of the nervous kind, all the symptoms which occurred being such as commonly attend fevers of that nature. In a few the fever put on the appearance of an intermittent.

Such as were carried off by the disease, all died before the sixth day, insomuch that those who lived till the seventh, were always pronounced to be out of danger.

The buboes which occur in this disease are glandular swellings, generally somewhat painful, and more or less elevated. Their usual seat is in the arm-pits or groins, but they also happen in other parts, as in the neck, cheeks, &c.

These
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These swellings are to be considered, we are told, as the true crisis of the plague; but in order to their proving beneficial, they must be perfectly suppurated. In many instances they arrived even to the size of walnuts, and suddenly again disappeared; and in others they neither became painful nor inflamed. In these they afforded no relief; and in the former it was always supposed that death was not far distant.

Swellings of the parotid glands frequently occurred, but they never produced such complete cures as the buboes.

Carbuncles, our author defines to be a gangrenous spot upon the skin, having the appearance of a burn, with red, livid, or black vesicles, bounded by an inflammatory ring, which soon terminates in a hard black eschar. —The anthrax, he observes, is an affection of somewhat the same nature with the carbuncle, only the former is more prominent, penetrates deeper into the adipose membrane, and occasions a higher degree of pain and inflammation.

The petechiae which occurred here were similar to those usually observed in putrid fevers.
fevers, though somewhat larger. The vibices gave the appearance of a part severely whipped. All these exanthemata were considered as symptoms of the worst kind, as they were generally forerunners of approaching death.

With respect to the pulse in this disorder, our author observes, that nothing certain can be said, for as soon as the contagion became so infectious as to be propagated by the touch, practitioners had not afterwards such a near intercourse with their patients. Some, indeed, he remarks, had the curiosity still to examine the pulse, either through the intervention of a glove, or of a piece of tobacco applied to the patient's wrist, but the accounts thus obtained were so various and different, that it is not necessary to enumerate them.

The disease at its commencement, in the beginning of the year, did not make great progress; but gradually became more universal as the weather turned warmer. From the month of July, till the month of September, it raged with most violence; not above four recovering out of a hundred attacked with it during that period. But from that time forward, the contagion became gradually milder, and
and at last ceased entirely, when the cold frosty weather became fixed and steady.

In the treatment of the plague, the disorder our author observes, may, with propriety, be divided into two stages, viz. the nervous, and putrid. The former comprehends merely that degree of confusion and disturbance given to the nervous system on the first introduction of the pestilential miasma; and the latter, or putrid stage, commences at the time the miasma begins to operate upon the blood and other fluids, in assimilating them to its own putrid nature.

In the commencement, or nervous state of the disorder, there have been instances, our author observes, of the miasma being carried off by means, of sweat. Hence, at this period of the disease gentle diaphoretics, such as tepid subacid drinks, are recommended; camphorated emulsions, juleps of camphor and musk were of use. Gentle emetics were here also serviceable, particularly of ipecacuanha. By one practitioner, a great quantity of James’s powder, brought from England, was administered, but with no particular advantage.

In the second stage of the disease, when the putrid miasma begins to effect a dissolution of the
the blood, the cortex Peruvianus and mineral acids are recommended as the principal remedies. But from the very quick progress of the disorder, from the greatest number of those attacked by it concealing their complaint as long as possible, for fear of being suddenly hurried away from their relations; and lastly, from the little intercourse which occurs between practitioners and the infected, after the removal of the latter into places allotted for their reception, nothing very certain or satisfactory, our author remarks, can be said with respect to the effects of remedies in cases of plague.

Purgatives, we are told, prove very detrimental in this disorder, as they tend to induce such debilitating and obstinate diarrhoeas as cannot again be stopped.

Blood-letting has been recommended by Sydenham in the beginning of the disorder, when no eruption has appeared upon the surface. But from our author's practice in this disease, he would never advise it to be had recourse to. Scarifying the carbuncles, which occur in cases of the plague, is recommended by almost every writer; but no good effects, we are told, were here observed from the practice. As low fainting fits are frequent symptoms in the plague, none
none should be buried, our author remarks, till some other and more certain symptoms of death have occurred.

A discharge of the vermes Ætæ, both by the mouth and anus, was a frequent symptom in this disorder. Women with child, attacked with the plague, all suffered abortion, and were commonly carried off by hæmorrhage from the uterus.

Preventing every means of intercourse between the diseased and healthy, is the only prophylactic to be depended on; and when the disorder has once got footing in a place, allotting a certain district, as much as possible detached from the rest of the town, to which every person is to be removed, so soon as any symptoms of infection have appeared, is then recommended as the most effectual resource.

A very remarkable instance is related by our author, of the singular good effects that may be obtained by proper care and attention, in preventing any kind of intercourse between the diseased and healthy, in cases of plague, which at the same time gives great reason to suppose, that the miasma of this disorder is not readily communicated by the air, and that the infec-
tion might in general be put a stop to by a strict and regular attention to this circumstance. Our author having been appointed physician to one of the largest hospitals in the city of Moscow, was anxious to have every thing done for preventing the plague getting access to the people contained in it; and although the building was situated in the very middle of the city, yet by shutting up every avenue that led to it, but one, where a strict guard was kept for preventing access to every suspected article, the place was kept perfectly free from the infection, even when the disease was raging with the greatest violence in every other quarter of the city. Cloaths, and every utensil used by infected persons, were ordered to be burned; and, for purifying the houses where they had lived, fumes of vinegar, and the burning gunpowder in them was recommended. A powder, termed at Moscow the antipestitential powder, was much in vogue; and very deservedly, we are told, for destroying the seeds of the infection. Its basis was sulphur, conjoined with nitre, juniper berries, and certain resins. With this every suspected place was fumigated, and evidently with very beneficial effects.
In the third and last part of this publication, among other practical cases, we are favoured with four, upon the effects of blisters in spitting of blood. As in all of them the application proved effectual, we shall only here relate the following.

In the beginning of the year 1773, our author was called to a person seemingly far gone in a case of hæmoptoe, who, about two years before, he had cured of the same complaint. At this time, however, the patient was much worse than he had been before; having the preceding night spit up more than a pound and a half of red florid blood. As the patient had formerly been liable to the piles, leeches were at different times applied near to the anus; he was five times let blood at the arm, to the extent of a pound each time; a dose of tincture of roses was given every half hour; he was kept upon the lowest regimen; and a variety of cold applications, which, in his former complaint, had given relief, were now also had recourse to, but with no advantage whatever. The patient being now very much reduced, and, to appearance, in imminent danger, as the discharge of blood still continued obstinate, a large blister was applied between the shoulders.
shoulders. As soon as the blister began to irritate, the cough, which before had been troublesome, became less frequent, and the discharge of blood ceased entirely. A milk diet, and the remedies above mentioned, being continued, the patient gradually recovered his strength, and in a short time was restored to perfect health.

VII.


Our readers will not imagine that it is by any means our intention to present them with a complete analysis of the work now before us. A very small part only of this publication can be considered as having any connexion with medicine, or medical philosophy. Yet it contains several particulars, an account of which will not, we presume, be unacceptable.

Among other subjects of this nature, the account which is given of the charitable establishments formerly existing at Edinburgh, for persons afflicted with the leprosy, may justly be
be mentioned. This loathsome disease, which is well known to have been frequent among the Jews, and the severity of which is so pathetically described in the sacred writings, seems also to have been very common among our ancestors, and among them it seems equally to have visited the cottage and the palace. King Robert Bruce, who was the founder of a charitable institution for the benefit of those afflicted with leprosy, is said to have himself laboured under this distemper.

With the view of alleviating the miseries of those subjected to this dreadful distemper, the hospital of Greenside was founded at Edinburgh, A.D. 1591, by John Robertson, merchant in that city. The frequency of the leprosy at that period is evinced by the conditions which were necessary for admission. This charitable establishment was totally confined to those who were either born in Edinburgh, or who had resided there for the space of seven years; and the loathsome and infectious nature of the disease is demonstrated by the severity of the regulations to which persons admitted into the hospital were subjected.

They were prohibited, under pain of death, from going without the walls of the hospital after fun-
fun-set, and that this might not be deemed an empty menace, a gallows was erected near the building for the immediate execution of offenders. Happily, however, for the present age, neither such regulations, nor such an establishment are any longer necessary.

But leprosy is not the only disease from which the present period seems to be delivered. In ancient times the plague frequently broke out in Edinburgh, raging with various degrees of fury; but, according to our author, this most severe scourge that ever visited the human race, has not made its appearance in the city of Edinburgh since the year 1645.

But while the city of Edinburgh has been delivered from the plague and leprosy, it has, our author observes, been visited by two other distempers, which have, at different times, made great havoc among its citizens, as well as the other inhabitants of modern Europe; these are the small-pox and the venereal disease. He is, however, inclined to view these also as having now abated of their original severity. He considers the practice of inoculation as disarming the former of all its terrors; and he hesitates not to pronounce, that those parents are to be considered as accessory to the death
death of their children who oppose this practice. With respect to the venereal disease, he gives a copy of an order of the privy-council, banishing from the city of Edinburgh to the island of Inch-Keith, all who were either affected with the disease, or took upon them to cure it. The penalty of contravention, either by the deceased, or the physician, was burning on the cheek; a certain evidence that this complaint also was more terrible to our ancestors than it is to their posterity.

For the account which our author gives of the different branches of medical education taught at Edinburgh, both in the university, and by private teachers, we must refer our readers to the work itself. Nor will the limits of this publication admit of our introducing the account, which he has given of the different conditions, which are requisite before any one can stand candidate for the degree of doctor of medicine in the university of Edinburgh, and of the examinations which candidates must undergo before they can obtain that honour.

Of these, however, a very particular detail is given in this work, while at the same time the account may be depended upon; at
least as an accurate view of the present laws respecting graduation at Edinburgh.

Besides the very accurate account which is given of the extent, situation, and other circumstances respecting the Royal Botanical Garden, which is now richly stocked with exotic plants of all kinds, a list is given of the most curious, which the intelligent botanist, who visits the garden, will chiefly be anxious to see. Of these we may mention examples: Allstroemeria Colinsonia Didyma, unknown to Linnaeus; Illicium Anisatum, a most beautiful aromatic ever-green from Florida; Musa Sapientum, or the Banana, which has produced ripe fruit. The Tea-tree, which has been in full flower; the Caira from the East-Indies; a species of the Mimosa, unknown to Linnaeus, and to the European gardens. The extract from the wood of this plant is the Terra Japonica of the shops, which, however, would be more properly named, the Extractum Japonicum, or Succus Japonicus. An account of the method of preparing this substance was given in a former number of this work, as communicated to the medical professors at Edinburgh, by Mr. Kerr, surgeon at Dacca; and a still more full and particular
ticular account of it from the same gentleman has since been published in the London Medical Observations. Lastly, in the Botanical Garden at Edinburgh, is to be found that extraordinary vegetable the moving plant, the seeds of which were also sent home by Mr. Kerr; and our author has here favoured us with the following account of it, as transmitted from India, by the industrious gentleman, to whom the Botanical Garden is indebted for the plant itself.

This vegetable, according to Mr. Kerr’s account, has in the East Indies the name of Burrum Chundali. It grows about four feet high, and in autumn produces bunches of yellow flowers resembling the French honey-suckle; the root is annual or biennial; like many of the pea-tribe it is trifolious; the lateral leaves are smaller than those at the end, and all day long they are in constant motion, without any external impulse. They move up, or down, and circularly. This last motion is performed by the twisting of the footstalks; while one leaf is rising, its associate is generally descending. The motion downwards is quicker and more irregular than the motion upwards, which is steady and uniform.

These
These motions are observable for the space of twenty-four hours, in the leaves of a branch which is lopped off from the shrub, if it be kept in water. If from any obstacle the motion be retarded, upon the removal of that obstacle the motion is again resumed with a greater degree of velocity.

Besides these different plants, which, although they are to be considered as very rare, were not unknown to the learned in botany, the garden at Edinburgh is also stored with a great number of Abyssinian plants, the seeds of which were given to the professor by that justly celebrated traveller Mr. Bruce of Kinnaird. Among these is the plant by which Mr. Bruce himself was cured of the dysentery; an article which may, perhaps, hereafter furnish a valuable addition to the materia medica.

Besides these different observations, many other particulars, not unconnected with our subject, might be extracted from the work before us. For while the author has not conducted his undertaking on the narrow scale of giving merely the history of a provincial town, but has given a copious account of national affairs, of the manners of the Scots, and of
the prices of provisions in the country at different periods, for the space of eight hundred years; he has also introduced many important observations on the state of population and of health in the city of Edinburgh. But for his remarks on these subjects, as well as for his account of the charitable establishments, intended for the treatment of disease, the Royal Infirmary and Public Dispensary; of the success attending the practice of medicine at these charities; and of the associations of learned men, for the improvement of medicine, and medical philosophy, we must refer our reader to the work itself; as any proper view of them could not be comprehended within those bounds, which we must necessarily prescribe to ourselves in this publication.
A Practical Treatise on the Diseases of the Teeth, intended as a Supplement to the Natural History of those Parts. By John Hunter, Surgeon Extraordinary to the King, and F. R. S. 4to. London.

As the Natural History of the Teeth, alluded to in the title-page of this work, was published a good many years ago, by the ingenious author of the treatise before us; and as that publication has been attentively read by almost every practitioner, we do not think it necessary to give any account of it; nor could we, indeed, with any propriety, attempt it; as that work appeared before the publication of these Commentaries was begun.

We shall therefore confine our present analysis to the treatise now offered to the public: but we think proper to inform our readers, that many of the practical remarks contained in it, cannot be thoroughly understood by those who have not had an opportunity of perusing the Natural History of the Teeth; as numer-
our references necessarily occur to the general doctrines inculcated in that work.

As new ideas and opinions are thrown out by Mr. Hunter, in almost every section of the book, and as the nature of our undertaking prevents us from giving such a full account of different works as on some occasions we could wish, we shall, in the first place, enumerate the General Contents of the whole, and shall then present our readers with some of our author's observations upon the different subjects treated of.

Chap. I. Of the Diseases of the Teeth, and the Consequences of them.

Sect. I. Of the Decay of the Teeth arising from Putrefaction.

Of the Symptoms of Inflammation, and of Stopping of the Teeth.

Sect. II. Of the Decay of the Teeth by Denudation.

Sect. III. Of Swelling of the Fang.

Sect. IV. Of Gum Boils.

Sect. V. Of Excrecences from the Gum.

Sect. VI. Of deeply seated Abscesses in the Jaws.

Sect. VII. Of Abscesses of the Antrum Maxillare.
Chap. II. Of the Diseases of the Alveolar Processes, and the Consequences of them.

Sect. I. Of the Scurvy in the Gums, vulgarly so called.

Sect. II. Of Callous Thickenings of the Gums.

Chap. IV. Of the nervous Pains in the Jaws.

Chap. V. Of the Extraneous Matter upon the Teeth.

Chap. VI. Of the Irregularity of the Teeth.

Chap. VII. Of Irregularities between the Teeth and Jaw, of supernumerary Teeth.

Chap. VIII. Of the Under Jaw.

Chap. IX. Of drawing the Teeth.
Of transplanting Teeth.
Of the State of the Gums and Sockets.
Of the Age of the Person who is to have the Scion Tooth.
Of the Scion Tooth.
Of replacing a found Tooth when drawn by mistake.
Of transplanting a dead Tooth.
Of the immediate Fastening of a transplanted Tooth.
Chap. X. Of Dentition.

Of the Cure.
Of Cutting the Gums.
Cases.

The most common disease our author remarks to which the teeth are exposed, is such a decay as much resembles mortification; but there is also, he says, something more; for the simple death of the part would produce but little effect, as we find that teeth are not subject to putrefaction after death; and therefore he is led to suspect that during life, there is some operation going on, which produces a change in the diseased part.

Mortification, he observes, is common to every part of the body, but in most other parts, this tendency is owing, in a great measure, to the constitution, which being corrected, that disposition ceases; but here the disease is local, and, as such, it would appear we have no power of resisting it.

Nature, Mr. Hunter observes, seems, in some measure to have considered the teeth as aliens, only giving them nourishment while found and fit for service, but not allowing them when diseased the common benefits of that society in which they are placed. They can-
cannot exfoliate, as no operations go on in them except growth; therefore, if any part be dead, the living has not the power of throwing it off and forming an external surface capable of supporting itself like the other parts of the body. Indeed if they had such a power, no good purpose he thinks could arise from it; for a piece of tooth, simply dead is almost as useful, as if the whole was living, as may be seen from daily observation.

When part of a tooth has become carious, without occasioning very great pain, it has been a common practice to file away the diseased portion, with a view to preserve the remaining sound parts; Mr. Hunter would rather in such cases advise the tooth to be pulled out, and on being boiled so as to destroy any life that may have remained in it, to be restored to the socket. This, he observes, prevents any farther decay of the tooth, which, being now dead, cannot be acted upon by any disease, and can only suffer chemically or mechanically. When this practice succeeds it answers the same end as burning the nerve, but with much greater certainty.

When speaking of stopping or stuffing of the teeth, it frequently happens, Mr. Hunter remarks,
remarks, that the gold, or tin-foil, made use of, cannot be got to remain in the cavity of the spoiled tooth, from the size and figure of the external opening; but this, he observes, may frequently be obviated, by drilling a small hole through the remaining part of the tooth, and after the cavity has been well fluffed, a small peg may be put into the hole, so as to keep in the lead or gold.

The swelling of the fang is a disease, which, in any other bone, would be called spina ventosa; it gives considerable pain, and nothing can be seen externally. The only cure as yet known is extraction of the tooth.

In gum boils, when the abscess has opened through the gum, the best method, we are told, to prevent future gatherings, is to prevent the abscess from closing up. And the most effectual method for obtaining this end, is by extending the opening, and keeping it enlarged till the whole internal surface of the abscess is skinned over, or till the opening in the gum loses the disposition to heal up. With a view more effectually to destroy this disposition in the sore, astringent, caustic applications are recommended. Such very nice treatment is not necessary when a gum boil is formed.
formed on a molaris, or back-tooth, as when it happens to the fore-tooth.

From bad teeth there are also sometimes excrescences arising at once out of the gum, near, or in contact with, the diseased tooth; these have often so much of a cancerous appearance, as to deter surgeons from meddling with them. But our author observes, that when they arise at once from the gum, and appear to be the only diseased part, they have no malignant disposition.

In collections of matter in the antrum maxillare, there are three methods by which the matter may be discharged, viz. by perforating the partition between the antrum and the nose, by drawing the first or second grinder of the diseased side, and perforating the partition between the root of the alveolar process and the antrum; and, lastly, if the fore part of the bone has been destroyed, an opening may be made on the inside of the lip, where the abscess most probably will be felt. Our author prefers the opening made by the roots of the teeth.

In nervous pains of the jaws, that is, in cases of tooth-ach, where no external affection of the teeth can be detected, Peruvian bark, our author observes, is a common remedy; but he has seen cases,
cases, he tells us, of some years standing, where hemlock has succeeded when bark had no effect; sea-bathing too is much recommended.

When speaking of irregularity of the teeth, our author observes, that as that part of each jaw which holds the ten fore-teeth, is exactly of the same size when it contains those of the first set, as when it contains those of the second; and as the last occupy a much larger space than the first, in such cases the second set are obliged to stand very irregularly. This too happens much oftner in the upper jaw than the lower, because the difference of the size of the two sets is much greater, he remarks, in that jaw.

This irregularity, we are told, is observed almost solely in the incisores and cuspidati, for they are the only teeth which are larger than their predeceffors.

The best time for removing these irregular teeth, our author observes, is in youth, while the jaws have an adapting disposition; for after a certain time they do not so readily suit themselves to the irregularity of the teeth. After an irregular tooth has been extracted,
the next object is to alter the situation of the remaining ones, for the proper position of which, room is then allowed.

As the operation of moving the teeth is by lateral pressure upon their bodies, these bodies must first have passed through the gums sufficiently for a hold to be taken. This pressure, in general, is to be done with ligatures, or plates of silver. The ligature answers best when it is only required to bring two teeth, which are pretty much in the circle, closer together. The trouble attending this, is very trifling, as it is only that of having them tied once every week or fortnight. Where teeth growing out of the circle are to be brought into it, curved silver plates, of a proper construction, are recommended. These are generally made to act on three points, two fixed points on the standing teeth, and the third on the tooth to be moved. That part of the plate which rests on the two standing teeth, must be of sufficient length for that purpose, while the curved part is short, and goes on the opposite side of the tooth to be moved. Its effects depend very much on the attention of the patient, who must frequently press hard upon it with the teeth of the opposite jaw, so that
that this method is much more troublesome to the patient than the ligature.

It is impossible, our author observes, to give absolute directions what tooth or teeth ought to be pulled out; that must be left to the judgment of the operator. But the following general hints may be of service.

1st. If there is any one tooth very much out of the row, and all the others regular, that tooth may be removed, and the two neighbouring ones brought nearer together.

2. If there are two or more teeth of the same side very irregular, (as, for instance, the second incisor and cuspidatus) and it appears to be of no consequence, with respect to regularity, which of them is removed, we are advised to extract the farthest back of the two, viz. the cuspidatus, because, if there should be any space not filled up, where the other is brought into the row, it will not be so readily seen.

3. If the above mentioned two teeth are not in the circle, but still not far out of it, and yet there is not room for both, in such a case the extraction of the bicuspis is recommended, although it should be perfectly in
the row, because the two others will then be easily brought into the circle; and if there is any space left, it will be so far back as not to be at all observable.

When speaking of transplanting teeth, Mr. Hunter observes, that as this operation is very similar to the ingrafting of trees, he thought the term scion might be transferred from gardening to surgery, and accordingly the tooth to be transplanted he terms the scion tooth.

This tooth, he remarks, should be a full grown young tooth; young, because the principle of life and union is much stronger in such than in old ones. The few teeth should likewise be perfectly found, and taken from a mouth which has the appearance of that of a person found and healthy. Our author observes, however, that he does not think it possible to transplant an infection of any kind from the circulating juices; although we know, from experience, that it may be done by a matter secreted from them.

When a found tooth has been drawn by mistake, or when a tooth has been beat out by violence, it is recommended to replace them. The sooner the tooth is put into its place the better; but the attempt may be made, we are told,
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told, even twenty-four hours after the accident, or as long as the socket will receive the tooth, which may be for some days. Mr. Hunter is of opinion, that when the transplantation of teeth is attended with success, that a living union is formed between the teeth and socket, and that nourishment is thereby conveyed to the teeth from the parts into which they are inserted. This opinion, he thinks, is rendered indisputable, from the following facts. 1st. They still continue to preserve their colour, which is very different from that of a dead tooth; for a living tooth has a degree of transparence, while a dead one is of an opaque chalky white.

2. There are instances of their becoming painful, and otherwise diseased, in the same manner as original living teeth; and, thirdly, what puts the matter beyond a doubt, is, that a living tooth, when transplanted into some living part of an animal retains its life, and the vessels of the animal come to communicate with the tooth, as is shewn by the following experiments.

A found tooth was taken from a person's head, and a pretty deep wound being made with a lancet into the thick part of a cock's comb,
comb, the fang of the tooth was pressed into the wound, and was properly secured by threads passed through other parts of the comb. The cock was killed some months thereafter, and the head being injected with a very minute injection, the comb was then taken off, and put into a weak acid; by means of this the tooth being softened, the comb and it were slit into halves in the long direction of the tooth. The vessels of the tooth were found well injected, and it was also observed that the external surface of the tooth adhered everywhere to the comb, by vessels similar to the union of a tooth with the gum and socket.

Our author here thinks it right to remark, that this experiment does not generally succeed, as it answered only once with him, out of a great number of trials.

Mr. Hunter, after giving an accurate account of the various symptoms which accompany dentition, gives it as his opinion, that opiates and all the usual palliatives are not to be depended on; and that cutting the gums above the approaching teeth, is the only certain remedy.
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A vulgar prejudice, he observes, prevails against this practice, from an objection, that if the gum is lanced so early as to admit of a reunion, the cicatrised part will be harder than the original gum, and therefore the tooth will find more difficulty in passing, and give more pain.

But this, he says, is contrary to fact; as we find all parts which have been the seat, either of wounds or sores, are always more ready to give way to pressure, or any other disease which attacks either the part itself, or the constitution. Therefore each operation tends to make the passing of the teeth easier. Mr. Hunter has had occasion to perform the operation above ten times, upon the same teeth, where disagreeable symptoms had recurred so often, and every time with the absolute removal of the disorder.
SECT. II.

Medical Observations;

I.

A remarkable Case of the morbid Effects of Lightning successfully treated. By Dr. Thomas Fowler, Physician at Stafford. Communicated to Dr. Duncan.

Though it must be granted, that those persons who have the misfortune to be violently affected by lightning, or the discharge of the electric matter from the clouds, are, in general, either immediately destroyed, or soon perfectly restored; yet we find many instances of their only obtaining a partial recovery, and remaining for some time afflicted with
with a variety of troublesome complaints. Various, however, as these complaints may appear at first sight, I think we may with propriety refer them (with very few exceptions) to two general morbid conditions of the body, viz. either to a defect of nervous energy, or to an increased action of the vascular system.

The first seems to arise from the violence of the shock of the electric matter upon the nerves, inducing in them such a degree of collapse, as permanently to diminish the usual influence of the nervous energy, and implies that morbid condition of the nerves, which is undoubtedly the foundation of all paralytic affections.

The latter seems to arise from the nervous energy being less injured, whilst yet the shock is considerable enough to induce a state of excitement, or increased action of the vascular system. Hence arises topical inflammations, either with, or without, febrile symptoms, according to the violence and extent of the injury.

This, I apprehend, will be allowed to be a useful practical distinction, because paralytic affections certainly indicate tonics; and stimulant, and inflammatory ones, relaxants, and sedatives.
It must however be granted, that it is much less in our power to restore nervous energy, when morbidly diminished, than to lessen the increased vascular action of an inflamed part, or to moderate the reaction of the system from inflammatory excitement, and therefore the effects of the latter will be much more conspicuous and successful, than those of the former. A striking example of this I beg leave to relate in the following case of topical inflammation.

About seven o'clock of the afternoon of the 11th of July, 1777, I visited a Cow-keeper, in Walingate, in the city of York, aged 22, of a strong healthy constitution, and found him affected with the following symptoms. He complained of a distracting pain in his forehead, with some pain in his ears from the slightest noise; he complained also of a constant pungent sensation in both his eyes, as if containing (to use his own expression) burning ashes, accompanied with violent pangs shooting from his forehead in the direction of the optic nerves, and which came on in paroxysms, almost every minute. His face appeared red, and on forcing open his eye-lids, both eyes appeared quite bloodshot, the tears gushing out,
out, and totally incapable of bearing the light. His pulse was full and strong, but not quicker than natural, he was in some degree affected with nausea, his extremities were cold, and his belly bound.

A little after four o'clock in the afternoon, being in perfect health, he and his servant girl, with their milk pails, went towards the cow pasture, and it came on a storm of thunder and lightning. When they had got about a mile from home, they both, in the same instant, fell prostrate on the ground, in a state of insensibility. The girl soon came to herself, and seeing her master lie on the ground apparently dead, ran away for some assistance, in order to bring him home, which, after some delay, was accomplished about six o'clock; when being laid upon his bed, he began to come to himself, having been for an hour and a half in an apoplectic state. However he had now considerably recovered his intellects, and a sense of his complaints seemed to increase upon him in proportion as he recovered his sensibility.

It was observed he had vomited a quantity of phlegm, and other contents, upon the ground where he lay, and had also lost some blood,
apparently from his nostrils; for it was said not to be mixed with the contents from his stomach; and on my examining his head and face, although the latter was bloody, no external injury was visible.

Neither he nor his servant girl were the least conscious of the stroke from the electric matter, although they both recollect the thunder and lightning being very violent, just when they arrived near the place where the accident happened.

About fix o’clock a quantity of blood was taken from his arm, by my advice; but as yet it had given no check to the inflammatory symptoms.

I ordered, for the present, that a common glyster of milk, sugar, and salt, should be given immediately, in order to remove coalsiveness; also that a crowd of attendants, whom curiosity had brought together, should be dismissed, the room darkened, and the antiphlogistic regimen strictly observed.

About nine o’clock the same evening, he had a copious stool from the glyster, by which the painful symptoms seemed rather relieved, for a short time; but soon after they became much worse,
worse, the patient declaring himself more distracted than ever. His pulse was full and strong. I ordered the following remedies. *Quam primum applicentur hirudines vi. temporibus & repetatur enema domesticum hac nocte.*

July 12. The glyster procured another stool; and the bleeding from the leeches was so considerable, that it did not stop till five o’clock this morning. About an hour after which the fillet by accident becoming loose, his arm bled again, so that he lost a very considerable quantity of blood, by which means the inflammatory symptoms of both head and eyes were much relieved during the night, and are at present very supportable. His eyes, however, are still very much blood-shot and inflamed, his pulse soft and rather quick. *Capiat statim Salis Glauberi uncias duas in q. f. aqua ferrentis soluti & r extracti Saturni gut. xii. aq. fontanæ ʒii. misce pro collyrio, sœpe in die oculi adhibendo.* Continuatur regimen.

July 13. The salts operated very briskly, producing more than a dozen stools, and with relief to his pains. Bloodshot appearance in his eyes rather less, and he slumbered a little in the night. Pulse much the same as yesterday: continuenter regimen & collyrium.
July 14. Had some little slumber in the night, and the pains in his head and eyes continue lessening: he has had no stool since the 12th. Pulse more natural; appetite rather returning. Cap. Statim Sal. Glaub. sescunciam more solito.

July 15. Salts operated freely, and he seemed sensibly relieved by their operation, and slumbered for the fore part of the night; but towards the morning the shooting pains returned again into his head and eyes, and are at present somewhat severe: pulse also rather hard. Statim applicentur hirudines sex, pone aures; continuuntur regimen & collyrium.

July 16. There was a free discharge of blood from the leeches for six hours, and with so much advantage, that he got some natural rest this last night, for the first time. Pains and bloodshot much abated. He complains of considerable loss of strength, and that the shutting of a door hastily throws him into tremor and palpitations. Pulse 72. regular, soft, and weak; has had no stool since the 14th. Cap. Salis Glauberi unciam statim more solito; continuuntur regimen & collyrium.
July 17th. The salts operated well, he slept tolerably found in the night. Shooting pains in his eyes quite gone, and the pains in his head changed into a sense of soreness, on motion; appetite sensibly better; nervous tremor and pulse much the same as yesterday. Repe-tatur collyrium. Let him gradually return to his former diet, but use no fermented liquors.

July 19. He continues better, his appetite is good. Pulse regular and less weak: he finds himself gather strength, and the nervous tremors are less troublesome, but his eyes continue weak and watery. Repe-tatur collyrium. Let him now enjoy full diet, fermented liquors alone excepted.

July 21. His appetite continues good, he is sensibly stronger, and has no complaints, but of weakness of his eyes: keeps regular with respect to stools. Continuentur regimen and collyrium.

July 23. He recovers strength very fast.


July 26. The blister discharged well, and soon relieved his ophthalmia: continues to recover strength.

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August 2. His eyes are quite free from inflammation, but continue rather weak and watery; he has now very nearly recovered his natural strength of body, and firmness of nerves.

August 5. He thinks he has now recovered his former vigour of constitution, or thereabout; and is totally free from complaints, excepting watery eyes.

Thus we have given a particular history of the case, and think the following circumstances merit some notice.

1. That after a state of apoplexy, or collapse of the nervous system, for an hour and a half, we found symptoms of the most violent excitement had taken place, even such as constitute a considerable part of the character of phrenitis, or inflammation of the brain, viz. pain of the head, redness of the face and eyes, and an incapacity of bearing light and sound, &c. Dolor capitis, rubor faciei et oculorum; lucis & soni intolerantia, &c.

2. That the urgency of symptoms required such liberal evacuations (the loss of blood alone, by estimation, being near 50 ounces) as to induce a considerable degree of debility, from which, and the more immediate effects of the electric
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electric shock upon the system, the nerves of a healthy strong man became as susceptible of tremors from the opening of a door, as those of a delicate hysterical woman.

3. That in nineteen days after (viz. from the 17th of July to the 5th of August), by the use of his wonted diet, and the remains of strong assimilating powers, the patient had recovered his former vigour of constitution and firmness of nerves.

Upon the whole, it must be acknowledged that the case turned out singular in several respects, and we hope not wholly unuseful in point of practice.

For although there can be no doubt of the propriety of the antiphlogistic treatment, whenever the morbid effects of lightening are found to be of the inflammatory kind; yet this example may serve to shew, to what extent the treatment may be successfully carried, when symptoms are highly urgent.
The History of a Case of obstructed Secretion of Urine. By Dr. John Clarke, Physician at Newcastle.

Mr. H. aged 50, of a corpulent habit, formerly subject to severe nephritic paroxysms, and who at different times had voided several small stones by the urethra, on the 22d of May 1776 was seized with a pain on the region of the kidneys, and on the left side of the abdomen. He was sick at stomach, vomited frequently, was feverish, cositive, and had no desire to make urine. Continuing in this way restless and pained, though to no great degree, he took a dose of salts and some quack medicines.

On the 27th of May, at 10 o'clock in the forenoon, I was desired to visit him; I found him anxious and restless. He had an inclination to vomit, complained of a dull pain on the small of the back, and had slight twitches along the course of the ureters. His pulse was full, and beat only 80 pulsations in a minute; he had sweated none, but had some feverish heat and thirst; his belly was regular; he had no
no motion to make urine, neither had he voided a single drop for five days past. No fulness could be felt above the pubis, and he had no uneasiness when the region of the bladder was pressed. Sixteen ounces of fizy blood were taken from his arm. Warm fomentations, and a camphorated liniment were ordered to be applied frequently to the small of the back, and along the course of the ureter. A turpentine clyster was directed, and emulsi Arabica, with nitre, for common drink. In the evening he was rather easier, but having made no urine, the clyster was ordered to be repeated; and a dose of filts and manna, dissolved in whey, was directed to be given in the morning.

On the 27th, he had a slight hiccup. He had several loose stools, but the obstruction of urine still continued. He went into the warm bath at 12 o'clock. His pulse being full, 12 ounces of blood were taken, and as he was very restles, a draught with Sal. Diuret. and Tinct. Theb. was ordered at bed-time.

On the 28th, he was very restles, and at times comatose in the night. This morning he laboured under inexpressible inquietude, though he complained of no pain; his eyes were exceedingly
ceedingly dull; he had still no tension above the pubis; no inclination to make urine; neither had his perspiration any urinous smell. The warm bath was again ordered, as he found temporary ease from the former; and two spoonfuls of the camphorated emulsion were prescribed every three hours. In the afternoon, he made some drops of urine without any pain; at six in the evening Dr. Rotheram joined me in consultation. We found our patient senile, though inclinable to dose. His pulse being full, 12 ounces of blood were drawn from his arm, which was still stuffy. The turpentine clyster, and anodyne draught were directed to be continued, and a cupful of decoction of Parietaria, with nitre, was ordered to be taken every four hours.

On the 29th, he was more comatose, and his pulse began to sink; in the morning he had made a spoonful of urine, which resembled serum, and which had neither smell nor taste. The catheter was this day introduced, but the bladder was found to be empty. At night the coma encreased, his face was convulsed, he had frequent hiccups and subsultus tendinum. A bolus, with Sal Succini and nitre, was given at bed-time, wafting it down with
with two spoonfuls of the camphorated emulsion.

On the 30th, at nine in the morning, his pulse intermitted, his eyes were glossy, and he was insensible. The convulsions became more violent, and he expired at one o'clock in the afternoon. Soon after death, his face, neck, and breast, became emphysematous and livid, and a considerable quantity of blood issued from the nose and mouth.

Having with great difficulty obtained leave, the body was opened next day by Mr. Leighton. Upon dividing the integuments of the belly, we found the cellular membrane loaded with fat above an inch and a half thick. There was also a very great accumulation of fat in the omentum, and upon both kidneys, each of which, at a moderate computation, would have weighed a pound. In the pelvis of the right kidney was found a considerable quantity of gravel, and the right ureter, about the middle, was totally obstructed by a stone of the size and shape of a horse-bean. The portion betwixt this part and the kidney was almost entirely filled up with sand. The left kidney appeared inflamed, and approaching to a gangrenous state. In its pelvis were found some
some gravel, and a stone of the size and the figure of an almond; and the ureter about the middle, was distended with a stone of a conical shape, resembling in figure and size the last phalanx of the little finger. Above this obstruction, and below the kidney, a small quantity of serous fluid was deposited, and about a spoonful and a half of a similar fluid, without any urinous smell, in the pelvis of both kidneys. The bladder was quite empty, but appeared perfectly sound, and contained a smooth oval stone which weighed upwards of three drachms.

III.

The History of a Singular Affection of Respiration, with an Account of the Appearances on Dissection, by Dr. Seguin Henry Jackson, Physician in London.

J. K. æt. 42, a married woman, was admitted on the 2d of April into the clinical ward of the Royal Infirmary at Edinburgh, when I had the honour of officiating as assistant to the clinical physicians. About three years before that, she became affected with
with a difficulty of breathing, and pain about the region of the stomach, and in the left side immediately below the short ribs; these complaints continued for about three months, and were carried off by taking some medicines.

She continued free of such complaints till about half a year before her admission into the hospital, when she was again seized with dyspnoea, which came on in a gradual manner, attended with a sense of oppression about the praecordia, but no pain in the side. With no other complaint but this difficulty of breathing she continued to be distressed for about two months, gradually becoming worse and worse, and then she became also affected with eructations of wind from her stomach, arising in constant succession, and attended with a croaking noise.

At the time of her admittance into the Royal Infirmary her complaints were very severe.

She would then frequently complain of pain in different parts of the thorax; one while in the region of the liver, or in that part of the diaphragm connected with it, particularly when pressed by the hand, or when the eructation was severe; another while in the left side;
and again, at other times, in the back, seemingly in the course of the diaphragm; she was also much affected at times with palpitation of the heart.

The eructations of wind were very frequent, and generally relieved the dyspnœa, but a sense of suffocation remained a short time after the belching.

A constant croaking noise attended her respiration, but was most considerable when the eructations came on. After any surprize her speech was short, and the eructations of wind were increased. She was sensible of a straitness in her chest, particularly in stooping, and of a constringion in her throat; her abdomen appeared tumified but without fluctuation, and rather tympanitic. Her face was in general flushed, and she would sometimes complain of a heat rising in her stomach, and in the palms of her hands; she had been much troubled with head-ache, but never with hysterick fits. Her pulse was always above the natural standard, sometimes up to 120. Her tongue clean, her belly in general bound, appetite changeable, no thirst, menstres had appeared only once for three years past. She assigned no cause for her complaints, but said she had lived in a damp
damp house, and had undergone considerable vexation.

After having remained in the Infirmary some weeks, she was dismissed much relieved, having been several times bled, and having used æther, bark, &c. When blood was drawn, it was always covered with a buffy coat. Two or three weeks after her dismissal, I had an opportunity of seeing her at her own habitation, and found her in a melancholy situation, her former complaints having again returned with still greater severity. The state of respiration was then as follows: on inspiration she was sensible of a resistance to the entrance of the air, at the anterior part of the neck. At the same time a sound was produced difficult to be described, but harsh, croaking, and sometimes would very much resemble that attending the croup; she was also sensible, on inspiration, of her stomach’s swelling, and particularly so when she was without stays.

At the end of inspiration she uttered her language distinctly, but only for a short time; for when expiration succeeded she eructated a great quantity of wind from her stomach. She did not now complain of any wind rising from her bowels, though the abdomen was rather tumid.
With this condition of respiration she was continually troubled, and complained of nothing else but a pain at the pit of her stomach.

As venesection seemed formerly to have done her service, and as she was herself desirous of it, twelve ounces of blood were taken from her arm, but it did not afford her even temporary relief, and it was not again repeated.

She took frequent doses of liquid laudanum and spirit. Corn. Cerv. equal parts, for about a week, but without the slightest relief, though some degree of drowsiness was produced; she was also blistered at the stomach. From the inutility of these remedies, I began to suspect some organic affection as the cause of her trouble, and despaired of doing her any service. Her strength began to fail her fast; she could sleep none from the difficulty of respiration; and in a few days, quite worn out, she died.

I had the good fortune to inspect the body after death, and met with the following satisfactory condition of the pneumonic organs.

The aperture of, and the passage through the larynx, below its ventricles or sinusses, were so much diminished from the natural size, that it would with difficulty admit a sixpence,
no more of the passage remaining than a narrow slit sufficient for that purpose.

This diminution of the passage seemed to be owing to a thickening of the membrane lining the larynx, and it was so firm that it required much force to make the point of the fore-finger pass between the edges of the afore mentioned slit.

The edges of the ventricles were also thicker than natural; none of the muscles moving them could be distinctly traced.

The trachea was natural, but the lungs were quite collapsed and free of air, containing little more than a frothy fluid; so that their bulk was very inconsiderable, and the cavity of the thorax thereby to appearance empty.

The superior surface of the diaphragm was slightly inflamed, particularly at its connection with the mediastinum.

The thyroide gland was also considerably larger than natural, and divided into two large lobes, one on each side of the trachea. There was no appearance of inflammation about either the larynx, thyroide gland, or trachea.

The following questions naturally present themselves, from the event of this dissection.

1. Does
1. Does not the preternatural condition of the larynx account sufficiently for the flatulence of the stomach. For, may not the air, from the resistance it met with at the larynx, have been partly forced to make its way into the stomach?

The phenomena of this affection render it probable. 1. Because when the breathing was most difficult, her flatulence was greatest. 2. She was sensible of the swelling of the stomach during inspiration. 3. Whatever increased the difficulty of breathing, increased the flatulence. 4. The quantity of air evacuated far exceeded what could possibly be the product of the primæ viæ. 5. She wanted the other symptoms of a loss of tone in the alimentary canal.

2. Does not this case render it dubious, whether the voice is solely produced by the ligaments of the larynx forming the ventricles?

3. Would not this case have been a favourable one for bronchotomy; or, would such have been hazardous, from the possibility that such symptoms might arise from a constriction in the course of the trachea?

We cannot well determine this point, though we think it not probable that such an affection
tion of the voice could be produced in any other part but the larynx, thus morbidly conditioned, and that this would sufficiently point out the seat of the disease, and incline us to favour the operation, after all other remedies had been previously employed without effect.

IV.

The History of a Case of Retroverted Uterus.
By Dr. John Evans, Physician at Oswestry, Shropshire.

On Friday evening, the 28th August, I was sent for to Mary Jones, a poor woman (six miles from this town) of a delicate make, who had had several children, and was then supposed between two and three months advanced in her pregnancy.

About 15 or 16 days before, upon lifting up a heavy burden, she suddenly felt a weight and uneasy bearing down in the vagina, and was soon after seized with excruciating pains in the lower part of the belly, accompanied with a difficulty of making water, which made her dread a miscarriage. These complaints continued till I saw her. Upon my arrival I found
found a considerable enlargement of the abdomen, and a total suppression of urine. With some difficulty I introduced the catheter, and drew off eight pints and a half. Afterwards a clyster was thrown up, which produced a copious discharge. She seemed that night much easier. I administered an opiate, in order to procure some sleep, which she had been a stranger to for several nights.

The next morning I visited her again, and to my great disappointment was informed that her pain had returned about two hours after I had left her, the preceding evening. I then thought it adviseable to repeat the introduction of the catheter, by which two pints more of turbid urine were drawn off, and my patient was amazingly relieved.

Upon examination I was well convinced that this was a case of retroverted uterus. I then made an attempt to reduce it to its natural situation, by introducing two fingers of my left-hand up the rectum, and my other hand up the vagina. I pushed up the fundus uteri gently, at the same time pulling down the upper part of the vagina. With a little perseverance my endeavours happily succeeded: I directed her to keep her bed for three or four
four days, and ever since she has been gradually recovering.

V.

The History of a Case of Retroverted Uterus. By Dr. Swan, Physician at Dumbarton.

I was called on the 4th April, 1758, in the evening, to the wife of James McDonald, in Old Killpatrick parish; she was a tall well made woman, between three and four months gone with child, and had the preceding day got a fall going over a wall near her own house. Immediately after this she was taken with down-bearing pains and suppression of urine. On examination I found the fundus uteri fallen down to the lower part of the pelvis presenting like a large ball equally at the anus, and os externum uteri; a part of the vagina next to the perineum fallen without the os externum; and the os tinae turned forwards to the os pubis and raised above, pressing on the neck of the urinary bladder; the bladder being at the same time more distended. Blood letting, clysters, and fomentations had no effect in giving her relief. I drew off by
the aid of a catheter about six pounds of urine; but the vagina and neighbouring parts were so rigid, dry, and inflamed that I could not think of handling them, I therefore repeated the blood letting, emollientclysters, and fomentations. That evening the urinary bladder seemed to be near so much distended as before, she having passed no urine; the fundus uteri was still low in the pelvis. About four pints of urine were taken off by the catheter, and the parts were not so dry, rigid, and inflamed as formerly, therefore with a finger in vagina and another in anus, I raised up the fundus uteri till the os tincæ came into its natural position, I directed her to keep in bed for some days, and to lie chiefly on either side with the nates raised, to make no great efforts or straining at stool, to keep an open belly by clysters, and to take an anodyne occasionally. By these means she recovered, had no relapse, went on in her pregnancy, and at the usual time was delivered of a strong, healthy child.
THE following account of the method of treating dropsy of the brain by mercury, has been communicated to Dr. Duncan, in a letter from Dr. Matthew Dobson, physician in Liverpool.

"The case of hydrocephalus internus" mentioned by Dr. Percival in the Medical Commentaries, volume V. page 174, and referred to by Dr. Simmons, page 420 of the same volume, was communicated to several of my medical friends in different parts of the kingdom, during the years 1775, 1776, and 1777. My reason for withholding it from the public, was the desire of having a practice, which...
some may consider not only as new but hardy, supported by a stronger authority than that of a solitary case. But I no longer hesitate now to publish the case, as three indubitable instances of hydrocephalus internus have occurred, in which this method of cure has succeeded: and I hope that on still farther trial it will be found the happy means of preserving some lives, from the fatal effects of this formidable disease.

"I shall be obliged to any of those gentlemen of the faculty who adopt the practice, if they will communicate to me the result of their experience, whether favourable or unfavourable. A more extensive collection of cases and facts, may enable me to make such general observations as may be more clearly conclusive both with respect to the nature of the disease, and the probability of success.

"The mercurial course was first tried in the following case.

_Case of Hydrocephalus Internus._

"On the 13th of February 1775, I was called to the only son of Mr. C. a gentleman of this place: the child was between three and four
four years of age, had been indisposed about eight days, and had frequently complained of pain in his head and weariness, and pains in his limbs; had been sick by fits, and sometimes vomited; was feverish, and could not bear the light.

"I was much alarmed on hearing this account, as the hydrocephalus internus had already proved fatal to three children of this family, who had all been under my care. And that this had been the disease was evident, both from the symptoms and the appearances on dissection. But my alarm was much farther increased, on examining the little patient. The pulse I found very frequent and irregular. The head hot, the cheeks flushed, the pupils dilated, and a great degree of strabismus. There remained no doubt with respect to the nature of the disease.

"An emetic, some calomel powders, and a purgative had been administered, without affording any relief. I directed the pediluvium, and emetic tartar to be given in such doses as to excite nausea.

"February 14th. The symptoms the same, with frequent startings, disturbed sleep, and toffing
toffing from side to side on the pillow. A blister was applied between the shoulders, the pediluvium repeated, and the emetic tartar continued.

"15th. Comatose, restless, and shrieking by fits. The pulse slower than in health, and the eyes insensible even to the impressions of strong light.

"As I had no hope of doing any thing effectual for the recovery of my patient, I paid my visits, prescribed, and gave directions with a fore-boding and heavy heart. Anxiously, however, considering the case in different points of view, and fully convinced that it was vain to pursue the usual line of practice, it occurred to me, that mercurials, so far urged as to enter the course of circulation, and affect the salivary glands, might possibly reach the system of absorbents in the ventricles of the brain, and thus remove the extravasated fluid.

"The short continuance of the disease, and the apparent strength of my patient, were favourable to the trial of this method. No time, however, was to be lost. The parents were consulted, and readily gave their sanction to the proposal; for they were convinced that
that unless some powerful steps were taken, this their only son, must be numbered with those of their children, who had already fallen a sacrifice to the disease.

"The mercurial course, therefore, was commenced and urged on with caution and expedition. In forty eight hours the breath began to be offensive, the gums were reddish and swelled, and the symptoms of the disease, so far as could be distinguished, were somewhat abated. In forty-eight hours more, the ptyalism came on, and the disease was evidently declining. Between the 15th and the 22d he took twenty grains of calomel, and one drachm of the strongest mercurial ointment was likewise rubbed in well upon the legs and thighs. The dose of calomel was one grain, mixed with a little sugar, and repeated at such intervals as the circumstances of the case pointed out.

"After the 22d no more mercurials were administered, a moderate ptyalism continued for five or six days, then gradually ceased, and the disease was entirely removed. The bark was then given, as the best tonic remedy after the mercurial course, and as the best preservative against a relapse. The strabismus I observed was the last symptom which disappeared.
"From the 15th, no other medicines were used except mercurials. I entertained the same favourable expectations with Dr. Simmons from the use of blister, but experience has convinced me that their operation is inadequate. The three sisters of the above patient, who all died of this disease, were treated with blister, and to one of them they were applied in succession to the head, behind the ears, and between the shoulders."

* * * * *

The following extract of a letter from Dr. Percival to Dr. Duncan, concerning the new method of treating the dropsy of the brain, affords additional confirmation of the efficacy of that practice.

"Though the arguments of your very ingenious correspondent Dr. Simmons have not produced any change in my sentiments; yet I think myself obliged by his candour, and honoured by his politeness. And as I am persuaded that his strictures proceed from the love of truth and a spirit of benevolence, I doubt not it will afford him satisfaction to hear, that farther experience has furnished me with

* See the Medical Commentaries, vol. v. p. 177; fuller
fuller evidence of the safety and efficacy of mercury, timely administered, in the hydroce-
phalus internus.

"One of my own children, a girl, aged three years and three months, has lately been a severe sufferer under this alarming malady. As soon as the characteristic symptoms of the disease clearly manifested themselves, I laid aside all other remedies, convinced, by repeated observation, of their insufficiency, and trusted solely, though with much solicitude, to the internal and external use of mercury. In forty-eight hours, signs of amendment appeared, and her recovery was perfected in six days. During this space of time, thirteen grains of calomel were administered, and seven scruples of the unguentum mercuriale fortius carefully rubbed into her legs.

"I do not send you a detail of the case, because I shall probably offer it myself to the public; for having marked every circumstance of the disease with the watchful and anxious attention of a parent, I may, perhaps, have acquired a more intimate knowledge of its nature, and of the peculiar operation of mercury in the cure of it, than can be obtained in the ordinary course of a physician's practice.

I am
I am willing to hope, at least, that I have been able to guard against deception.

"In the treatment of the *hydrocephalus internus*, no remedy has had a more general trial than blisters: I have often employed them myself; but never yet saw any instance in which they could be said to produce other than palliative effects. The publication of Dr. Ambrose Dawson, referred to in the last number of the Medical Commentaries, has not yet fallen into my hands; but that learned and judicious physician informs me, that his notes were not sufficiently minute and particular to ascertain the cases to be of the malady in question. The fatality of the disorder, he says, convinced him that purgatives and diuretics are given on a bad theory, and the main design of his paper is to incite the faculty to attempt the discovery of a more successful method of cure.

"Mention is made of only one blister, in the curious history of a dropsy of the brain, communicated some time ago by my friend Dr. Dobson. This was applied between the shoulders, on the 14th of Feb. 1775. On the 15th, the disease seems, by the doctor’s letter which now lies before me, to have made a rapid pro-
progres; the mercurial course was therefore commenced, and continued till the 22d, when the child was out of danger.”

* * * * *

We mentioned in a former number, the death of that ingenious gentleman Mr. Charles Darwin, whose early exertions, in the line of medicine and philosophy, could not fail to inspire the highest future expectations. A plain, but neat marble monument, has been lately erected to his memory, in the church-yard belonging to the chapel of St. Cuthbert, at Edinburgh, on which is the following inscription.

**CHARLES DARWIN,**

Was born at Litchfield, Sept. 3, 1758,

And died at Edinburgh, May 15, 1778.

Possessed of uncommon abilities and activity, he had acquired knowledge in every department of Medical and Philosophical Science much beyond his years.

He gained the first medal offered by the Æsculapian Society for a criterion to distinguish Matter from Mucus; and had prepared a Thesis for his Graduation, on the Retrogade Motion of the Lymphatic Vessels, in some Diseases.

He
He cultivated with success the friendship of ingenious men; and was interred by favour of Dr. A. Duncan, in this his burial place.

Fame's boastful chisel Fortune's silver plume
Mark but the mould'ring urn, or deck the tomb.

When it was known that the friends of Mr. Darwin intended to place a monumental inscription over his grave, a few lines written by his intimate friend Dr. Fowler, now physician at Stafford, were inserted in the Birmingham and York Chronicle, for the consideration of his friends; and although the inscription which has already been given, had before that been adopted, yet, we imagine, it will not be disagreeable to any one who has a due regard for the memory of distinguished worth, and who understands how far the conduct of mankind to the dead has an effect upon the living, that we give place to the sentiments of a friend, intimately acquainted with the merit and abilities of the deceased.

To the memory of the late ingenious Mr. Charles Darwin of Litchfield, Student of Medicine at Edinburgh. Who departed this life, May
15, 1778, before he had reached the 20th year of his age.

Peace to his ashes—to his memory fame;
Let these few lines intrinsic worth proclaim.
With learning, judgment, wit, and genius blest,
A noble ardour fir'd his youthful breast;
Eager of science, he explor'd each part,
But eager most he grasp'd the healing art;
His zeal was such that skill'd beyond a youth,
He died a martyr in pursuit of truth;
Yet not before his genius bright had shone,
And gain'd him laurels and a high renown;
Oh, had he liv'd till learned age had run
The glorious race, his youth had but begun,
Then future myriads, by diseases torn,
Had thankful blest the day that he was born.

* * * * *

A translation of the Primae Lineae Physiologiae, of Dr. Haller, has lately been published at Edinburgh. In the advertisement which is prefixed to this work, the translators, after mentioning the different editions of the original, observe, that what they now offer to the public is an exact translation of the edition printed at Edinburgh, under the direction of Dr. Cullen; and they have not omitted a tran-
translation of the elaborate Index, which was subjoined to it, in which a compendious analysis is given of the whole work.

* * * * *

On Monday the 12th of April, being the anniversary of the birth day of the illustrious Harvey, the Harveian Oration instituted with the view of doing honour to his memory was delivered at Edinburgh, by Dr. Charles Webster. The subject of this oration was an account of the character and writings of the late justly celebrated Dr. Haller.

We formerly gave our readers reason to expect that they should find in this work a short history of that illustrious medical philosopher, and we hope soon to fulfil our intention. But we are still under the necessity of delaying it. We flatter ourselves however, that some intended alterations which will probably take place in this work, with the commencement of our next volume, may hereafter prevent similar accidents.

* * * * *

After the delivery of the Harveian Oration at Edinburgh, the annual prize medal, given with the view of promoting experimental inquiry
query at that place, was publicly delivered to Dr. Edward Stevens, from the Island of St. Croix.

Our readers may remember that the subject proposed for the prize dissertation, was an Experimental Inquiry concerning the red Colour of the Blood; the prize was unanimously adjudged to a Dissertation to which was prefixed the following motto.

*Tentanda via est qua me quoque possum
Tollere humo, victorque virum solitare per ora.*

This Dissertation was found to be written by Dr. Stevens. Without pretending to give any particular account of it, we shall only at present observe, that it consists almost entirely of a detail of experiments which seem to have been instituted with no less judgment than ingenuity, and conducted with the most accurate attention. The general conclusion from his experiments, is, that the red colour of the blood, depends on the principle of inflammability which it contains.

The subject prepared for the prize Dissertation for next year is, an Experimental Inquiry concerning the Nature and Properties of the coagulable Lymph or Gluten of the Blood.
The competitors for this prize must transmit their Dissertations to Dr. Duncan, on or before the first of January, 1779. To these Dissertations it is required that each candidate shall prefix a motto, and with the 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.

* * * * *

Mr. de la Blancherie of Paris, has lately set foot an institution for holding a general correspondence relative to sciences, arts, letters, and the lives of illustrious men, distinguished by their learning, in all countries.

The Royal Academy of Sciences, some time ago, appointed a committee to examine into this project, who returned a very favourable report, and recommended it as being a scheme which deserved encouragement and the assistance of the learned.

From this institution it is intended, that there shall be a weekly publication, containing intelligence from the republic of learning and arts; and from the account which is given by the members of the Royal Academy of Sciences of
of the labour and expence which Mr. de la Blancherie has bestowed, as well as from the active zeal which he possessest, there is no reason to hope that this publication will be highly conducive to the progress of useful sciences.

* * * * *

The Medical Society of Edinburgh have lately come to the resolution of making an important addition to their business, which, it is hoped, may be attended with the most useful consequences. Besides their usual weekly meetings, at which papers read by their ordinary members, are the subject of discussions, calculated principally for the improvement of the industrious student; they are to hold also regular monthly meetings, for reading and considering practical papers in medicine, and medical philosophy, intended for publication. They have appointed a committee for conducting this publication, and they have addressed their absent members, many of whom are practitioners of high reputation in every part of the British dominions, soliciting communications for their transactions. We shall here present our readers with a copy of their
circular letter, which explains the nature of
their intention, and gives a list of their com-
mittee: And we may further add, that al-
though hitherto they have addressed their own
members only, yet communications, suited to
their design, from any other practitioners will
be highly acceptable.

"Sir,

"THE Medical Society of Edinburgh,
lately erected into a body politic, by a charter
from the crown, have elected a committee for
the purpose of conducting an annual publica-
tion. The respectable footing the Society is
now on, the very eminent names in almost
every part of the world which grace its regis-
ter, the valuable communications with which
it is frequently favoured, hitherto lost to
the public, and a desire to extend medical
knowledge, are the motives to this under-
taking.

"The following gentlemen are appointed
the committee for publication: Drs. Cullen,
Monro, Duncan, Stevens, and Stapleton;
Mess. Hamilton, Aitken, Ruffel, Ford, Pel-
let, Logan, Broughton, Cleghorn, and Quin.

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"Any communications on medicine, or subjects connected with that science, transmitted to us, will be gratefully received,

We are, Sir,

Edinburgh,
March 1, 1779.

Your most obedient Servants,

ANDREW WARDROPE, M.D.
CHARLES WEBSTER, M.D.
Secretaries to the Committee for Publication."

* * * * *

Dr. David McBride, whose genius and industry entitled him to the first rank among the philosophers and physicians of the present age, died lately in Dublin. We were in hopes that we should have been able, in the present number, to have introduced some account of his life, writings, and character; but we have not hitherto obtained such intelligence as to put it in our power to present our readers with an account, which could satisfy the laudable curiosity of those who have a just esteem for distinguished merit.

Q 2

Dr.
Dr. John Rutherford, Emeritus Professor of the Practice of Medicine, in the university of Edinburgh, and one of those eminent teachers to whom the medical school at Edinburgh is indebted for its origin, lately died at that place in an advanced age. Although Dr. Rutherford had, for several years, retired from the duties of public teaching, as well as from the fatigues of extensive practice, yet he retained to the last, that penetrating judgment which distinguished him ever in life as a successful practitioner.

First lines of physiology. By Baron Albertus Haller, M. D. translated from the correct Latin edition, which was printed under the inspection of William Cullen, M. D. to which is added, a translation of the elaborate index composed for that edition. 8vo. Edinburgh.

First lines of the practice of physic, for the use of students in the university of Edinburgh, by William Cullen, M. D. and P. Vol. II. 8vo. Edinburgh.

Remarks on that kind of palsy of the lower limbs, which is frequently found to accompany a curvature of the spine; and is supposed to
to be caused by it. Together with the method of cure; to which are added, observations on the necessity and propriety of amputation in certain cases, and under certain circumstances. By Percival Pott, F. R. S. 8vo. London.


An account of the scarlet fever and sore throat, or scarlatina anginoso, particularly as it appeared at Birmingham in the year 1778. By William Withering, M. D. 8vo. London.

A treatise on the malignant angina, or putrid ulcerous sore throat; to which are added some remarks on the angina trachealis. By J. Johnston, M. D. Physician at Worcester. 8vo. London.


The complete English physician, or an universal library of family medicine. By Alexander Gordon, M. D. 8vo. London.

Every patient his own doctor, or the sick man's triumph over death and the grave. By Lewis Robinson, M. D. 8vo.
A letter to Dr. Hardy, Physician, on the hints he has given concerning the origin of the gout, in his late publication on the Devonshire cholic. By Francis Riollay, M. B. 8vo. London.

A philosophical inquiry into the cause of animal heat: with incidental observations on several physiological and chemical questions, connected with the subject. By P. Dugud Leslie, M. D. 8vo. London.

An essay on the cure of abscesses by caustic, and on the treatment of wounds and ulcers; with observations on some improvements in surgery. By P. Clare, Surgeon. 8vo. London.


A treatise on the hydrocele. By Laurence Nannoni. 8vo. London.

Remarks on Dr. Lettsom’s letter to Sir Robert Barker, and George Stacpoole, Esq. upon general inoculation. By the hon. Baron Dimfdale. 8vo. London.

Observations on the plan proposed for establishing a dispensary and medical society, for the private and only immediate use of the subscribers. 8vo. London.

A dis-
A dissertation on the teeth and gums, and the several disorders to which they are liable. By William Bennet, Surgeon. 8vo. London.


An account of the experiments made at the Pantheon, on conductors for lightning. By B. Wilson, F. R. S. 8vo. London.


Éloge historique de M. Venel, professeur en médecine dans l'université de Montpellier, membre de la société royale des sciences, &c. par J. J. M. docteur en médecine de l'université de Montpellier. 8vo. Grenoble.

Essais de Jean Rey, M. D. sur la recherche de la cause par laquelle l'étain and le plomb augmentent de poids quand on les calcine. Nouvelle édition, avec des notes par M. Gobet. 8vo. Paris.

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By a Society in Edinburgh.

Attamen errores non sunt artis sed artificium

Newton.

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PART III.

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M, DCC, LXXIX.
M E D I C A L
COMMENTARIES.

S E C T. I.
An Account of Books.

I.

Societatis Medicae Havniensis Collectanea.—Cum

IN a former number of our Commentaries,
some account was given of the principal
papers contained in the first volume of this
work, as well as of the society by whom it is
published. The volume now before us con-
tains no less than thirty-six dissertations upon
different subjects. We cannot therefore, at-
ttempt to give an analysis of each of these,
but must confine our observations to a few.

S 2 And
And among others the following, from their interesting nature, seem to claim particular attention.

*Observatio de Febre putrida petechiali a Factore Piscicium saltitorum putrefactorum. Autore V. B. Aafkow.*

The dreadful effects which ensue to the human species, from the putrid exhalations of stagnating water, or of other putrescent substances, are now so generally known, especially, as our author observes, since the publications of Lancisi, Pringle, and Lind upon this subject, that it is scarce necessary to trouble the world with other instances of the same nature. The publication, however, of the following observation, in his opinion, may, perhaps, have some influence in putting a fet of people upon their guard, who, from their frequent confinement to a very small space, can never be too attentive in preserving a purity of the air around them.

A thirty-two gun frigate went upon a four weeks cruise to the Baltic, in May, 1773. There were 180 men on board, all in high health, and in good spirits, at the time of their setting out.
The weather happened to be rainy at the beginning of the voyage, but no other circumstance occurred, which could give any reason to dread that the crew would be unhealthy. For the first fortnight the hands all enjoyed very good health; but about that time a very disagreeable putrid fetor was observed over all the fore-part of the ship, and by degrees it extended over the whole vessel. A putrid disorder soon commenced among the sailors, with which a great number were seized; and it was remarkable, that those were first attacked with it, who slept in the fore-part of the ship, where this smell was first perceivable. On the contrary, those were last in being seized, whose apartments were in the most distant parts of the vessel.

As the putrescent effluvia, which for some time had prevailed in the ship, was immediately suspected to be the cause of the sickness, all the different apartments were examined, but although the strictest search was made in order to detect the cause of the fetor, yet nothing satisfactory could be discovered. The fetor became daily more intolerable, and the sickness among the men increasing in the same
proportion, they were at last, about the middle of June, obliged to put into port.

A farther scrutiny being now set on foot, the cause of all the mischief was at last discovered; in the salted fish intended for the provision of the ship. To the under strata of these it was found that some salt water had got access, and as the upper stratum of the whole remained sweet and untainted, every cause of suspicion had thereby been prevented from falling on that quarter.

Every putrescent article being thrown over board, and the ship having undergone a thorough cleansing, she again set sail in the month of July; but so difficult is it effectually to eradicate this cause of disease, when once it has got access to a ship, that, notwithstanding every attempt for the purification of the vessel, the sickness among the men still continued to prevail, and at last got to such a height as obliged them again to come into port, till some more effectual means could be fallen upon, for removing the cause of their disasters.

Our author afterwards gives some account of the symptoms which occurred in the dis-
ORDER thus produced; but as he has few or no observations upon the method of cure practiced. And as the appearances which the disease exhibited, did not differ materially from the general run of putrid fevers, it is not here necessary to give a particular detail of them.

*Observatio de Tænia ope stanni ræfl expulsa. Autore Sibbern.*

A young woman, aged twenty-five, was seized with a hoarseness, and pricking pain in the fauces, but without any symptom of angina, or any other local affection; she was affected also with a dry cough, cardialgia, an obstinate costiveness, a troublesome pain in the left hypochondrium, a ravenous appetite, suppression of the menses, a paleness of countenance, and defection of the spirits.

Worms being suspected as the cause of the disease, calomel with rhubarb, valerian, and other anthelmintic medicines were prescribed, but with no advantage.

At last recourse was had to powder of tin, conjoined with jalap; two drams of the former, and half a dram of the latter, being made into a bolus with honey, were given for  
S 4  a dose.
a dose. After three doses of the medicine had been taken, a worm of the tænia kind was paffed, no less than thirty-eight yards in length; and although the remedy was still continued, no more of these animals were discharged, and in a short space of time the patient got into a state of perfect health.

The worm was intended to have been put into a bottle of spirits, with a view to its preservation; but, by mistake, it was put into a bottle of vinegar; and as, in a short time after being immersed in this fluid, it became perfectly black, our author supposes that vinegar may one time or other be brought into use as an anthelmintic.

Tentamina Eleétrica in Animalibus instituta Particula prima. Author P. C. Abildgaard.

Various opinions, our author observes, have prevailed with respect to the manner in which lightning operates on the bodies of animals, in depriving them of life.

Some have supposed that death on these occasions, is occasioned by a very high degree of rarefaction, induced by the thunder on the atmosphere. Others allege, that it in general pro-
proceeds from ruptures in the blood-vessels and nerves; and some again assert, that death in such instances is induced merely by the violent concussion given to the nervous system.

With a view to throw some light upon this subject, a set of electrical experiments were undertaken by our author. A few of these are now published, and the rest we are made to expect in some future publication of the society.

A colt, three months old, was at first made choice of for the subject of these experiments; but the strongest shocks our author could give could not kill it; the contents of ten large bottles were, at different times, made to pass through the head; but although the animal was thereby knocked down, and stumbled a little, it always instantly recovered again.

A common hen was now fixed upon; and it was found that a shock passed through the head, from one of the bottles only, was sufficient to produce death; at least after receiving the shock, the animal seemed deprived of every sense, and could not be affected by any kind of irritation.
Among other means of applying irritation, it occurred to our author to make some trials of repeated electrical shocks. And accordingly different shocks were given to the head, of nearly the same strength as the one originally given from one of the bottles, but all to no purpose, the animal still remaining to all appearance dead. At last, however, a shock being made to pass from the sternum to the back, life instantly returned, and the animal immediately walked about as if nothing had happened.

The same experiment was afterwards at different times repeated, and always with the same effect; the shocks given at the breast always counteracting effectually those given at the head.

Several smart shocks being made to pass through the head of a cock, he was thereby not only rendered to all appearance dead, but considerable quantities of blood were discharged from his mouth and nose; he instantly recovered, however, on receiving a shock at the breast.

To prevent all manner of deception, and to determine exactly whether these animals would recover from the effects of the first shock upon
upon the head, without the intervention of the other given to the breast, another hen, and the cock with which the former experiment was made, were seized, and one shock made to pass through the head of each, of the same strength, being given both at the same instant from the same bottle. The animals being both thereby rendered entirely destitute of sense and irritability, were left lying upon the ground till next morning, when they were found perfectly stiff and cold; nor could they be again recovered, either by the effects of electricity, or by any other means that were attempted.

The experiments already related by Dr. Abildgaard, may, we think, not only lead to probable conjectures, as to the cause of death from lightning, but also, perhaps, to important discoveries with respect to the means of recovery in such a case. The author, however, has delayed his conclusions from these, as well as the relation of farther experiments, to a future volume of the work. With an account of these, therefore, we may hope soon be able to present our readers.

De
De Pareli Meta fistica Brachii siniri a Gonorrhœa.
Autor Joanne Wilhelmo Gulbrand.

A young man, aged twenty-six, of a sanguine temperament, was suddenly seized with a pain, and paralytic affection of his left arm; which came to such a degree of inveteracy as entirely to destroy both sense and motion, not only of the arm, but also of the hand and fingers.

A surgeon was first called, and afterwards a physician, who prescribed blood-letting, blisters, the use of camphor, and some saline medicines; but all to no purpose. Emollient cataplasms and fomentations were afterwards had recourse to, spirit of sal ammoniac, and other stimulating applications, were likewise applied; but no advantage accruing from any of them, the assistance of our author was at last desired.

As the disease continued to resist obstinately the use of every ordinary remedy, and as the patient now gave information that he had for some time laboured under a gonorrhœa, which by some quack medicine had been suddenly put a stop to, immediately before the appearance of the paralytic affection of the arm,
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arm, that circumstance was immediately sus-
pected as the cause of his disorder.

A course of mercury, in the form of Baron
Van Swieten's solution, was accordingly pre-
scribed; together with an electuary of farfa-
parilla conjoined with rhubarb, guaiacum, and
fena; and a decoction of burdock and guaiac-
cum to be used as ordinary drink. By the use of
these remedies, the pain of the arm gradually
abated, as did also the paralytic affection; and
in a short time the patient was restored to per-
fecct health. Soon after he began the course
now mentioned, the discharge from the urethra
was observed to return, and it was remark-
able, that, according as the discharge increased
in quantity, the several symptoms of the dis-
ease became less violent.

Our author takes occasion to remark, that
almost all the bad effects, such as violent rheu-
matisms &c. which frequently result from
courses of mercury, are effectually prevented
by conjoining to the mercury the use of gen-
tle laxatives, and of mild diaphoretic diluent
drinks, such as those already mentioned.
II.

Advice to Lying-in Women, chiefly respecting the Custom of drawing the Breasts. By C. Cruttwell, Surgeon at Bath. 12mo. Bath.

The intention of this treatise is to encounter a practice, which, according to our author, is founded on prejudice, and is, at the same time, unnatural, painful, and even dangerous. These conclusions are not presented as the result of speculative reasoning, but as founded on experience; while, at the same time, he assures us, that the practice of drawing the breasts, however, powerfully supported by custom, may be omitted with safety and ease.

The author introduces his observations on the subject, by giving a short description of the breasts, and some account of their use. The substance of his observations is, that they are glandular bodies, appropriated to the purposes of secretion, and that the liquor secreted is by nature intended for the great and good purpose of nourishing mankind in their infant state. While he accounts for the white colour of
of the milk, from its being a secretion which takes place almost as soon as the chyle enters the blood, he points out also the influence which food and drink of different kinds have, as affecting this secretion. And from the influence of intoxicating liquors on infants, if taken by the mother when the breasts are empty, he concludes that the most reasonable method of encountering the diseases of infants, is from giving medicines by the mouth of the mother.

In the case of those mothers who suckle their own infants, if the child be put early to the breast, obstruction will seldom be met with; but if the child be not put to the breast before the third day, this organ becomes full, turgid, and somewhat painful. In this case the infant is often unable to draw forth the milk, and not so much from the urgency of present symptoms, as with the view of preventing abscesses, schirrus, cancer, and the like; it has been a common practice to hire a woman for the purpose of drawing the breasts. By this means our author affirms, that endeavours to prevent imaginary evils are productive of real disease. For if in this state of fullness and hardness, the breast were guarded against every external injury,
injury, the swelling would subside, even in a few hours, and the child might be put to it with safety and with effect. On the other hand, external irritation at this time, such as that which must arise from drawing the breasts, produces inflammation and all its consequences, fever, abscess, and the like; and although the author does not positively assert, that these accidents proceed only from this cause, yet he affirms, that, in his own practice, he never met with any instance of milk-fever or abscess in the breast, where that organ had not been drawn, or had not received some external injury.

Having formed this conclusion respecting the cause of these symptoms, Mr. Cruttwell next proceeds to lay down those directions, by which such accidents may best be prevented. First, he considers the measures which are to be followed when the child is to be suckled by the mother; and afterwards, when it is not to be suckled. In the first case, he advises that the child should be put to the breast in about twelve hours after delivery; and that, previous to this, no food should be given it. If from neglecting this, the breasts become turgid, and affected with a throbbing pain tend-
COMMENTARIES. 264

ing to inflammations, he still advises that they should not be meddled with. And he assures us, that if the affection be not supported by the heat of the room, by cordial medicines, hot liquors, or similar causes, the throbbing and fullness will cease in six, eight, or at farthest in twelve hours. When external injuries have been such, that a cure cannot thus be effected, our author advises, the application of the faponaceous cerate, from which he tells us that the obstruction will be resolved and the milk re-absorbed. When this fails of effect, and a suppuration ensues, he advises, that the matter should be discharged merely by a slight puncture, which he affirms, will in all cases be perfectly sufficient. And after an opening is thus made, he thinks, that the faponaceous cerate is much preferable to those poultices which are in general recommended.

The directions which he gives in cases where a child is not to be suckled, or where, from any supervening disease, it becomes necessary that a child should be removed from the breast, are nearly the same with those which have been mentioned above. He condemns the use of all spirituous applications or plasters, applied with the view of repelling. And
on the other hand, when milk is accumulated in the breasts, so as to produce a throbbing pain, he considers the practice of drawing them to be both unnecessary and improper. He affirms, that when they are left to nature, they will never be attended with any bad consequences. This practice he recommends as the result of long and attentive experience, unbiassed by prejudice, and supported by success.

III.


The chief intention of the treatise before us, is to point out the impropriety of a frequent use of blisters, in disorders of the febrile kind; a practice, our author remarks, which of late has been too indiscriminately employed.

Various instances might be enumerated of the truth of this assertion, but in none does it appear more remarkable than in cases of apoplexy.
plexy. In some species of the disorder, blisters may probably be had recourse to with advantage, but nothing, we are told, can be more detrimental, than the practice, which, even in the inflammatory apoplexy, so universally prevails, of applying blisters to the head, neck, &c. In every such instance, our author affirms that by the stimulus they produce, they must certainly tend to aggravate the disorder.

After giving an historical account of the introduction of cantharides as an article in medicine; and having shewn, that as yet their properties and the manner of applying them are by no means sufficiently ascertained, our author then proceeds to enquire into the propriety of the use of blisters in fevers.

As fever consists in an increased degree of heat, with an unnatural quickness of circulation; and as the application of blisters are universally allowed to be attended with an augmentation of both, our author is of opinion that they can never in such instances be with propriety used, as they must always tend to aggravate the very symptoms they were intended to remove.
The opinions of Freind, Clofius, and others, who have recommended blisters in febrile disorders, are particularly enquired into, and attempted to be overthrown; but the writings of Sir John Pringle upon this subject, are most severely animadverted on, as tending to establish the application of blisters as a general practice in topical inflammations, especially in pleurises. This is a mode of treatment, which, our author is convinced, must in general be productive of the worst effects. As in cases of pleurisy, a general rigidity of fibres and hardness of pulse almost always occur; instead of blisters, which seem entirely repugnant to the removal of either of these circumstances, warm emollient applications externally are recommended, together with the internal use of bland, demulcent, cooling medicines. Blood-letting however is the principal remedy we are directed to depend upon; by a proper use of which our author, in the course of an extensive practice of forty years, in a large city, has seldom or never lost a patient in pleurisy, when the disease had not been previously improperly treated, or when the disorder was not too far advanced before he happened to be called in.

But
But although our author by no means approves of the use of blisters in real inflammatory afflictions, yet he does not attempt to deny their utility in various occurrences in other disorders; and the following are enumerated by him as circumstances which, in general, point out the propriety of their application.

1. Blisters, he observes, seem to be evidently indicated in such disorders as arise from languor and imbecility, and where of consequence a stimulus appears to be wanting. Where the vis vitae appears to be in too debilitated a state for effecting a removal of the disease; and where a quickened circulation seems to be needed.

2. They appear particularly proper in all such affections as are attended with abundance of serous pituitous humours; and in cold, phlegmatic temperaments. Our author, likewise, agrees with Baglivi, in recommending blisters in those disorders of corpulent people, supposed to be attended with what he terms, a viscid diathesis of the blood; from his belief that even the external application of cantharides may produce a dissolved attenuated state of the juices.

3. Blif-
3. Blisters are with more propriety had recourse to in disorders of cold, moist, northern regions, than in warmer climates; and of course they may be used with more freedom, we are told, in winter than in summer.

4. Applications of this nature are particularly proper, when it is intended to relieve the part diseased, by producing an irritation and discharge of matter, in a sound, and distant part.

5. Our author agrees with Dr. de Haen in recommending the topical application of blisters to parts immediately pained; provided all the usual remedies have been previously had recourse to without effect.

6. Blisters are recommended in such cases of convulsive, and paralytic disorders, as appear to proceed from morbid states of the fluids; but ought always to be avoided, we are told, in affections of that nature where irritability alone is suspected as the cause.

These, our author remarks, are the only circumstances which can ever indicate the propriety of having recourse to blisters; a species of remedy, he concludes, never in any respect necessary in the cure of fever.
IV.

A Treatise on the malignant Angina, or putrid and ulcerous Sore Throat. To which are added, some Remarks on the Angina Trachealis. By J. Johnstone, M. D. 8vo. Worcester.

The principal part of this dissertation was published five years ago, as a thesis, at Edinburgh. But the author, having since that time had an opportunity of making several valuable additions to it, has now thought proper to present it to the public in its present form.

Dr. Johnstone adopts the definition of this disorder as given by Dr. Cullen, under the second species of cynanche, viz. "a red painful swelling of the tonsils, and mucous membrane of the fauces, attended with ulcers, which are covered with white, or ash-coloured floughs, with a putrid exanthematic fever, and with difficulty of breathing and swallowing.

From many passages in the writings of Hippocrates, Celsus, and other ancients, Dr. Johnstone endeavours to prove, that they were well
well acquainted with this disease. How far he is right in this conjecture, our readers will best determine, from comparing their writings with the very full and accurate enumeration of symptoms, which they will find in this treatise.

After giving a very distinct history of the disease, the author next proceeds to the diagnosis, or means of distinction between this and some other species of angina. The inflammatory angina, is, we are told, of every other disease the most liable to be confounded with the putrid sore throat.

Children, women, the relaxed, weak, and sickly, are most liable to the malignant angina; adults, men, the healthy, and robust, are most subject to the inflammatory.

The malignant species is most common in autumn, and is highly contagious. The inflammatory usually appears in the spring, and is never contagious. Both of them begin with shivering; but the malignant is more commonly attended with sickness, vomiting, purging, and acute pain of the head, than the inflammatory. In the former the pulse is quick, weak, unequal, and fluttering; sometimes heavy and undose. In the latter it is
frequent, strong, full, and hard. The malignant is attended with but little pain; the inflammatory with very acute pain. The malignant fort is always attended with prostration of strength, dejection of spirits, perpetual anxiety, sighing, and great oppression at the praecordia, with dull, heavy, watery eyes. But whenever floughs appear, especially if they are accompanied with a purple or erysipelatous eruption upon the skin, there can then be no doubt concerning the true nature of the disease, and all suspicion of inflammatory angina must vanish.

There is but one other species of angina, we are told, from which this disease requires any distinction, and that is, the croup, angina infantium, or suffocatio stridula. A small degree of attention to the several divisions of that distemper, as made by the best writers, will shew that in respect to many of the cases there can be no distinction, because in reality there is no difference.

The spasmotic and inflammatory species of croup, are distinguished from this disease in the same manner as inflammatory angina; but with respect to the putrid species of croup, as it is attended with the very symptoms of malignant
lignant angina; as dissections after death prove the trachea to be in it affected in the same manner as in the malignant angina; as the writings of Huxham, and the experience of other physicians assure us, that the stridulous voice is a common attendant on malignant angina; and, as all authors agree, that the putrid suffocatio stridula is increased by the same circumstances, and cured by the same remedies, there cannot be stronger reasons, our author remarks, for arranging it among the varieties of malignant angina, and hence he proposes the following division of malignant angina; viz. into angina maligna tonsillaris, and angina maligna trachealis.

The first of these comprehends all cases where ulcerations are spread over every part of the mouth and throat, when the larynx is not affected, which are marked by the ordinary symptoms, and discovered by inspecting the mouth and throat.

The second takes in all cases where ulcers are formed in the larynx and bronchia, which are discoverable by sharpness and shrillness of the voice, increased difficulty of respiration, frequent cough, and expectoration of putrid mucus,
mucus, at the same time that the fauces are covered over with white sloughs.

This, we are told, is a distinction of some importance, and deserves attention, from its giving much assistance in forming a prognosis of the event; as when ulcers have found their way into the trachea, a cure, our author observes, is very seldom to be expected.

After enumerating the various predisposing, occasional, and exciting causes of this disorder, Doctor Johnstone concludes, that, the proximate cause consists in a putrid acrimony conveyed into the system, and from which, he thinks, all the symptoms are easily explained, as arising from a debility of the nervous system, and a dissolved state of the circulating fluids.

In the method of cure, our author observes one general indication to be kept in view, is, to correct the putrescent tendency throughout the system in general, and to stop the progress of putrefaction in particular parts.

The different remedies recommended by authors, are here particularly enumerated, and to each, Doctor Johnstone subjoins his own opinion.

_Bleed_
Bleeding, our author observes, has been recommended in this disease by some writers; but he coincides entirely with Dr. Fothergill, in condemning the practice; as instead of mitigating any of the symptoms, it uniformly tends to render them worse.

Purging, like every other evacuations, which diminish much the patient's strength, always, we are told, does harm, and ought to be strictly guarded against. To obviate coltiveness, ripe fruits and occasional glysters of the antiseptic kind, are recommended in preference to purgatives.

When nausea is very urgent in the beginning of the disease, a gentle emetic is then recommended both for emptying the stomach, and for exciting a diaphoresis.

Blisters, notwithstanding the septic nature of cantharides, we are told, have been found useful in this complaint, by raising the pulse, and supporting the vis vita. They are often applied with advantage to the throat itself.

Whenever nitre has been much employed in the fever attending the malignant angina, it has manifestly increased the heat and all the
the putrid symptoms. This might naturally be expected, our author remarks, in a fever attended with great depression of the nervous and circulating powers, from a remedy which diminishes, instead of adding to the strength of those powers.

A dependence upon spiritus Mindereri has also, we are told, had bad consequences, when the tenuity of the blood was in any degree considerable.

*Fixed air*, as a corrector of putrescency, is recommended upon the authority of different practitioners.

Although mercury has been proposed by some American physicians, in this disorder, yet, our author, thinks the practice exceedingly hazardous, from the known evacuating powers of mercury: every evacuation in the malignant fore throat, when carried to any extent, always, he observes, proves prejudicial.

The vegetable, mineral, and dulcified acids are all recommended in this disorder; particularly from their antiseptic powers. But they cannot, we are told, be given with freedom to infants at the breast, because they coagulate the milk,
milk, and so tend to produce disorders of the bowels.

_Pulvis contrayeræ compositus_, in some circumstances of diarrhoea, we are told, may possibly be used with propriety; but, in other respects, it is a remedy without any other recommendation than that of custom and fashion.

_Confœatio cardiaea_, together with wine and other cordials, is recommended, as tending to make the pulse fuller and stronger, and for removing anxiety and lessening sickness. Wine however, is said, to be more effectual than any of the others.

_Myrrh and camphor_, are both recommended as powerful antiseptics; the former, we are told, although commonly prescribed only in gurgles, yet may be used with much propriety internally.

The efficacy of Peruvian bark, in this disease, has, we are told, surpassed the healing powers, experienced from it in every other instance. Those who have tried it most in this complaint, best knowing how absolutely it subdues the disease, which is more certainly cured by the early application of this remedy, than
than any disease, of equal consequence, by any means whatever. It here evidently acts as an antiseptic and tonic; it corrects putrefaction when it is begun, and it resists the process of putrefaction, by repairing the forces of nature, and by giving that vigour to the nervous system which enables it to oppose and overcome the disease.

As it has been found inconvenient to administer the bark in intermittent and remittent fevers, at any time but during the intervals of paroxysms; so it has been questioned by some, whether we ought not to wait for a remission in the fever attending the malignant sore throat before we give the bark; but our author is clearly of opinion, that this cautious mode of proceeding is by no means necessary, no inconvenience having ever, he says, been observed to accompany or follow the use of Peruvian bark, at the very height of the fever attending this sore throat; nay, we ought, he thinks, to give it more frequently and in larger quantities, in proportion to the height of the fever.

As proper additions to Peruvian bark he recommends, decoctions or extracts of cascara.
rilla bark, and of lignon Campechense, especially when there appears any propensity to diarrhoea.

By a proper combination and application of these various remedies, in the method here particularly pointed out by our author, practitioners will seldom fail, we are told, to remove the disorder, excepting in those instances where the trachea is affected; which not only require some variety in the mode of treatment, but are in reality much more dangerous than where the mouth and tonsils are only affected.

Doctor Johnstone now proceeds to the more particular consideration of the angina maligna trachealis; after enumerating the opinions of all the most eminent authors on this disorder, and having given a diagnosis, between the spasmodic, inflammatory, and malignant species of it, he then proceeds to the specific treatment or method of cure peculiar to the latter.

Whenever the larynx and trachea become the seat of malignant angina, the whole method of cure directed for its more usual form, must then, we are told, be applied with unre-
tinremitting affdiuity, though we are forbid to indulge the same pleasing hopes of succes from the application of it.

The air of the patient's chamber should be well impregnated with the steams of vinegar, myrrh, and honey, which ought to be incessantly rising at his bed-side and he should be directed to hold his mouth directly over the vessel, or else the steams must be conveyed immediately into the mouth by means of a funnel. Instead of common vinegar, acetaquecillum has sometimes been directed to be used for steaming, and apparently with effect in promoting expectoration.

Expectoration is also to be promoted by all other probable means. To vomit the patient now and then with oxymel of squills, answers this purpose, and forwards, we are told, the separation of the sloughs; and smaller dozes of oxymel of squills with gum ammoniac or affaææida may afterwards be used to keep up the same excretion.

Affaææida is here much recommended; and after a little use, even children come to take it, we are told, easier than gum ammoniac. Whilst the patient is taking the Peruvian bark,
the principal remedy to be depended on, a large spoonful or two of a strong solution of affafoc-tida is directed to be given between doses. When the case is alarming, or the patient obstinately refuses to take it by the mouth, it may then be given in a glyster along with the bark.

In such cases, particularly with infants, when medicines are rejected, whilst the danger is extreme, antiseptic baths are directed; to be prepared by boiling Peruvian bark, chamomile flowers, or myrrh, in a sufficient quantity of water, acidulated with a small proportion of vinegar.

Blisters to the throat, back, or neck, are also recommended; and likewise poultices, composed of garlic, to the feet; which not only act as antiseptics, but tend to raise the pulse, and to render the breathing easy and regular.

If, notwithstanding all these attempts, the difficulty of breathing should increase, where the throat is clear from floughs, if the pulse be good, and the symptoms of debility not remarkable, as circumstances are sometimes apt to deceive us, inflammation may then be suspected, and bleeding may very properly be tried;
tried; for in this, as in every other dangerous disease, our author concludes, "Satius est anceps remedium experiri quam nullum."

V.

An Account of the Scarlet Fever and Sore-Throat, or Scarlatina Anginosæ; particularly as it appeared at Birmingham, in the year 1778. By William Withering, M. D. 8vo. London.

The disease here described made its appearance, we are told, at Birmingham and the neighbouring villages, about the middle of May, 1778. It continued in all its force and frequency to the end of October, varying, however, in some of its symptoms as the air grew colder. In the beginning of November it was rarely met with; but towards the middle of that month, when the air became warmer, it increased again, and in some measure resumed those appearances it possessed in the summer months, but which it had lost during the cold winds in October.

It affected children more than adults; but seldom occurred in the former under two years of age; or in the latter, when once they had passed their fiftieth year.
The very minute history of the disease as here exhibited by our author, we cannot pretend to detail; the more characteristic symptoms, however, shall be enumerated: we shall then give some account of his observations on the diagnosis, and conclude with the method of cure.

With various general symptoms of fever, the patient at first complains of a dejection of spirits, a slight soreness, or rather stiffness in the neck, with a sense of straitness in the muscles of the neck and shoulders, as if they were bound with cords.

The second day of the fever this soreness in the throat increases, and the patients find a difficulty in swallowing, but the difficulty seems less occasioned by the pain excited in the attempt, or by the straitness of the passage, than by an inability to throw the necessary muscles in action. The skin feels hot and dry, but not hard; and the patients experience frequent, small, pungent pains, as if touched with the point of a needle. The breath is hot and burning to the lips, and thirst makes them wish to drink, but the tendency to sickness and the exertions necessary in deglutition are so unpleasant, that they seldom
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dom care to drink much at a time. They have much uneasiness also from want of rest during the night.

In the morning of the third day, the face, neck, and breast appear redder than usual; in a few hours this redness becomes universal, and increases to such a degree of intensity, that the face, body, and limbs resemble a boiled lobster in colour, and are evidently swollen. Upon pressure the redness vanishes, but soon returns again. The skin is smooth to the touch, nor is there the least appearance of pimples or pustules. The eyes and nostrils partake more or less of the general redness; and in proportion to the intensity of this colour in the eyes, the tendency to delirium prevails.

Things continue in nearly this state for two or three days longer, when the intense scarlet gradually abates, a brown colour succeeds, and the skin becoming rough, peels off in small scales. The tumefaction subsides at the same time, and the patients gradually recover their strength and appetite.

During the whole course of the disease, the pulse is quick, small, and uncommonly feeble.
ble; the urine small in quantity; the sub-
maxillary glands somewhat enlarged and pain-
ful to the touch. The velum pendulum pa-
lati, the uvula, the tonsils, and gullet, as far
as the eye can reach, partake of the general
redness and tumefaction; but although col-
lections of thick mucus, greatly resembling the
specks, or floughs, in the putrid fore throat,
sometimes occur, yet these are easily washed
off, and real ulcerations of these parts were
never observed.

These are the most usual appearances of this
disorder; but it too frequently, we are told,
assumes a much more fatal form. In some
children the delirium commences in a few
hours after the first attack; the skin is in-
tensely hot; the scarlet colour appears on the
first or second day, and they die very early on
the third. Others again, who survive this rapid
termination, instead of recovering as is usual,
about the time the skin begins to get its natural
colour, fall into a kind of lingering, and die
at last in the course of six or eight weeks.

In adults, circular livid spots, we are told,
were frequently observed about the breast,
knees, and elbows; also large blotches of red,
and others of white intermixed, and often
changing places.
In the month of October when the air became colder, the scarlet colour of the skin was both less frequent, and less permanent. Many patients had no appearance of it at all, whilst others, especially adults, had a few minute, red pimples, crowned with white pelucid heads. The inside of the throat was considerably tumefied, its colour a dull red, sometimes tending to a livid. The pulse beat in general 130 or 140 strokes in a minute; was small, but hard, and sometimes sufficiently so to justify the opening of a vein; and the blood thus taken away, in every instance when cool, appeared fizzy, and the whole effulment firm.

Happy would it be, our author observes, if the baneful influence of this disorder terminated with the febrile symptoms. But in ten or fifteen days from the cessation of the fever, and when a complete recovery might be expected, another train of symptoms occur, which at last frequently terminate fatally. The patients, after a few days amendment, feel a something that prevents their farther approach to health; an unaccountable languor and debility prevails, a stiffness in the limbs; an accelerated pulse, disturbed sleep, disrelish to food,
food, and a scarcity of urine. These symptoms, we are told, are soon succeeded by swellings of a real dropical nature, forming sometimes an anasarca, and on other occasions an ascites.

Dr. Withering, after examining the accounts given of this disease by different authors, proceeds to the diagnosis. It may be distinguished, he observes, from the petechial fever, by the eruption in the latter appearing seldom before the fourth day, by the regularity and distinctness of the spots, and by its principally occupying the neck, the back, and the loins. On the other hand in the scarlet fever, the eruption generally appears about the third day; consists either of broad blotches, or else one continued redness, which spreads over the face and the whole body.

In the fever called p &lsquo;pura, the pustules are prominent, keep their colour under pressure, and never appear early in the disease; whereas in the scarlet fever, the eruption appears more early, is not prominent, but perfectly smooth to the touch, and becomes quite white under pressure.

Although the purple fever and scarlatina may be connected by some general cause, yet our
our author takes occasion to observe, that they
cannot be mere modifications of the same
eruption; for examples occurs, he says, of the
same person being first seized with one of these
disorders, and afterwards with the other; but
he never met with an instance of the same
person having the scarlet fever twice; and he
believes it to be as great an improbability as a
repetition of the small-pox.

This disorder is particularly distinguished
from the measles, we are told, by the want of
that cough, watery eye, and running at the
nose, which are known to be the predominant
symptoms in the early state of the measles,
but are never known to exist in the scarlatina.

From the erysipelas this disease is distinguish-
able, by the limited seat of the former, toge-
ther with its not being contagious.

The ulcerated sore throat, however, is more
difficult to distinguish from this disease than
any other; and yet the distinction is a matter
of the greatest importance, as the method of
treatment, we are told, ought to be extremely
different.—But although in a number of cir-
cumstances, these two diseases bear a very great
resemblance, yet, with a little attention, the
one may in general be distinguished from the
other.
other. From Dr. Fothergill’s account of the Sore Throat attended with Ulcers, our author has made out the following characteristic circumstances of the two diseases, contrasted to one another.

**Scarlatina Anginosa.**
- **Season.** Summer, Autumn.
- **Air.** Hot, Dry.
- **Places.** High, Dry, Gravelly.
- **Subjects.** Vigorous. Both sexes alike. Robust in most danger . . .
- **Skin.** Full scarlet ... smooth . . . If pimply, the pimpls white at the top . . . Always dry and hot.
- **Eyes.** Shining, equable, intense redness, rarely watery.
- **Throat.** In summer, tonsils, &c. little tume-
  sified; no slough . . . In autumn, more swelled.
  Integuments separating . . . Sloughs white.

**Angina Gangrenosa.**
- **Season.** Spring, Winter.
- **Air.** Warm, Moist.
- **Places.** Close, Low . . . Damp, Marshy.
- **Subjects.** Delicate . . . Women and female Chil-
  dren. Robust adults not in danger.
- **Skin.** Red tinge . . . pimply . . . The pimpls redder than the Interstices bedewed with sweat towards morning.
- **Eyes.** Inflamed and watery, or sunk-and dead.
- **Throat.** Tonsils, &c. considerably swelled and ulcerated . . . Sloughs dark brown.

**Breath.**
Breath. Very hot, but not foetid.
Voice. In summer, natural
Bowels. Regular at the accession.
Termination. The 3d, 5th, 8th, or 11th day.
Nature. Inflammatory.

Breath. Offensive to the patients and assistants.
Voice. Flat and Rattling.
Bowels. Purging at the accession.
Blood. Florid. Tender.
Termination. No stated period.

It is not pretended, our author remarks, that all the above contrasted symptoms will be met with in every case. It is enough, he observes, that some of them appear, and that if conjoined, with the consideration of the prevailing constitution, they enable us to direct that mode of treatment which will most contribute to the relief of the sick.

Before proceeding to the different articles of cure, our author, begs the attention of the reader to the following principles. As they did not, derive their origin from any pre-conceived theory, nor from any pre-disposition to particular opinions, but from actual observation, he therefore offers them as matters of fact.

1. The
He affirms that the immediate cause of this disease is a poison of a peculiar kind, communicable by contagion.

2. That this poison first takes possession of the mucous membrane, lining the fauces and the nose; and either by its action upon the secretory glands, or upon the mucus itself, assimilates that mucus to its own nature.

3. That it is from this beginning, and from this only, that it spreads to the stomach &c. and at length acts upon the system at large.

4. That its first action upon the nerves, is of a sedative or debilitating nature.

5. That in consequence of certain laws of the nervous system, when the debilitating effects operate upon the sensorium commune, a reaction takes place; and that this reaction, is cæteris paribus, proportioned to the debilitating power.

6. That, in consequence of this reaction of the nervous system, the vibratory motion of the capillary blood-vessels dependent thereon is greatly increased; an unusually large quantity of blood is accumulated in those vessels; the heart and large blood-vessels are deprived of
of their customary proportion; and hence, though stimulated to more frequent contraction, the pulse must necessarily be feeble.

7. That as violent exertions are followed by debility, upon the cessation of the fever, the capillary vessels, which had acted with such unusual violence, are left in a state of extreme debility, and are long in recovering their tone; hence it is that so many patients afterwards become dropical.

Our author, now proceeds to the consideration of the different remedies, which either are at present in common use, or have been recommended as proper in this disease.

Blood-letting.—This remedy has been recommended by authors, but such was the state of the pulse in this disorder, at least during the summer months, that it was not in any instance thought advisable to take away blood. In some cases, indeed, where the fiery redness of the eyes seemed to demand the use of leeches, they were had recourse to, but never with any advantage. In the harvest months, when the pulse was more firm, and when suffocation seemed to be threatened from the swelling in the fauces, blood-letting was sometimes advised, but still with less advantage
than one would have expected in almost any other situation.

*Vomiting.*—This, our author observes, seems to be the remedy of nature, and he is surprised how it should have been omitted by several authors, who have gone before him. Vomiting, he says, most amply fulfills the indications arising both from a consideration of the cause and of the effects; and a liberal use of the remedy he holds forth as the true foundation for successful practice, in scarlet fever and sore throat.—His common form of emetic is a combination of tartar emetic and ipecacuanha, given in pretty smart dozes; and these are to be repeated at least once in forty-eight hours; and in the worst cases so often as twice in twenty-four hours.

*Purging.*—The action of purgatives is considered by our author, as altogether repugnant to the curative indications in this disease; for the poison, as formerly remarked, being received into the system by the fauces, the operation of a purge, instead of discharging it, can only promote its diffusion along the alimentary canal; and in fact, we are told, that when even a spontaneous purging supervenes in this disease, the patients sink so amazingly fast,
Sudorifics. Cordials. Alexipharmics.—None of these remedies were found beneficial. With respect to cordials, our author observes, that although they seem to be indicated by the great loss of strength and feeble pulse, yet the certain consequence of their use always was, an increase of restlessness, of the delirium, and of the heat.

Diuretics.—These were found very beneficial. The vegetable fixed alkali is recommended as the most proper article of this kind: a dram or two may be easily swallowed every twenty-four hours, by giving a small quantity in every thing the patient drinks.

Peruvian bark.—No medicine, we are told, ever had a fairer trial in any disease than the Peruvian bark had in this epidemic; for the feeble pulse, great prostration of strength, with here and there a livid spot, were thought to be such undeniable evidences of a putrid tendency, that the bark was poured down not with a sparing hand. But this was only at first, for these livid spots, and the floughs in the throat being found to be the effects of inflammation instead of putrefaction,
tion, and the bark instead of diminishing, rather increasing these symptoms, it was at last entirely laid aside.

Upon the same principles that bark was prescribed, fixable air was at first likewise advised, but with no evident effects, either one way or another. — Dulcified acids were also had recourse to, but with no advantage.

Opiates, although recommended by some authors, for the removal of inquietude and watchfulness, yet in this epidemic, instead of affecting these purposes, always increased the distress of the patient.

Blister.—In the summer appearance of the disease, blisters were universally detrimental; they never failed to hasten the delirium, and if the case was of the worst kind, they too often confirmed its fatal tendency. — In the autumnal season, when the inflammation was less generally diffused through the body, they were less detrimental, but did not even here produce any beneficial effects.

Injected gargles of contrayerva decoction, sweetened with oxymel of squills, &c. were found very beneficial in bringing away large quantities of viscid ropy stuff from the fauces.

The
The immersion of the feet and legs in warm water, although it did no harm, yet did not either procure sleep, or abate the delirium, as it frequently does in other kinds of fever.

As in summer it was found difficult to keep the patient’s sufficiently cool, they were ordered to lie upon a mattress, instead of a feather-bed; a free circulation of air was kept up, and where the patient’s strength would admit of it, they were ordered frequently out of doors. Animal food and fermented liquors were denied them, and nothing allowed but tea, coffee, chocolate, milk and water, gruel, barley water, and such articles.

With respect to the dropscical disorder which so frequently succeeds to this complaint, it was never observed, our author remarks, when the preceding symptoms had been properly treated.

When called upon to patients in the dropscical state, our author commences his practice by a dose of calomel at night, and a purgative in the morning.—When a febrile pulse attended the other symptoms, emetics were useful, as well the saline draughts and other neutral salts.—When great debility, comatose, or peripneumonic symptoms occurred, blisters were

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found very serviceable; but when dropsical symptoms were the principal cause of complaint, small doses of rhubarb and calomel are advised; recourse was also had to diluted solutions of fixed alkalies, squills, Seltzer waters, and other diuretics.

When the urine flows freely, steel, and other tonics, are recommended; together with gentle exercise, high-seasoned foods, wine, and the wearing of flannel in contact with the skin.

Our author concludes his essay with an enumeration of several cases, treated according to the principles laid down in the preceding part of this publication. The successful termination of these cases demonstrates the propriety of the practice which he has recommended.
VI.


On a former occasion we presented our readers with various articles taken from preceding parts of the work before us; two other fasciculi have since been published, from which we shall extract an account of such articles as appear to be of most consequence.

Infans sex annorum, cujus brachium anterius figura morsus canis rabidi exhibebat, ejusque curatio.

Our author was called to a child, who about a fortnight before, had been bit in different parts of one of his arms by a dog; the wounds were at this time perfectly healed, but the marks left by the teeth of the dog were still very evident in the cicatrices which remained.

The child was now restless, complained of thirst, but on drink being brought to him could not swallow it; his pulse was full, his skin hot, his eyes fixed and confused, he could not sleep.
sleep, and as the sight of other people was very disagreeable to him he always endeavour-to keep himself concealed in dark obscure places.

The child was blooded two different times, and blisters being applied to the parts which had been bit, a suppuration was thereby induced and the discharge continued for a considerable time. Nitre and camphor were prescribed, together with Plunk's mercurial solu-tion; and in order to preserve a lax state of the abdomen, glysters and gentle purgatives were at proper intervals administered,

By a due continuation of this course, a complete cure was obtained; and the bark, with Virginian snake-root, were afterwards exhibited, by way of preventing a return of the symptoms.

Cæsio novacule, qua vir quidam, sibi abscondet, testiculum cum fruto, et membro virili, ad hujus usque originem.

We are here presented with the history of a man, who in a fit of lunacy, deprived himself by means of a razor, of both testes, scrotum, and penis.

The
The hæmorrhage that ensued was not considerable, the man himself having got a sufficient command of it by gentle pressure; and a surgeon having been afterwards called in, the parts were easily cured.

The chief intention our author seems to have in view by relating this case, is to afford an additional proof to the many other already in record, of there being no necessity in the operation of castration, for a ligature on the spermatic vessels.

_Paralysis extremorum et alia symptomata producens a vermibus lumbricis in stomacho, vesica urinaria et intestinis herentibus, quibus etiam accidit._

A man, aged 55, complained of nausea, vomiting, want of appetite, pains in all his joints, and a paralytic weakness in his different limbs. To these supervened, headach, coldness of the extremities, difficulty in passing his water, which was also frequently considerably tinged with blood, his pulse was feeble, the skin dry, his face pale and of a yellowish hue, his breath fetid; now and then he complained of pains in his bowels; he was col-

X 3 tive,
tive, and a considerable tension occurred in his abdomen.

An emetic being prescribed, with a view to the stomachic symptoms, a number of worms, of the lumbricous kind, were thrown up; and as this gave reason to suspect worms to be the cause of the disorder, gentle laxatives, togetherness with anthelmintics were prescribed. By these means the several symptoms were soon removed, and the man returned to his ordinary way of life.

In the course of three or four weeks however, from this period, he was seized with a difficulty of making water, and found it impossible with all his endeavours to get it accomplished. At last after a violent effort, he perceived a long worm coming away from the urethra, and having pulled it out he got a large quantity of bloody urine easily passed.

Another course of anthelmintic medicines was again advised, together with corroborants; and no farther returns of the complaints were observed.

*De urina ex umbilico profluen*te.*

A woman, twenty years of age, and three months gone with child, was suddenly seized with
with a retention of urine, from an inflammatory affection about the neck of the bladder.

The patient having been improperly treated, did not get any urine passed for the space of eight days, during which period she suffered the most severe pains. About this time a swelling occurred at the umbilicus, which breaking the following day, a considerable quantity of urine was by slow degrees discharged.

Our author being now called in, endeavored first to empty the bladder by means of a catheter; this being done, and a large quantity of urine, mixed with pus, being discharged, the patient was put upon a course of bark and other corroborants; and injections, of decoctions of bark, mixed with mel rofarum, were thrown into the bladder, with a view to deterge and heal such ulcers as might remain after the collections of matter.

By a continuation of this course, and care being at the same time taken, by means of a frequent use of the catheter, to prevent the urine from collecting in any considerable quantity, a complete cure was at last obtained, by the fore at the umbilicus healing up, at the same time that the urine came to be properly discharged from the urethra.
VII.

Medical Cases selected from the Records of the public Dispensary at Edinburgh, with Remarks and Observations. Being the Substance of Case Lectures delivered during the Years 1776-7. By Andrew Duncan, M. D. Fellow of the Royal College of Physicians, &c. 8vo. Edinburgh.

In the greater part of selections of medical cases, the object of the compilers seems to have been, to exhibit faithful histories of affections distinguished by their singularity. But in the volume before us, most of the cases which are recorded have no title to such a character. Here it has been the principal aim of the author, to establish some general doctrines which are in a great measure peculiar to himself; and to point out the advantages which may be derived from practices not commonly employed. When these are the objects which he had in view, his work will not be the less useful that he has chosen as the foundation of his observations, the cases of patients subjected to diseases which are by no means uncommon occurrences. But how far the observations
servations which he has offered are sufficient, either for establishing the propriety of the practice which he adopted, or for demonstrating the truth of the doctrine which he supports, we will not take upon us to determine.

It is probable, that every candid and judicious reader will by no means form the same sentiments with regard to all the cases which are here treated. And there are some of our author's doctrines, which differ so widely from the almost universally received opinions of medical writers, that they will not probably be readily or precipitately adopted. If, however, he has been able to render them in any degree probable, by deducing arguments from his own reading and observation, these may, perhaps, have the effect of turning the attention of other practitioners to future facts, by which alone they will either be most certainly established, or most effectually refuted.

A proper analysis of every subject which is treated of in a miscellaneous volume, would much exceed the necessary limits in a publication of this nature. We can now, therefore, propose to present our readers with a particular ac-
account of a few only of the articles which are contained in this publication.

The subject of the first article is a case of epilepsy. In the remarks which are given on the history of this case, the author endeavours to point out those particulars by which, he thinks, that epileptic affections may be most certainly distinguished from those diseases which most nearly resemble them, and which prove the present case to be an instance of genuine epilepsy. With this view, the circumstances, on which he puts the chief dependance, are the age and sex of the patient, the nature and appearance of the convulsive agitations, the foaming of the mouth, but above all, the total abolition of the external and internal senses which occur during the paroxysms. While the former particulars give a strong presumption of epilepsy, he considers these last circumstances, as affording a more certain ground for distinguishing this affection from hysteria, than the disorder of the alimentary canal, and the sense of a ball rising to the throat which have been considered as pathognomonic symptoms of the latter disease.

Hav-
Having on these grounds pronounced the disease of this patient to be epilepsy, he next proceeds to consider how far the cause from which it has originated, in the present instance, can be ascertained. And here the circumstances of this patient, who had lived constantly in the house with his mother, a woman long subjected to affections of a similar nature, and who had always slept in the same bed with her, naturally lead our author to make some remarks on the opinions which have been held concerning the hereditary and infectious nature of this disease. Although he readily allows that epilepsy is an hereditary affection yet he concludes that this patient’s disease did not depend upon that cause, from the disease being induced in the mother by an accident only which happened long posterior to the birth of this son. The supposition that epilepsy can be communicated from contagion by contact is, in our author’s opinion, supported by no facts, and repugnant to every well-founded idea respecting the nature of the disease. But he contends that in this, as well as in some affections nearly similar, the influence of the impression made by being frequently a witness of fits, is a case which in certain habits will be sufficient to induce epilepsy. To this cause
cause he refers the present instance; and he adds, that many other cases have occurred to him, where epilepsy could manifestly be traced to such an origin.

That many instances of epilepsy are totally incurable by any treatment with which medical practitioners are yet acquainted, is not to be denied. While, however, our author considers it to be a disease which, on some occasions at least, does admit of a cure, he is inclined to think that such instances as the present afford a better chance of successful treatment than most others. Notwithstanding therefore the obstinacy of this affection, even in its most flight form, he ventured to deliver it as his opinion, that in this instance, the epilepsy might at least be alleviated, if not completely removed.

The cure of epilepsy, according to our author, is chiefly to be expected on one of two principles; either by the removal of such causes as serve to excite the fits, or by inducing such a change on the state of the nervous power, that the exciting cause will cease to have its former effect. It was with the first of these intentions, that this patient was put upon the use of the pilulae caeruleae. The only pharmaco-
pœa, into which this article, as far as we can observe, has a place, is that of the Edinburgh college published in 1774. And when we consider that it has neither been introduced into the Pharmacopœa Suecica, Dispenfatorìum Brunsvicense, nor other works of a similar nature, which have been published since that date, we may presume that it is a remedy which is not at present in very general use. The history of a case, therefore, in which it seems to have been productive of the most salutary effects, may serve to recommend it to more general employment.

The pilulae ceruleae as they have been called, consist of the cuprum ammoniacum, united with bread intended merely to give a proper form. It is therefore on the former that the activity of the medicine must solely depend. And in this preparation of copper that metal is reduced to a saline state by the spirit of sal ammoniac. It is well known that many of those saline substances which have copper for their basis are of such activity as to render the internal use of them by no means safe. But, according to our author, from the prudent administration of this medicine very considerable effects, as a tonic, may be obtained, without any
any inconvenience resulting from its influence as a stimulant. For this purpose, the present patient began the use of it by taking every evening one of the pilulae ceruleae, containing half a grain of the cuprum ammoniaci. Although this had at first the effect of exciting considerable sickness at stomach, yet in a short time it was borne without any inconvenience: after which the quantity was gradually increased, as the state of his stomach would admit of it.

On the use of this medicine he continued for the space of two months. From the time that he began this course his fits became less frequent, and from a long interval without any threatening of attack, although he was frequently exposed to accidents which formerly induced fits, there was reason to believe that the disease was completely overcome. In this situation he was dismissed from farther attendance at the Dispensary. Our author, therefore, considers this case as affording an example of the cure of epilepsy by means of the cuprum ammoniacum. And he tells us, that this is not the only instance in which he has found it to be attended with manifestly good consequences in such affections. He is very far, how-
however, from representing it as an infallible remedy. And when he tells us, that in some instances he has employed it without any benefit, this ought to induce practitioners to consider it as merits a fair trial in every case, where other medicines are found ineffectual; although in many of these it should not be attended with success.

If the first article of this work affords an example of the successful cure of an affection, in its nature obstinate, by means of a remedy not generally employed; the last furnishes us with an example of the efficacy of a medicine which, although recommended by the earliest medical writers, has been long and too much neglected. Although the root of the fern had been recommended by Dioscorides, Galen, and others, for expelling from the intestinal canal that worm which has the name of tænia, yet its influence seems to have been so little known, that in the present age it seems to have been principally, if not only exhibited by those who made a secret of their mode of practice. And very lately, when an account of the method of treatment employed by Madame Nouffer, after being subjected to trial under the inspection of some of the most eminent physicians
in Paris, was made public by order of the French King; it appeared that her success, according to her own account at least, principally depended on the powder of the male fern; the Polypodium Filix Mas of Linnaeus.

In the 25th article of the present publication, we are presented with the case of a woman, who discharged every day, by the anus, numerous fragments of a tænia of different sizes. She was affected also with many other symptoms, which, in all probability, were to be ascribed to that part of this animal which still continued in the alimentary canal. Before she applied for assistance at the Edinburgh Dispensary in September, 1777, she had been observed to discharge portions of this kind of worm for the space of thirty years.

During that period, many different medicines had been used, from the use of some of which very large portions of the tænia had been brought away. But she was never by this means entirely freed from her symptoms; and after a very short interval, more fragments were again observed to come away. As the means before employed had been ineffectual in producing a radical cure, when she came under
under the care of Dr. Duncan at the Dispensary, he resolved to put her upon the use of Madame Nouffer’s medicines. By his direction she took, early in the morning, a dram of the powder of the root of the male fern. This was succeeded, after an interval of four hours, by the use of a purgative, consisting of an ounce and a half of cream of tartar, together with three grains of gamboge, and as much calomel, formed into an electuary with simple syrup.

From the use of these medicines, several larger fragments, which, taken altogether, were about fifty inches in length, were brought away. And the day following, some smaller fragments were discharged; but, contrary to what had formerly been the case, they came off in a dead state. The consequence of this discharge was, that she was soon freed from the symptoms to which she had been before subjected; and although the same medicines were afterwards repeated, no more fragments of the worm could be discovered. As she has since continued free from any return of her complaint for the space of many months, there is great reason to hope, that from this practice
a complete and radical cure has been obtained.

If in the first and last articles of this work, we have examples of practices which are not very common; so in the observations on many cases, particular doctrines are attempted to be established which lead to modes of cure, at least in some degree different from what are commonly followed. But in no instance is this more remarkable than in the 18th article, the subject of which is a case of venereal gonorrhœa. In his observations on this case, he endeavours, by many arguments to prove, that gonorrhœa depends on an infectious matter, in its nature essentially different from that which produces syphilis. But before attempting to establish this doctrine, he first endeavours to refute those which have chiefly been used in support of a contrary opinion.

As a proof that gonorrhœa and syphilis depend on precisely the same infectious matter, it is urged, that both diseases are very generally the consequences of the same remote cause, that is, communication with an infected female; that from a single instance of exposure to infection a patient will be subjected to
to both diseases; that from the same female, and at the same time, one will be infected with syphilis, and another with gonorrhcea; and lastly, that an affection beginning as gonorrhcea, will, in consequence of improper treatment, be converted into syphilis.

From the consideration of many circumstances, our author endeavours to shew, that the sameness of the remote cause in both diseases proves nothing more than that both are the effect of contact, while, at the same time, they are principally seated in the genital organs. From considering the condition of those by whom venereal infection is, in general, given, it can, he thinks, by no means seem strange that both infections should be communicated at the same time; whether they depend on one matter only, or on two different matters. He affirms that both gonorrhcea and syphilis may lie so long latent in the habit that it is often impossible to determine at what period infection has been contracted. Hence many of those instances in which it is suspected that, from the same female, one man has derived syphilis and another gonorrhcea, are founded entirely on mistaken observation. But even admitting that there are instances in which this
is certainly the case, yet, it by no means fol-
lows, that both diseases depend upon the same
infectious matter. For it is by no means a
rare occurrence to find a patient at once sub-
ject to both diseases; and there can be no
difficulty in conceiving, that, according, to cir-
cumstances, these affections may be communi-
cated either separately or conjoined. In answer
to the fourth and last argument, which is, indeed,
apparently the strongest, our author replies,
that those symptoms which are in general sup-
posed to indicate the conversion of gonorrhœa
into syphilis, are not venereal; and that in all
those cases where the diseases have succeeded
or supervened upon each other, the probability
is, that the patient had actually been infected
with both diseases, although one of them may
have continued latent for some time. In this
manner, then, he endeavours to explain the
facts, and to invalidate the arguments from
which it has been generally concluded, that
gonorrhœa and syphilis are merely different
sets of symptoms from the same infectious
matter.

With the view of proving that gonorrhœa
depends upon an infectious matter, which, in
its nature, is essentially different from that giv-
ing syphilis, Dr. Duncan is of opinion, that
arguments may be drawn from many different sources; but particularly from attending to the introduction of the two affections into different countries; from the phenomena which the diseases exhibit; and from the method of cure by which each is most readily overcome. Our author is of opinion, notwithstanding the many ingenious arguments which, he observes, have been brought to prove the contrary by Mr. Sanches, that both syphilis and gonorrhoea were unknown in Europe till the discovery of America. And he affirms, that from attending to the history of those affections when they first appeared in Europe, that the former had been distinctly observed several years before the latter was known.

This circumstance, he farther adds, has been by no means peculiar to Europe; and in China in particular, syphilis prevailed for a very long period before gonorrhoea was known there. But of all instances, what he considers as the strongest, is the case of the island of Otaheite, where, he tells us, that gonorrhoea is still unknown, although syphilis has been very common among them ever since they were first visited by European circumnavigators. From these facts then, he thinks it probable that a peculiar infectious matter is necessary for giving
ing each disease; and that the infection producing the one is incapable of giving rise to the other.

But if some arguments in support of this opinion, be derived from the history of the two diseases upon their first introduction into different countries, our author is of opinion, that reasons still more convincing are afforded from attending to the phenomena of the diseases. Attention to the progress of the two diseases shews, that while syphilis is an affection uniformly increasing in violence, and, if it be not artificially removed, universally terminating in death, gonorrhœa is a disease, which, after running a certain course, has a tendency to a natural cure. Where we are certain of the origin of the infection, gonorrhœa and syphilis are each as much the consequence of the application of a particular matter, as small-pox, or measles. And when we know the matter applied, we can as certainly foretell the disease which will follow in the one case as in the other. And lastly, although in some instances the diseases are combined, yet much more frequently each runs its course without the slightest appearance of the other. But were the infectious matter the same, Dr. Dun-
can contends, that in every instance where gonorrhoea existed, syphilis must of necessity follow. In every such case, infectious matter is necessarily applied to an innumerable multitude of lymphatic absorbents on the glans penis. Since this, however, is productive of no bad effect, it follows either that this matter is incapable of being absorbed, or that although it be absorbed it is innocent. But on either supposition it must be concluded, that the matter of gonorrhoea and syphilis, are essentially different. From attending then to the phenomena of the two diseases, he thinks it manifestly appears, that there are numerous circumstances inconsistent with the supposition of their depending on the same infectious matter.

Besides these, our author derives still a third set of arguments in support of the hypothesis which he has adopted from the method of cure peculiar to each disease. There can be no doubt, he observes, that the treatment serving to remove gonorrhoea, is, by no means fitted for the cure of syphilis; and that the treatment suited for the cure of syphilis is not calculated for the removal of gonorrhoea. Where the diseases happen to be combined in the same patient, the cure of gonorrhoea is by

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no
no means proportioned to the influence which mercury has in healing chancres, discharging buboes, or removing other syphilitic symptoms. Nay, gonorrhœa is often observed to be uninterrupted in its course, or even to increase in severity, during the use of mercury, which proves effectual in the cure of syphilis.

From all these circumstances taken together, Dr. Duncan concludes, that there is at least a high probability that gonorrhœa and syphilis depend each on a peculiar infectious matter. After having endeavoured to establish this opinion with respect to the nature of gonorrhœa, he next makes some remarks on the conclusions with respect to practice, which are to be drawn from this theory. At the very earliest stages, he thinks, that the disease may be overcome and discharged either by dissolving the mucus to which it adheres, or by increasing the secretion of mucus. When the disease is farther advanced, he thinks that the treatment must be directed first to combat a state of inflammation, and then of atonia. The first of these ends is, he thinks, principally to be accomplished by evacuants, refrigerants, and antiphlogistic regimen; the second, by astringents and tonics. And in the case which gave rise
rise to these observations it appears, that he employed as a tonic the Peruvian bark. Although he allows, that this is a remedy which has a tendency rather to aggravate inflammation than otherwise; yet he affirms, that under proper administration, and after the disease has made a certain progress, it will be found productive of the most beneficial consequences.

Besides the articles of which we have now given an analysis, upwards of twenty others are contained in the present volume; of which the limits of this publication will not admit of our giving any account. We may only conclude with observing, that this publication may be considered as furnishing a specimen of that kind of medical education, which the Dispensary at Edinburgh affords. And, however much readers may differ in their opinions with regard to the merit of this work, yet it must, on all hands be allowed, that if the great objects aimed at by a medical student, are, that he may learn by what symptoms diseases are most certainly to be known, and by what remedies they are most effectually to be removed, it is impossible to conceive any branch
branch of education better calculated for his purpose than careful attention to rational and judicious practice, when it is conjoined with a proper explanation of the intentions which the practitioner had in view, and a candid account of the effects which were to be attributed to the medicines employed.

VIII.

Remarks on that kind of Palsy of the Lower Limbs, which is frequently found to accompany a Curvature of the Spine, and is supposed to be caused by it: together with its Method of Cure. To which are added, Observations on the Necessity and propriety of Amputation, in certain Cases, and under certain Circumstances. By Percival Pott, F. R. S. and Surgeon to Bartholomew's Hospital. 8vo. London.

THAT species of palsy in the lower extremities, which so universally accompanies a curvature of the spine, appears equally frequently, our author observes, in both sexes, and in all ages.

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When this disease attacks an infant of only a year or two old, or under, the true cause of it is seldom discovered until some time after the effect has taken place, as the people attending, whether parents or nurses, know not where to look for it. The child is said to be uncommonly backward in the use of his legs, or is thought to have received some hurt at the time of birth.

When again it affects a child that is old enough to have already walked, and who has been able to walk, the loss of the use of his legs is gradual, though in general not very flow.

He at first complains of being very soon tired, is languid, listless, and unwilling to move much or at all briskly; in no great length of time after this he may be observed frequently to trip, and stumble, although there is no impediment in his way; and whenever he attempts to move briskly, he finds that his legs involuntarily cross each other, by which he is frequently thrown down, and that without stumbling; upon endeavouring to stand still and erect, without support, even for a few minutes, his knees give way and bend forward.

When
When the distemper is a little farther advanced, it will be found, that he cannot without much difficulty and deliberation direct either of his feet precisely to any exact point; and very soon after this, both thighs and legs lose a great deal of their natural sensibility, and become perfectly useless for all the purposes of loco-motion.

When an adult is the patient, the progress of the distemper, we are told, is much the same, but rather quicker.

The curvature of the spine when detected, and which is supposed to be the cause of this complaint, is found to vary in situation, extent, and degree, being either in the neck or back, and sometimes in the upper part of the loins; sometimes it comprehends two vertebrae only, sometimes three or more, by which the extent of the curve becomes necessarily more or less; but whatever may be the degree or extent of the curvature, the lower limbs only feel the effect, at least the arms, we are told, have never been observed to be affected by it.

The curvature in the spine which occurs here is almost always attributed to external violence; but our author is of opinion that
in such instances the effect is mistaken for the cause, and that previous both to the paralytic state of the legs, and to the alteration of the figure of the back-bone, there is a predisposing cause of both, consisting in a distempered state of the ligaments and bones, where the curve soon after makes its appearance.

All the usual machinery, of steel plates, stiff stays, &c. commonly recommended for correcting this species of deformity, instead of answering that purpose, rather tending to aggravate the disorder, our author was sometime ago, by a hint from Dr. Cameron at Worcester, induced to make trial of isfues, inserted near to the diseased parts, and the success which has since that time attended the practice, has been much greater than he had the least reason to expect.—The first attempts were by means of pea-isfues; afterwards fetons introduced on each side of the curve were tried; but these frequently coming out, a large opening was at last made upon each side of the spine by means of caustic, and the discharge preserved by the introduction of a kidney bean, and by every three or four days sprinkling the bottom of the sore with fine powder of cantharides.
For a more particular account of the success of this remedy, we must refer our readers to the work itself, but we cannot avoid inserting the following very singular case.

There is now, our author says, a boy in Bartholomew’s hospital, of about twelve years old, whose case was so truly deplorable, that a trial of the remedy was made, merely to avoid the appearance of inhumanity in discharging him as incurable without trying something. — The curvature was in his back, and consisted of three or four vertebrae, but by means of the weakness thereby induced, the whole set of dorsal ones had so universally and gradually given way, that he was exceedingly deformed both behind and before. He was so absolutely incapable of motion, that he could neither turn himself nor sit up in his bed; his feet were pointed downwards, and his ankles so stiff that when he was held up, the extremities of his great toes touched the floor, nor could his feet be brought flat to the ground by any means or force whatever. In short, he was in every respect as helpless as can be supposed, and at the same time in an exceeding bad state of health, from disorders of the thoracic and abdominal visceræ.
In this state he had been more than a year; it is now about three months since the caustics were applied; he is become healthy, and free from most of his general complaints; has the most perfect use of his legs while in bed, can walk without the assistance of any body, or of any thing to hold by; and from his manner of executing this, there is little doubt, we are told, of his recovering, in a short time, the perfect use of his legs.

To this it should be added, that although a considerable degree of deformity does, and probably will always remain, yet the spine in general is so much strengthened, that the boy is several inches taller than he was four months ago.

In the second part of this publication, we are favoured, as is expressed in the title, with observations on the necessity and propriety of amputation in certain cases, and under certain circumstances.

Our author, we are told, was led to these observations, from his being satisfied, that the propriety of amputations in certain cases, stands upon as fixed and as rational principles as any part of surgery. And from a contrary doc-
doctrine having within these few years been industriously propagated, much to the prejudice of mankind, both as serving to cover ignorance and timidity, and for answering the base purpose of malevolence.

The doctrine alluded to, which condemns amputation in all cases whatever, and almost without exception, was first propagated by Mr. Bilguer, surgeon in the Prussian service, whose work upon that subject was afterwards translated into French by Mr. Tiflot, who likewise added notes and observations of his own, in confirmation of the practice recommended.

Our author by no means wishes to have it understood, that he means to inculcate the necessity of amputating limbs in any other circumstances, than those wherein the most judicious practitioners of all ages have found that practice necessary. The intention of the present publication is merely to shew, that in various instances, such circumstances do occur, as render timidity in this respect very injurious to patients; for which reason, the young and unexperienced, as well as others, are here put upon their guard, against receiving too easily the opinion of Mr. Bilguer.

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S E C T. II.

Medical Observations:

I.

Observations on Mineral Poisons, by Dr. Houlston, Physician in Liverpool.

I T did not, till very lately, occur to me, that in treating of the antidotes, or remedies, for mineral poisons, alcaline falts are omitted to be recommended, both in Tislot’s Advice to the People, and Buchan’s Domestic Medicine, books very generally read and esteemed. As the effects of these poisons are often so sudden as not to admit of calling in medical assistance, it seems the more necessary to add this remedy to those recommended for common use

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to the people; and as the following history of facts will tend to demonstrate the importance, and to establish the reasonableness, of this practice (although it happened some years ago), I have thought it might be productive of good to society that it should be more extensively known.

In 1774, one Jones, a cow-keeper of Liverpool, was convicted at the Lancaster assizes, of poisoning his sister-in-law in revenge for her having opposed him in the sale of some property, of right belonging to the children of her sister, his former wife. Under an appearance of reconciliation, he had treated her, and the wife of the intended purchaser, William Ashcroft, one morning, at a public house, with some ale, which he himself had warmed. He put sugar in it, and had repeatedly poured it backwards and forwards from one cup into another. The sister-in-law went thence into the neighbourhood of Ormskirk (thirteen miles distant) where, in a few days, she died. The coroner could not attend as soon as was desired, and the body was in a very putrid state when it was opened. In the stomach were found, some small particles of what were judged to be cor-
corrosive sublimate; but of this circumstance I was not informed till after the other woman was better.

Mrs. Aflcroft came to me, May 5th, a week after her drinking this ale. Immediately after she took it, she set out to go to Prescot (seven miles) part of the way in a carriage, the rest on foot. She had not gone far before there came on a violent pain in her stomach, with continued vomiting, and intolerable thirst, so she stopped to drink water almost at each ditch. Her tongue, from her own account too, was considerably swelled. After much vomiting she was somewhat relieved; but, to the time she applied to me, she had continued to vomit up every thing she took, and complained of a heat and pain in her stomach; at some times much more violent than at others. As she seemed not in much pain then, and had vomited so frequently, I only advised her, when ever she was sick, to wash her stomach plentifully with chamomile tea; hoping, that in a little time, the vomiting might be checked. The account of the death of the other woman alarmed her greatly (as they had drank out of the same cup), and on the 7th in the evening she was extremely ill; her stomach swelled,
swelled, and was violently painful, so that she could scarcely speak to be heard. On considering the story she had told me, of the man's having put sugar in the ale, and bestowed so much pains in mixing it thoroughly, it occurred to me, that the poison added might probably be the corrosive sublimate, which does not easily dissolve, and that some of it, having been swallowed undissolved might remain in that state enveloped in the mucus and attached to the coats of the stomach; which as it gradually dissolved irritated and caused heat, pain, and vomiting. In this idea, I gave her a few spoonfuls of a solution of salt of tartar, with a view to decompose the sublimate, and she had no sooner swallowed it then she was easier. A little while after she took a vomit, and I caused some blood to be taken away to guard against inflammation of the stomach; she was much better the next day, eat her dinner well, and did not vomit; but, on the 9th at night, the pain returned, with great violence, and yeilded, as expeditiously as before, to the solution of salt of tartar. I now first heard of there being something found in the stomach of the other woman, supposed to be sublimate; and, on questioning my patient, learned, that she
she had always been most relieved, when after several efforts, she had vomited up a small quantity of something which, as she herself expressed it, tasted like milk which had stood in a brass pan. From these concurring circumstances, I had now no longer doubt of the poison being, as I had supposed it, sublimate; and, from the return of the symptoms, concluded that there still was some of it retained, whose solution, and action, was only very gradual. After repeating the vomit, I advised her to continue constantly the solution of salt of tartar. This, however, she had neglected, and on the 11th she had a fresh attack, which yielded readily to a repetition of the same means. As her objection to the salt of tartar was its disagreeable taste, I ordered her some pills, containing each 3 grains of it, which convinced of the necessity she did not omit taking. On the 15th was perfectly well and so continued.

The conclusion I would draw from hence is this; in all cases of poison it is prudent immediately to give a solution of an alcali, followed by a vomit. If the poison be corrosive sublimate, an alkali, either fixed or volatile, will decompose it, and precipitate the metal
in a form nearly inoffensive. It will have a
similar effect on the sugar of lead, the extract
of lead, or on any metallic salt. If the poi-
son be arsenic, Neumann observes, that, " al-
calies will very plentifully dissolve it." And
if so, as it is difficultly soluble in water, the
vomit will then succeed the better to discharge
it. Whether or no sulphur, exhibited in any
form might lessen the danger of arsenic is not
clear, though these two, when united, are not
poisonous. If the poison be of the vegetable
class, an alcali can be of no disservice, nor
interfere with the other means of remedying
by evacuation, nor yet by the subsequent use
of acids, so strongly insisted on by Tiffot, as
counteracting the effects of narcotics; since
acids given together with alkaline salts, are
pronounced to be attended with great success
in this case, by Dr. Mead and others.

To supply the omission then in those popu-
lar writers, might not the following direc-
tions be given on this subject. "When symptoms
"of poison appear, mix a tea spoonful of any
"of the following articles, salt of tartar, salt
"of wormwood, pearl-ash, pot-ash, spirit of
"harts-horn or of sal volatile, with half a
"pint of water, and of this let one half be
"given
given to the patient immediately, and the
other in a short time afterwards. It will
sometimes give great relief, and the vomit-
ing will cease. That, however, is still to
be promoted, and if it does not return
on drinking warm water, &c. after wait-
ing a while it will be proper to give a vomit
of ipecacuanha, or, if that is not sufficient,
one still stronger. After each vomiting, a
dose of this solution of salt of tartar should
be given, and it may be repeated every two
or three hours, especially if the pain of the
stomach returns. It should be continued too
in small doses for some time after the symp-
toms disappear. If none of these salts are
at hand, a little wood-ashes mixed with
boiling water will answer the same end,
suffering them to stand till they settle, and
pouring the water clear off. By tasting it,
the degree of saltiness will determine if the
solution be strong enough, if it be not dif-
agreeably so it may be given.”
The History of an obstinate Affection of the Bowels, cured by the Injection of a Decoction of Tobacco, by Dr. John Evans, Physician at Oswestry, Shropshire.

On the 6th of October, about two o'clock in the afternoon, I was sent for to Mr. Loyd, a young gentleman about eleven years of age, who had, an hour before, received a violent kick from a horse, upon the right hypogastrium. Another person of the faculty, who was present when the accident happened, immediately bled him. Upon my arrival, I found him in great pain, with a low irregular pulse, and a laborious respiration. Dreading the consequences that might ensue from such an accident, I advised his parents to consult Dr. Owen, an eminent physician, of Shrewsbury, who happened fortunately to be in Oswestry at that time.

The doctor ordered an opening medicine to be taken by the mouth, a fomentation, with an embrocation of camphorated oil to be applied to the belly, and an emollient glyster to be
be immediately injected, with directions that the last of these should be frequently repeated if necessary.

The next morning I found him labouring under some febrile symptoms, such as quick pulse, intense thirst, parched tongue, with considerable tension of the whole abdomen, and a total suppression of urine; the same mode of treatment was pursued, together with a draught of oil and manna, which he took every four or five hours, according to the doctor's directions.

On the 8th, his fever was rather abated, having had evacuations both by stool and urine, which afforded considerable relief, nevertheless the swelling of the abdomen still remained.

On the 9th, his complaints were in every respect the same as before, and his medicines were continued.

On the 10th, his pain, fever, and swelling of belly were considerably abated, and his evacuations, both by stool and urine, had been sufficiently copious. From this time, he continued recovering gradually until the 17th, on which day he was, without my knowledge, permitted to go down stairs into a kitchen (which
which had been washed but a few minutes before where he remained near an hour, surrounded by a large quantity of wet linen, which was hung within the heat of the fire to be dried. That night he was attacked with violent pain, soreness, and tension of the whole abdomen, quick pulse, and other symptoms of enteritis.

On the 18th, finding him in that situation, I took away a large quantity of blood, and administered a glyster; but this procuring no evacuation by stool, I repeated the opening medicines. In the afternoon he was seized with excruciating pains in his stomach, for which he took an anodyne draught, and rested rather easier that night.

On the 19th, his bowels were still constipated, and his pains returned, accompanied with frequent vomiting, quick pulse, and great tension of the abdomen. The glyster, and other remedies were repeated, about eight ounces of blood were again taken away, and the anodyne draught repeated, at night.

On the 20th, his bowels still remained constipated, the pains, tension, and vomiting continuing, he was put into a warm bath, and had
had a glyster of warm water, and oleum Ricini; the anodyne was repeated, as before.

On the 21st, all his symptoms encreasing, the warm bath and glyster were repeated; he likewise took his anodyne with a couple of pills, consisting of extract. cathart. and calomel, one of which was repeated every three hours.

On the 22d, his pains were something less severe, though the tension, &c. still remained, and his pulse was extremely feeble, he had also frequent vomitings, which were evidently excrementitious. His medicines were continued, and several suppositories were successively introduced; the warm bath was repeated, and as soon as he came out of it, the fumes of tobacco were administered by way of glyster, but all attempts to relieve him still proved inefficacious. In this deplorable situation, after giving him his anodyne as usual, I left him, expecting that night would have put a period to his suffering.

On the 23d, to my great astonishment, I found my patient in the same state as I left him the preceding afternoon. Being disappointed in the effect of the fumes of tobacco, I determined
mined to give him a decoction of that plant by way of glister, having more than once administered it, with success, in similar cases, when every other remedy had failed. To eight ounces of this decoction, I added two drachms of soft soap, and one ounce of antimonial wine. In the space of ten minutes after the glister had been injected, I had the inexpressible satisfaction of seeing my little patient seized with a most copious vomiting and purging. His stools were so exceedingly offensive, that I was under the necessity of quitting the room during some minutes. When he was recovered of his extreme sickness, I gave him an anodyne cordial draught, and left him much relieved.

On the 24th, I found him considerably better, having rested well during the preceding night; the tobacco glister was repeated, and had again the desired effect.

In one of the stools, which was uncommonly offensive, I discovered a large membranous substance, on which were a considerable number of livid spots; this membrane is still in my possession, and appears evidently to be a portion of the villous coat of the intestines.
Having conquered this obstinate and dangerous disorder, I gave my patient the Peruvian bark freely; at the same time taking particular care to procure a stool each day. In the space of a few days I had the pleasure of seeing him perfectly restored to his former state of health.

During the whole of this last illness, his food and beverage was chicken broth, gruel, and barley-water, and sometimes toast and water.

III.

An Account of the Operation of amputating the Thigh at the upper Articulation, lately performed by Mr. William Kerr, Surgeon to the Royal Regiment of Horse-Guards Blue, and to the Hospital in Northampton. Communicated to Dr. Duncan, by Dr. Toll, Surgeon to the Fourth Regiment of Dragoons.

A Girl, between eleven and twelve years of age, was brought into the hospital, from Kettering, in December last. She had a tumor on the outside of her right thigh, extending from the middle to near the great trochanter; she was very much emaciated, had
had a constant cough, night sweats, and many more hectic symptoms. She told us that she had been ailing upwards of two years, during which period she had frequently had fevers, and that her lameness had been gradually increasing from her first illness. That at first she had little pain, but a few months before she came into the house, it became very acute from the groin all round the hip, and till then she never observed the tumor before mentioned.

She suffered great pain upon the least motion of the joint, and upon every such attempt there was a very perceptible grating to be felt. Being engaged myself, I directed Mr. Warden, house-surgeon to open the tumor the day after she came into the hospital; there was discharged about half a pint of ill-conditioned matter, and we had the same kind of discharge, in very great quantity, at every dressing, from that time till the operation which was performed the Saturday following.

Flattering myself that the hectic symptoms, might be the effects of absorption, convinced that the joint was diseased, and concluding therefore, that there was no other method of cure but by amputating the limb at the articulation, I set about it in the following manner.

Hav-
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Having laid the patient on the sound side upon a table of a common height, and putting the diseased thigh at right angles with the trunk, I began my incision immediately behind the top of the great trochanter, carrying it obliquely backwards and downwards, to the inside of the thigh, and from thence obliquely upwards to within two inches of the crural artery.

I then began a second incision at the same place with the former, carrying it in an opposite direction over the upper extremity of the trochanter, and from thence obliquely forwards and downwards to within the same distance of the vessel, as in the former.

These incisions were made only through the skin and fat, which being well drawn back by by my two assistants, I cut down into the joint, and from thence carried two other incisions through the muscles in the same order and direction, and to the same extent as those which were made through the outer teguments.

I then turned the head of the femur out of the acetabulum, that I might with more ease and security accomplish the most important part of the operation, namely, the taking up the artery. From the foregoing description you
you will easily conceive that a flap about four inches in breadth, consisting of all the teguments with the artery included, was still undivided. This flap I grasped firmly betwixt the fingers and thumb of my left hand, (my fingers on the skin side of it, and my thumb on the muscular) and cut it through immediately below my hand, and between three and four inches from the passage of the artery under the ligamentum Fallopii.

The incision here was made from above downwards, first through the muscular part of the flap, and then through the fat, vessels, and skin. It was done in this manner that the skin might correspond with that which was divided by the first incisions, and that the edges of the wound, we cannot say flump, might thereby be kept neat and uniform.

The next step was to secure the artery, which I effected by passing a strong ligature round it with a needle, and getting one of my assistants to tie it up, such a compression being all the while made upon it by my left hand in the manner related above, as to prevent the loss of a single drop of blood, and the haemorrhage from the other arteries was full as inconsiderable.
able as in any other amputation of the thigh. By saving a good portion of skin the wound was much more decent and seemly than you can well imagine; but, to my great mortification, I found not only the acetabulum carious, but also the adjacent parts of the osa innominata to a very considerable extent. From her almost constant cough, I was under the greatest apprehension that the artery would be forced open; yet no mischief ensued, and the ligation fell off at the fourth or fifth dressing. The aspect of the sore, in the mean while, giving us the most sanguine hopes of her recovery. But about the tenth or eleventh day, her respiration became more difficult, expectoration ceased, her mouth and tongue were covered with aphthae, and she died on the 18th day from the operation. The appearance of the sore, even to the last, was such as to afford good reason to suppose that the immediate cause of death was the daily increase of the hectic symptoms, and that without these the operation would have succeeded; I therefore had her opened, and our supposition was, I think, pretty strongly confirmed by the following phenomena. The lungs were almost totally reduced to matter, especially on the right side,
in which there was scarcely a vestige of pulmonary substance remaining. The left lobe also was full of abscesses, and reduced to less than half the natural size. An abscess (commonly called the psoas abscess) was likewise found on the right side, in the abdomen, which communicated, by a corroded opening within the acetabulum, with the joint.

I have given you an exact narrative of the circumstances of the case, the operation, and the event of it, at least, I do not recollect any other of consequence. I shall not comment farther upon it than just to observe, that the total destruction of the ligamentum rotundum by the suppuration within the joint, contributed greatly to the facility with which the operation was accomplished; for I imagine, if that ligament had been entire, the division of it would have been attended with perhaps considerable embarrassment, I think, however, it might be effected in a sound joint.

With regard to the expediency of the operation, I am so much convinced of it in certain cases, that in such I shall not, for the future, hesitate to perform it when they occur.

IV. The
The History of a very uncommon convulsive Cough, cured by the Flowers of Zinc. By Dr. Charles Leith, at Johnstone, near Montrose.

On the 25th of July, a poor woman brought her daughter to me, about fourteen years of age, affected with the most violent convulsive cough I had ever seen or heard of. It attacked her by fits at uncertain intervals of half an hour, two, or sometimes three hours distance, and commonly held her in one continued cough from five to fifteen or twenty minutes at a time. When she drew in her breath, it was with that kind of howling noise, but longer and louder than is common, in the chin-cough, and with a seemingly stronger and more laborious inspiration than ever I had observed in any person ill of that disease. As soon as the fit was over she seemed perfectly well, as if she ailed nothing; and could speak, sing, or walk, without any danger of bringing on the fit again. It had seized her about three or four days before I saw her, and in that time had seldom intermitted for more than three hours. She had a fit of it while waiting for me, which lasted a full quarter of an hour;
the howling noise of which, was heard all over the house, and alarmed the whole family, who could not for some time discover what odd sound it was, having scarce any resemblance to the human voice. She had another, while talking with me, which lasted about five minutes. Her mother insisted that it could not be the hooping-cough, which I thought it resembled, as she had gone through that disorder several years before; and it is the general opinion, that, like the small-pox and measles, that disease never attacks the same person twice. Be that as it would, it plainly appeared to be a convulsive cough, and a proper opportunity for trying the effects of the flowers of zinc, as lately recommended by Dr. Percival, which I therefore determined to give her. But as the girl appeared to be plethoric, and her eyes somewhat inflamed from the violence of the cough, I thought it prudent to advise the mother to get her bled in the arm, and to apply a blister to her neck as soon as she could. Meanwhile I gave her thirty pills, each containing one grain of the flowers of zinc, one of which she took immediately about four o'clock in the afternoon. Another I ordered to be taken at bed-time, and one every six hours afterwards.
On the 27th, the mother returned, at my desire, to let me know the effects.

The blister had been applied on the evening of the 25th, and she was blooded on the morning of the 26th. She took the pills as directed, and had but one slight return of her cough after taking the first, and that was on her return home from my house. I desired her to continue the use of the pills for two or three days longer. On the 30th, her mother brought her to me again; she had taken four pills every day, and had no return of her cough, excepting that slight one above mentioned in her way home on the 25th.

This cure could not be attributed to the blister, or bleeding, for the cough had ceased before either of them was used.

From hence I am induced to believe, that this will prove a sovereign medicine in the hooping-cough, if given early in the disease, i.e., while the distemper is purely convulsive, and before a flux of humours, from the repeated paroxysms, is settled on the bronchia; for when that comes to be the case, it is obvious that other methods of cure are indicated, besides the use of antispasmodics.

A a 3  S E C T.
THE Royal Society of Medicine, lately established at Paris, of which we have already given some account, have lately distributed among their members several printed papers, respecting the nature and intention of their institution. Among these are the following:

Lettres patentes du Roi, pour l’établissement d’une Société Royale de Médecine, données à Versailles au mois d’Août, 1778, registres en parlement le 1er Septembre audit an.

Travaux proposés aux médecins et physiciens regnicoles & étrangers, par la Société Royale de Médecine dans sa Seance publique tenue
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tenue le Mardi 20 Octobre 1778, au College Royal de France.

Prix proposés par la Société Royale de Médecine dans sa Sance publique, tenue le Mardi, 20 Octobre, 1778, au College Royal de France.

To the letters patent is subjoined, an accurate list of all the members of the society, divided into the five classes of, Officiers de la société, Associés ordinaires, Associés libres, Associés regnicoles, Associés étrangers.

It is proposed that the memoirs of the society shall consist of the following subjects.


2. Les Observations Meteorologiques, faites dans les différentes Parties de la France, dont le President de la Société a l’Honneur de presenter chaque semaine les resultats au Roi. 3. La Topographie médicale des différentes Villes & Cantons. 4°. La Description des Maladies Endemiques. 5°. Celle des Maladies Epidémiques. 6°. Celle des Epizooties. 7°. Des Observations de Médecine-pratique. 8°. Des Obser-

After thus pointing out the different particulars, which are intended to be the subject of their publications, they conclude with observing, that there is no physician or philosopher who may not contribute something to their collection, by bestowing attention at the place of his residence to the objects mentioned above.

The following questions are proposed as the subjects of enquiry for the prize dissertations.

I. Déterminer quel peut être le meilleurTraitement de la Rage.

II. D’établir 1° par l’Analyse Chymique, quelle est la Nature des Remèdes Antiscorbutiques proprement dits. 2°. Par l’Observation, quel doit être leur Usage, & leur combinaison dans les différentes espèces & complications, & dans les différents degrés du Scorbout.

III. Existe
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III. Existe-t-il véritablement une Fievre Miliaire essentielle et distinctive des autres Fievres Exanthematiques & dans quelle Constitution doit-elle être rangée.

IV. Déterminer par un Nombre suffisant d’Observations & d’Experiences exactes si les Maladies contagieuses, principalement la Petite Verole, peuvent se transmettre par l’Intermédiaire de l’Air.

V. D’indiquer la meilleure Methode pour guerir promptement & surement la Gale, contractée par Communication, comme il arrive dans les Casernes, dans les Ateliers, dans les Hôpitaux & dans les Prisons.

VI. Faire connaître le moyen le plus prompt, le moins dispendieux et en même-temps le plus sûr pour guerir la Gonorrhée virulente & pour prévenir les accidens qui en sont ordinairement les suites.

Memoirs on these different subjects, accompanied with a sealed billet, containing the name of the author, and marked on the back with the same motto as the memoir, must be transmitted to M. Vicq d’Azur, Secrétaire perpetuel de la Société Royale de Medecine, Rue de Sepulcre, a Paris.

Mr.
Mr. John Aitken, surgeon in Edinburgh, who has for some years past delivered lectures on that branch of the medical art, has at present in the press a work entitled, Elements of Systematic Surgery, which will speedily be published. This work, which is principally intended as a text-book for future courses of lectures, is, however, written upon such a plan as to be adapted for other readers. It consists of three parts.

1. Introduction, or Preliminary Observations respecting Medicine; its Division into Physic and Surgery; their Limits, &c.

2. Chirurgical Nomenclature, or a Methodical Arrangement of Chirurgical Diseases, with the Synonyma, Definitions, and Remarks on their Nature, Seats, Varieties, and Remedies.

3. Chirurgical Operation, or, an Enumeration and Explication of Manual Surgery, correspondent to the Nomenclature.

Dr. John Purcell, one of the professors of anatomy in Trinity-College, Dublin, has lately transmitted to the Medical Society of Edinburgh, an
an Essay, containing many interesting remarks on the operation of the section of the symphysis pubis, which has lately been so much the subject of controversy at Paris. In this paper, among other particulars, Dr. Purcell endeavours to shew, that this operation, which has hitherto been proposed only for the extraction of the foetus in cases for which the Caesarian section was formerly recommended, promises to be productive of still greater advantage in cases of retroverted uterus, which would otherwise prove fatal. How far his reasoning upon this subject is sufficient to render the operation advisable, our readers will be best able to judge, from a candid perusal of the paper itself, which will appear in the first volume of the Transactions of the Medical Society, a work which is at present preparing for the press. Mean while, the communicating to our readers, this proposal of Dr. Purcell's, may, perhaps, be of some use; if this practice shall seem advisable to those, to whom such unfortunate cases may occur.

* * * * *

Dr. Odier, of Geneva, in a letter to Dr. Duncan, communicates to him the following observ-
observation respecting the use of different remedies in fevers of the intermittent kind.

"We have here repeated the observations of Dr. Lind on the use of opium in intermittents, and almost always with the greatest success. We give laudanum as he does, to the extent of twenty-five drops, half an hour after the beginning of the hot fit, and we find that it shortens it much. It calms the anxiety and head-ach, which generally accompany it. It brings on sweating much sooner, and renders it more profuse. It makes even the return of the paroxysms more regular; and has, in some instances, been alone sufficient to stop the fever altogether. In general, however, a few doses of Peruvian bark, with some purgatives, are necessary.

We have given opium even in cases where Dr. Lind thinks that it ought not to be given, and with equal success; I mean those in which there is much delirium, which we have never found to be increased by it, but on the contrary, much oftener to be removed and always to be diminished.

I remember to have seen a case in St. Thomas's hospital, in London, of a quartan ague, which
which had lasted two years, and in which Dr. Fordyce gave a dose of Dover’s powder, with a sweating draught of salth of hartshorn, two hours before the fit in order to stop it. This succeeded very well. A profuse sweat came on just before the hour at which the cold fit used to return, and it was altogether prevented. Some doses of Peruvian bark were afterwards administered; and this fever, which had before resisted many remedies, even the bark itself, was then in a few days effectually cured.

This observation we have had many opportunities of repeating here; not only in quartan, but also in tertian agues; and we find, that whenever the patient can be brought to sweat, the fit is altogether stopp’d. If he does not sweat, the fit is nevertheless much diminished thereby.”

* * * * *

On Thursday, the 28th of October, Dr. Duncan will begin at Edinburgh, his lectures on the Theory and Practice of Medicine. This course of lectures will be concluded about the beginning of May. Five lectures are read every week, and the same lecture is repeated twice.
twice every day, viz. between eleven and twelve o'clock in the forenoon, and between five and six o'clock in the evening. The fee for attendance is two guineas; and every student has it in his option to attend at either, or at both hours.

On Saturday, the 30th of October, Dr. Duncan will begin a course of lectures on the cases of patients subjected to chronic diseases. This course will also continue till the beginning of May. One lecture being delivered every Saturday. The most important cases which occur at the public Dispensary will be selected as the subjects of these lectures; and, in treating of each case, the observations which are offered will be entirely confined to such remarks on the history and method of treatment, as appear to be of the greatest utility in practice.

About the beginning of May, Dr. Duncan and Dr. Webster, will begin their course of case lectures for the summer session. This course will continue for about three months, and besides the lectures on the cases of patients, which will be delivered every Monday and Thursday, lectures will also be given every Tuesday, Wednesday, and Friday, containing

* * * * *

The Dutch Society of Sciences, established at Harlem, in their Programma for the year 1779, besides the subjects for prize dissertations relating to astronomy and some branches of general physics, have proposed the following, which are more strictly medical.

1. Quelle est la veritable nature des Brouillards ou exhalaisons marines qu’on nomme en Hollande Zeevlammen? Quels effets produisent-ils, & quels sont les moyens d’en prévenir les suites pernicieuses?

2. La pureté de l’atmosphère a la plus grande influence sur la santé des habitants d’une ville. Celle de Batavia est dans l’impossibilité d’en jouir, par les vapeurs infectées des eaux de la rivière, qui sont ou stagnantes ou coulantes trop lentement, & qui se remplissent journellement de plusieurs milliers de livres d’immondice.—Quels seraient les meilleurs moyens d’accélérer le courant, & d’effectuer une décharge plus prompte & plus efficace de ces in-
infections, afin de procurer à la ville de Bata
via un atmosphère plus pur & plus salubre?

3. Quelle est l'influence du dessèchement des
Marais, Etangs, &c. sur l'état de notre pays?
Quelles en sont les suites utiles ou nuisibles?
Et dans le dernier cas quelles sont les précau-
tions à prendre pour prévenir ces suites?

Those who chuse to employ themselves in
giving answers to these questions, are desired to
transmit them before the first of January,
1780. The answers to the questions proposed,
as well as the direction on the back of the
letter which accompanies them, must not be
of the hand-writing of the author, nor signed
by his name, or place of abode; but marked
with a device or motto, and accompanied with
a sealed letter, having the same device for its
direction, and containing the name and address
of the author. The dissertations must be
written in the Dutch, French, or Latin lan-
guage, and addressed to Mr. C. C. H. Vander
Aa, secretary to the society.

Dr. John Hope, professor of Botany in the
University of Edinburgh, has lately been
elected a member of the Harlem Society.


Vol. VI. No. 23. Bb A trea-
A treatise on the inflammation of the breasts peculiar to lying-in women; and also upon some diseases attending them, which are the consequences of neglect and mal-treatment. By J. Clubbe, Surgeon. 8vo. London.


Descriptions and figures of petrefactions found near Bath. By John Walcott, Esq. 8vo. London.

Seventy-four select cases, by W. Rowley, M. D. 8vo. London.


Trattato delle acque minerali di Nicolo Andria Dottore in medicina & Professore straordinario di storia naturale nella regia università di Napoli. 8vo. Napoli.

Memoire sur les effets salutaires de l’eau-de vie de genievre dans les Pays-Bas, froid, humides, & marécageux tant en santé que dans
la plupart des incommodités & dans plusieurs
maladies, confirmés par l’expérience & par des
observations multipliées : par M. Daignan,
M. D. conseiller-médecin du Roi, & de l’hôpi-
tal militaire de Bergues, de la société royale de

Recherches sur les causes des maladies, qui
ont régné à Gravelines, tant dans la garnison
que parmi les habitants, depuis deux ans, par-
ticulièrement dans l’automne de cette année
1777 ; par M. Daignan, M. D. &c. 8vo. Paris.

Progrès ultérieurs de la chirurgie, ou re-
marques & observations nouvelles de M. The-
den, un des chirurgiens généraux de S. M. le
Roi de Prusse, ouvrage traduit de l’Allemand.
Par M. Chayron, chirurgien-major du régim-
ent de Neuftrie infanterie. 8vo. Paris.

Lettre à M. Prost de Royer, lieutenant-gé-
neral de police de la Ville, Fauxbourg, &
Banlieue de Lyon. 8vo. Lyons.

Réflexions sur la section de la symphyse du
pubis présentées & dédiées à M. Lenoir con-
seiller d’état, lieutenant-general de police. Par
M. Piet, accoucheur chargé, par le gouverne-
ment, de secourir les femmes indigentes dans les
accouchemens difficiles. 8vo. A la Haye.

Dissertationes medicæ inaugurales quas ex auctoritate reverendi admodum viri Gulielmi Robertson, SS. T. P. Academiac Edinburgæ præfecti; nec non amplissimi senatus academicæ consensu, & nobilissimæ facultatis medicæ decreto, pro gradu doctoratus, summisque in medicina honoribus et privilegiis rite & legitime consequendis, eruditorum examini subjecerunt ad diem 24 Junii, 1779.

Jacobus Bennet, Hibernus, de hydrope-anafarca.

Arthurus Broughton, Anglus, de vermis intestinorum.

Joannes Ford, Anglus, de morbis contagiosis.

Gulielmus Hamilton, Hibernus, de sanguine humano.

Samuel Hayman, Hibernus, de gastritide.

Edvardus Johnston, Britannus, de febvre puerperali.

Cadwalladar-Blaney Lee, Hibernus, de rubecola.

Georgius Logan, Pennsylvaniensis, de venenis.

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Josephus Hart Myers, Americanus, de diabete.

Stephanus Pellet, Britannus, de palustrium locorum infalubritate a miasmate oriunda.

Jacobus Stewart, Marylandiensis, de spasmo.

Thomas Waite, Anglo-Britannus, de abortu.

Gabriel Wynne, Cambro-Britannus, de cortice Peruviano, usque ejus in morbis febrilibus.
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M.DCC.LXXIX.
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COMMENTARIES.

SECT. I.
An Account of Books.

I.

In the first part of this dissertation, our author, before proceeding to the enumeration of such disorders as quassia is proper for, gives first an accurate description of the plant, and afterwards proceeds to ascertain experimentally its several qualities, as will appear from the following detail.

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MEDICAL

EXPERIMENT I.

A comparative trial was made with quassia, curfuta or gentiana lutea sylvestris, columba, colocynthis, cortex Peruvianus, lichen Islandicus, and gentiana lutea vulgaris, in order to determine the degree of bitterness of each; and the following, we are told, is the order in which, with respect to this quality, they ought stand.

Cortex Peruvianus, lichen Islandicus, gentiana, columba, quassia, colocynthis, curfuta; but although curfuta was evidently more bitter than quassia, yet the bitterness of the latter was of a much more agreeable nature than that of curfuta.

EXPER. II.

A solution of salt of steel, being added both to the decoction and infusion of quassia, no change of colour was perceived in either; nor was any additional firmness given to a piece of flesh immersed in them for the space of several days. These, our author observes, are evident proofs that quassia possesses little or no astrin
geney.

EX-
EXPER. III.

In this experiment, trials were made for the discovery of the best menstruum for quassia. A cold infusion in water, especially when assisted by trituration, was found to possess a greater degree of bitterness, than either the warm infusion, or even the decoction. It was likewise found, that this bitterness of quassia, was readily communicated to spirits, both proof and rectified; to the different kinds of wines, and to vinegar.

EXPER. IV.

An infusion of quassia and water being distilled; the water which came over, was found to be somewhat bitter, and was of a yellowish colour; but there was not the least appearance of any essential oil.

An ounce of quassia frequently boiled in water, afforded only one dram of extract, of a brown iron colour.

EXPER. V.

In order to determine the antiseptic virtues of quassia, a comparative trial was made with it and several other articles. A quantity of
blood was added to similar quantities of the
cold watery infusions of the following articles,
all contained in separate phials placed in the
same degree of heat; viz. quassia, lichen
Islandicus, curfuta, falix, gentiana, and cortex
Peruvianus.

As they are here mentioned in order, accor-
ding to the antiseptic effects they are exhibited,
quassia it would appear is not possessed of
much influence in preserving other bodies from
putrefaction. And from this experiment too,
it is evident, our author remarks, that the an-
tiseptic powers of plants, neither depends upon
the degrees of bitterness or of astringency
possessed by them; for here, the curfuta, and
willow, were both found less antiseptic than
Peruvian bark, although the one is much
more bitter, and the other remarkably more
astringent than it.

In another experiment, however, it was found,
that bile, was preserved longer from putrefac-
tion both by lichen Islandicus, and curfuta,
than even by Peruvian bark itself, which
makes our author conclude, that the antiseptic
powers of plants with respect to bile, must
probably in some measure depend upon their
degree of bitterness.
Our author now proceeds to enumerate the opinions of Linnaeus and other writers with respect to the medical virtues of quassia, in fevers and other diseases, but as he does not here advance anything new from his own proper experience, we must refer our readers, for the opinions of the authors to their several works.

*De Lichen Islandico.*

As descriptions of the lichen Islandicus are to be met with in Ray, Morison, Hudson, and Lightfoot, as well as in the works of Linnaeus and other foreign writers, we need not here trouble our readers with any account of its botanical history, and shall proceed immediately to our author's experiment upon this article also.

**Exper. I.**

This experiment was instituted with a view to determine the degree of astringency possessed by the lichen Islandicus.

A drachm of Jesuit's bark in powder, of the bark of willow, of the lichen Islandicus, of the geum rivale, of bohea tea, and of the eglantine rose-leaves, were each infused in three
three ounces of cold water. In the space of twenty-four hours the infusion of geum rivale was of a chestnut colour; that of the tea had a yellowish hue, as had likewise the infusion of rose-leaves. The infusion of bark was yellow, that of willow somewhat less so; and the water with the lichen Islandicus was of a violet colour with somewhat of a yellow tinge.

To an ounce of each of the infusions, two drachms of a solution of salt of steel were added. That of geum rivale was converted into a real ink; that of roses into a dark red; that of tea into a dark green; that of Peruvian bark into a brassy colour; the infusion of willow bark became of a pale blue colour, and the lichen Islandicus from a violet was changed into a red.

To the other two ounces of infusion, of each of these articles, a drachm of beef was added, and allowed to remain in them for the space of forty-eight hours. At the end of that time, the beef contained in the infusion of lichen Islandicus was found to be firmer than any of the rest; next in point of firmness was that immersed in the infusion of bark; and the piece taken from the infusion of tea was found to be the softest of all.
EXPER. II.

An ounce of lichen Islandicus being boiled for the space of a quarter of an hour in a pound of water, and afterwards strained, was found to yield seven ounces of a bitter, red-coloured mucilage, of nearly the same consistence as is obtained by the solution of one part of gum arabic in three of water. This mucilage was found to answer very effectually the purpose of uniting oil with water by means of trituration: a scruple of camphor was likewise suspended in six ounces of water by the medium of two drachms of the mucilage; but mercury could neither be properly extinguished by it, nor could wax by means of it be united with water.

EXPER. III.

This species of lichen is so tough and mucilaginous, that a very considerable heat is found necessary to dry it sufficiently for pulverisation.

An infusion of the powder, and likewise an infusion of lichen in substance, were at different times subjected to distillation in a sand heat. The water thus obtained was moder-
rately acid; but was not in any degree changed in colour by the addition of salt of steel. No effiential oil could be obtained by distillation.

EXPER. IV.

An ounce of lichen being six times strongly boiled, and the different decoctions being all mixed and evaporated to dryness, five drachms and two scruple of an extract was obtained. This extract was of a blackish colour; burned violently when put into a fire; and when dissolved in warm water afforded a very thick tough mucilage.

Lichen infused in rectified spirits of wine, afforded, on evaporation, a very small quantity of resin.

From the antiseptic virtues of lichen, our author recommends the mucilage prepared from it, as more proper than any other, for the purpose of combining oils with watery liquids; by means of it, such mixtures, he observes, are effectually prevented from becoming rancid; he preserved some of those, with which the preceding experiments were made, for the space of fourteen weeks without any marks of putrefescency being observed in them.
COMMENTARIES.

In some of the northern kingdoms, lichen, we are told, is used not only as a medicine, but as an article of diet; and from the mild nutritive qualities of which it is evidently possessed, our author thinks we may account for the good effects which have lately been said to be derived from it in consumptive disorders, and which have been confirmed by the testimony of many of the most accurate observers.

As the most agreeable and convenient form of using it, he recommends it first to be infused in boiling water, with a view to its being thoroughly cleaned, while by the same means it will be deprived of a considerable part of its original bitterness. The lichen, thus prepared, is ordered to be boiled, and the mucilage so obtained from it, to be used either as an article of diet or as a medicine; and we have it in our power, we are told, to render it exceedingly palatable, by the addition of a little white wine, when that can with propriety be given; or when wine is not admissible, by the addition either of milk, honey, or syrup of lemons.

It is recommended particularly, in all kinds of cough; and in cases of emaciation, from whatever cause they may have arisen.

II. Ob-
II.


Of all the constituent parts of the human body, there is, perhaps, no one which can be considered as meriting greater attention than the blood. Yet, even from the most superficial examination of the works of medical writers, every one must soon be sensible of the inattention with which they have treated this subject. In proof of this, Mr. Hey, in the treatise before us, has quoted some passages from the writings of Baron Van Sweiten, Dr. William Fordyce, and others, which contain assertions totally repugnant to fact. When this then is the case, we may conclude, that the subject of which our author here proposes to treat, is by no means exhausted, from the observations of former writers. But it seems not so much to be his intention in the treatise before us, to enter into a full consideration of every particular respecting the nature of the blood, as to examine the sentiments of some of the most highly esteemed and latest writers.
writers on the subject, particularly those of Mr. Hewson, in his Experimental Inquiry, and of Dr. Heberden in the London Medical Transactions.

According to our author, Dr. George Fordyce was the first who contended that the blood drawn in inflammatory diseases, is in a more fluid state, and continues longer fluid than in other cases; and this opinion, Mr. Hewson has since endeavoured to support by many experiments. On this subject, however, Mr. Hey holds a very opposite doctrine; he admits, indeed, that when a strong crust of size is about to be formed on the coagulamentum, the surface of the whole mass becomes somewhat transparent, soon after it is received into the cup, before the usual separation of the serum takes place; and that in these cases the surface of such blood remains in a fluid state much longer than it does where no fisy crust is formed. But in place of supposing this fluid to be the coagulable lymph in an attenuated state, and deprived of its disposition to coagulation, Mr. Hey is inclined to believe, that it consists of the coagulable lymph diluted with serum. To this opinion he is chiefly led from examining it
it by itself after coagulation, and after squeezing from it, by means of pressure, the serum which it contained. He admits, with Mr. Hewson, that the blood, upon which a fify crust is found, generally looks thinner, as it flows from a vein than the blood of a healthy person on which there is no fize. But this thinness he also ascribes to an increased quantity of serum which that blood contains, and he points out many circumstances which seem to him to render it extremely doubtful, whether inflammation has any influence in thinning the blood. Persons, he observes, of strong athletic habits, whose vascular action approaches the nearest to a state of inflammation, are not remarked to have thin blood. In the most violent inflammatory distempers the blood does not look thin, if evacuations and dilution by watery liquids have not preceded. When the blood appears very thin in inflammatory cases, there is a great proportion of serum. The cressamentum is most firm and tenacious upon standing, when it is taken from patients labouring under inflammatory diseases; and lastly, the blood is observed to be very thin in some disorders which are the reverse of inflammation. From all these circum-
stances he infers, that the thin appearance of
the blood affords no evidence that the coagul-
able lymph is attenuated in inflammatory dis-
orders.

After offering this refutation of the first ar-
gument employed by Mr. Hewson to shew that
the gluten of the blood is attenuated in cases of
inflammation; Mr. Hey next proceeds to
answer the other arguments used for the same
purpose; particularly those which have been
drawn from observing, that the red globules
subside sooner in blood let in cases of inflam-
mation, than in that which is taken from an
animal in health. Although he admits the
truth of this circumstance, yet he contends,
that this affords no proof of the whole mass of
blood, in such cases, being thinner than the se-
rum alone in others, as Mr. Hewson alleges.
In support of his assertion, he observes, that
the red globules are not in the same state in
the two cases which are compared; that the
fluid water which rises to the surface of the
blood soon after it is let out into a cup, al-
though it consists chiefly of serum united with
coagulable lymph, is yet thicker than serum
alone; and lastly, that the subsidence of the
red globules, in the case of the blood drawn
in
in inflammations, may, probably, be explained from the lymph, when in a fluid state, having less affinity with the effsflamentum, than the serum has with the red globules.

Having thus attempted to refute the opinion which supposes, that the phenomena exhibited by the blood, in cases of inflammation, are to be attributed to a change in the quality of the gluten; Mr. Hey next endeavours to shew, that these circumstances are to be ascribed to a difference in the quantity. How far this ingenious author has been as successful in establishing his own doctrine, as in attempting to invalidate the opinion of others, the attentive reader will best be able to determine, from a candid examination of the work itself. Without assuming the province of giving a dictatorial judgment on the truth or falsehood of those opinions which fall under our notice, we may yet observe, that the arguments which he has here used as far from appearing to us to be perfectly conclusive. We shall not here, however, encroach upon the prerogative of the reader, by flattering our own doubts, but shall merely content ourselves with endeavouring to give a concise, yet distinct view of his reasoning on this subject.

Mr.
Mr. Hey, with great justice observes, that when no size appears upon the surface of the craffamentum, it has been too commonly supposed that the blood is not fizy, and on the other hand, when such a covering does exist, it has been without sufficient reason imagined, that the blood abounds with size; conclusions equally erroneous, and equally detrimental, when they have any influence on the treatment of a patient's disorder. From some remarks of Dr. Huxham's, which have been confirmed by his own observations, Mr. Hey infers, that the density of the craffamentum, and the firmness of the fizy covering, are greatest in inflammatory diseases. Hence he thinks, that the tendency to concretion in the blood, cannot be owing to a diminished action of the blood-vessels.

From what happens in the slaughter of sheep, Mr. Hewfon had concluded, that a diminution of the vascular action, causes a more speedy coagulation of the blood. Mr. Hey has also attended to this subject, and since the circumstances he has observed, are, in a great measure, the reverse of those described by Mr. Hewfon, the future observations of others on the same subject, are still necessary for discover...
vering the cause of this difference. But, according to Mr. Hey’s observations, the blood in the first cup was generally more fluid as it flowed, and more florid than the rest; yet it coagulated in the least time, had the most firm eraffamentum, and threw off the greatest quantity of serum. That which was last received, flowed the most slowly, appeared the most viscid and dark-coloured as it flowed, was the latest in coagulating completely, had the softest eraffamentum, and threw off the greatest quantity of serum.

Mr. Hey examined, in a similar manner, both the arterial and venal blood of calves, but the appearances were not the same, nor did the coagulation take place in any regular manner. He observes, that there is a remarkable difference in the appearance of the blood which is drawn at different periods of an inflammatory disease; that which is taken away at an early period of the disorder usually concretes quickly with a firm tenacious mass; which throws off little serum and has no visy covering; whereas that which is drawn after repeated bleedings, when the distemper has continued several days, looks thinner as it flows, separates a greater proportion of serum, and has a strong coat of fize
size upon its surface. He considers this variety as depending chiefly on the different proportion of serum; and he thinks, that in consequence of the blood being thinned by the watery liquors which are drank plentifully in these disorders, an opportunity is afforded for the particles of the coagulable lymph to unite more readily, and to ascend to the surface of the efflamentum.

It is more difficult, our author observes, to account for the various appearance of different portions of blood drawn at one operation. But these also, he thinks, are chiefly to be explained from differences, with respect to exposure to air, from the degree of heat or cold by which the blood is acted upon, and from the materials of which the vessel is composed into which it is received. If proper regard be paid to these circumstances, Mr. Hey imagines, that we may be able to give a satisfactory solution of the query proposed by Dr. Heberden, whether the fизy covering which is often seen upon the blood, be of any use in directing the method of cure. He thinks, that although the mere appearance of size on the surface of the efflamentum, give no certain direction respecting the method of cure, yet the
quantity of sife, found in or upon the crafumentum, which must be judged of by the
thickness, and density of the sify covering, and the tenacity of the crafamentum con-
jointly, affords, when compared with the other
symptoms of the disease, some useful informa-
tion.

He considers the thickness of the sify co-
vering of the blood, taken by itself, as afford-
ing no evidence of the quantity of coagulable
lymph which enters it. For, he observes, that
in many cases, this sify covering is to be con-
idered as little more than serum inviscated so
as to take a solid form. And accordingly, in
some cases, this sify crust, will, in consequence
of gentle pressure, lose above three fourths of
its weight. Thus it appears, that in reality
it contains only a very small proportion of co-
agulable lymph; but, he thinks, that a judg-
ment may always be formed of the proportion
of coagulable lymph in blood, from the thick-
ness of the sify coat, and firmness of the craf-
amentum taken together. And from these
circumstances he concludes, that in inflamma-
tory diseases there is an encrease of the quan-
tity, not a change of the quality of the gluten.
While, however, it is on all hands admitted,
that there are many different circumstances which have effect on the spontaneous separation of the blood, and have thus a tendency either to induce, or prevent, the appearance of a slyy covering; so it must also be allowed, that the viscosity of the craffamentum, will be affected, not merely by the quantity of the coagulable lymph, but also by its nature, and by the mode of coagulation. It is, perhaps, therefore to be regretted, that this ingenious author did not endeavour to ascertain the proportion of coagulable lymph in the blood, in different cases, by attempting to separate this part of the blood from the red globules and serum, and then weighing the quantity of it.
III.

D. Johann Christian Gottlieb Akermanns.
abhandlung über die kenntnifs, und bielung des
Trismus, oder des Kinnbakkenzwanges, und de-
ßen verschiedenen Arten, nebst einer geschichte der
damit verbundenen krankheiten, und den au-
sfichten sie zu heilen.

i. e.

A Treatife on the Knowledge and Cure of the Tris-
mus, or Locked jaw, and its different Species;
together with the History of the Diseases con-
nected with it, and the Method of Cure. By
Dr. Akerman. 8vo. Nürenburg.

IN the beginning of this work, the author
assigns his reasons for employing the term
trismus, as the name of the disease of which
he is to treat, rather than giving it the name
tetanus, a term more generally used. He
would not, he observes, have rejected the
common appellation, had he not been to de-
scribe a species of the distemper to which he
thought it did not apply. Although the term
trismus has been by some considered as signify-
ing any grating noise of the teeth, yet our au-
thor here uxes it, as expressing a convulsion of
the muscles which move the under jaw.
COMMENTARIES. 387

Having thus defined the meaning of the term trismus, he next proceeds to consider the different kinds of it. He is of opinion, that the most ancient distinction is the most useful; that, viz. into the tetanus of the Greeks, or rigor nervorum of the Latins, and spasmos of of the Greek, or convulsio of the Latins. This distinction, which is to be found in the earliest medical writings, is, he observes, pointed out by nature. It is particularly followed by the Stahlian physicians, who distinguished the tetanus of the Greeks by the name of spasmus tonicus, and the convulsio of the Latins, by that of spasmus clonicus.

Following this distinction, he thinks, that the first kind of trismus may be named the trismus tonicus; and he considers a spasmodic constriction of the muscles, which draw the under jaw-bone to the upper, in consequence of which the jaws remain shut, and cannot be opened, as being the constant characteristic of this species. This is the locked jaw of the English, the spasmus maxillæ inferioris of the modern physicians. The characteristic of the second kind or trismus clonicus, is a continual spasmodic motion of the under jaw, owing to the muscles which move it, being at one time
contracted by a spasm, and soon again relaxed. This second kind of the trismus, is not, he observes, mentioned by any ancient physician, unless we refer to it the spasmodic convulsions of the face mentioned by Hippocrates. Among the moderns, he finds no trace of it, excepting in the writings of Marcellus Donatus.

After these remarks, the author next proceeds to consider the different affections referred to the heads of trismus tonicus and clonicus. As well from its frequently occurring in practice, as from the great danger with which it is attended, he considers as the first species of the trismus tonicus that which arises from wounds in any part of the body, even when they are of the slightest nature. This species, he observes, is more frequent in hot climates than in cold ones. He enumerates as a second species, that to which new-born infants are subject, particularly at a determined time after birth. To a third species he gives the name of trismus lenitus; and as this species has not been described by any practical writer, he gives the history of a case of it. In this case the disease is described as having occurred in a very slow and progressive manner, and in about three weeks it gradually and imperceptibly
tibly disappeared as it had come on, without any apparent evacuation, or perceptible change in the muscles employed in chewing. The fourth species of the trismus tonicus he terms trismus rheumaticus. The circumstances connected with it evidently shew how far it differs from all others. It frequently arises from the repulsion of eruptions, from the stoppage of perspiration, from the palsy, and similar causes.

The trismus clonicus make its appearance, he observes, more rarely than the tonicus. In enumerating the species of this, he mentions as the first, the trismus clonicus rheumaticus, which he considers as having a great analogy to the trismus tonicus rheumaticus, both with respect to the causes from which it arises, and the degree of danger with which it is attended. To the second species he gives the name of trismus clonicus intermittens, or periodicus, in proof of the existence of which, he relates the history of a case in which it took place.

The last distinction which our author endeavours to establish with respect to this affection is into idiopathic and symptomatic. He is inclined to consider those as idiopathic, which, although they may at first arise from wounds, yet continue after the wound is healed with the same violence as before, and are fre-
frequently the cause of death. The trismus clonicus, he observes, most frequently appears as an attendant of other complaints, and may, in general, be considered rather as symptomatic than idopathic.

After pointing out these distinctions, the author next proceeds to treat more particularly of the trismus tonicus, and first of that species which arises from wounds. This species, he observes, is often preceded by frequent yawning, slight cough, an uneasy oppression about the breast, pain at the back part of the tongue, want of appetite, and a disagreeable sensation in the belly. But in other cases, without any of these symptoms, the inability to open the mouth, is the very first appearance. In general, the wound, which is the source of all the complaints, gives very little, or rather no pain; and not unfrequently, it is completely healed up before the trismus begins. In some instances, however, the disease, through its whole course is attended with very severe pain in the wounded part. The spasm soon becomes so violent, that the patient is unable to swallow any thing but liquids, and although nothing preternatural can be discovered in the throat, yet the jaws are so closely shut, that no power is able to separate them. In some
some instances, the spasm extends to the back and other parts of the body in such a manner, that the patient must continue motionless in bed. Subsultus tendinum is then a frequent circumstance. The skin is so stretched over the muscles which it covers, that it cannot, by any means, be elevated from them, as is the case in a sound state. The pulse is slow, irregular, intermittent, and always weak; the breathing is always somewhat more difficult than in a sound state; but when the spasm is extended to the back this difficulty is very much increased, and attended with a peculiar noise. Neither the pulse, nor any other circumstance, give indication of any degree of fever. On the contrary, every function of the body appears to be affected with a state of torpor; for the most part, the countenance is pale, or of an unnatural yellow cast, and its expressions indicate the anguish to which the patient is subjected. Blood drawn from a vein is very little different from that in a natural state; sometimes, however, it is observed to be of a clearer red colour and more spongy. The patient very rarely sleeps, and when sleep does take place, he derives very little refreshment from it. In some cases there is a slight eruption on the skin, which, however, neither en-
encreases nor diminishes the violence of the distemper.

The duration of this disease depends very much upon the constitution of the body affected, and on the proper application of the means of cure. If it attacks one of an irritable habit and much disposed to spasm, it often proves fatal in a short time, sometimes in the space of three or four days; but in most cases, the patient is not cut off till three or four weeks from the commencement of the affection.

After having given this account of the trismus traumaticus, our author observes, that the trismus rheumaticus does not differ from it in the principal circumstances. The pulse, however, is, in general, more full and quick, and frequently what would indicate a state of inflammation. This disease usually continues a shorter time than the former, and the danger is less alarming.

In treating of the third species of trismus, which, from its frequently attacking children, has been named the trismus infantilis; he observes, that it is considered as being very fatal in most countries, but particularly in warm climates. He tells us that in Guinea, and some other
other parts of Africa it is endemic. By the observations made in different counties, it appears, that children are exposed to this disease at different periods after birth; but it principally occurs between the 9th and the 14th day. It is in very rare instances only that it occurs at a later period. In giving the history of this disease, he observes, that without any previous heat, and, in most instances, without any external cause, the child sinks into a very unnatural weariness and sleepiness, attended with frequent yawnings; these, according to circumstances, are accompanied sometimes sooner, sometimes later, with a difficulty in moving the under jaw. This at length increases to such a degree, that the mouth is so much shut as not to admit any food; sometimes, although the child can open its mouth, there is a total inability to suck or swallow. The patient feels no painful sensation, and the belly is frequently, although not always, swelled, as some have alleged. The skin has a pale yellow colour, which is particularly visible in the countenance; the eyes are confused, and the spasms not unfrequently extend over the body, which may be considered as a symptom of approaching death. The disease seldom conti-
nues above two, or at most three, days, in those cases in which it proves mortal. But when the patient recovers, it is often of longer continuance.

After these descriptions of the different species of trismus tonicus, our author next describes the trismus clonicus, which he observes differs in so many respects from the former, that it may be considered as a different kind of spasmodic disease. It is, he observes, less frequent than any of the former, and not so fatal. The greatest part of those who are affected with it recover. But it does not end so soon as most of the kinds of the trismus tonicus. In some instances of this affection, the lower jaw is in constant motion without any interval; in others, there are considerable intermissions. Differences also occur with respect to the violence of the spasms; but he considers the characterizing circumstances as consisting in gnashing of the teeth, or motion of the under jaw.

After these observations on the history of different species of trismus, he next makes some remarks on the causes. He observes, that the trismus tonicus proceeds more frequently from wounds, than from any other cause,
cause, in temperate climates; but these are particularly apt to induce it when the patient is at the same time exposed to warm and moist air. The greater the sensibility of the wounded part, the more danger there is that the affection will prove fatal. Physicians have in general been inclined to suppose, that warmth and moisture are the causes of the trismus infantilis. Our author, however, imagines, that some accidental exposure to cold, occurring together with these, is necessary for producing this affection.

Another cause of the trismus infantilis, he imagines, to be want of attention on the part of the mother with respect to her way of living. It may, he thinks, be the effect of a fright, or any other accident, which can have influence in producing any alteration on the state of the milk, and thus corrupting the nourishment of the child. He thinks that it may also proceed from swaddling children too closely, a practice, which he observes is becoming less frequent.

After these observations on the causes, he next proceeds to treat of the method of cure.
In the trismus traumaticus, the general indications of cure which he lays down are,

1. To pay the greatest attention to the wound, and to avoid every thing which can in any degree irritate.

2. To diminish the violence of the spasm, both by external and internal applications.

3. To endeavour to counteract the tendency to a general tetanus till the spasm be entirely removed.

In the trismus rheumaticus, from whatever cause it may arise, whether from a stoppage of perspiration, or from an unnatural constitution of the fluids, the objects principally to be aimed at are,

1. To procure sleep, and thus to encourage perspiration.

2. To obviate the bad consequences which may arise from a determination of fluids to the internal parts.

3. To discharge the foreign stagnating juices, or to lead to a deposition of them in some proper place.

In the trismus infantilis, he proposes the following indications.

1. To
1. To correct as much as possible any bad qualities in the milk by proper nourishment.

2. To endeavour, by internal means, when the violence of the distemper will admit of it, and when that cannot be done by external applications, to promote the usual discharges.

3. To prevent as much as possible the violence of the spasmodic affections.

After laying down these general indications, he next makes some remarks on the particular remedies which may be applied with advantage to obtain these ends.

In cases of the trismus traumaticus, where there is reason to believe that a nerve is much injured or lacerated, although not entirely ruptured; he advises, that it be completely divided. And among the internal remedies which have been employed against this affection, he puts principal confidence on the juice of poppies and opium.

In the trismus rheumaticus also, he considers the use of poppies as being of the greatest service. But in those cases which proceed from the repulsion of any cutaneous eruption, he recommends mercurial friction as being a preferable remedy.
As the trismus clonicus proceeds from nearly the same causes with the trismus tonicus, the mode of treatment is not widely different. But as the disease is not so violent, and the danger not so alarming, he does not imagine that it will be found so frequently necessary to have recourse to the use of poppies. On the contrary, in particular instances it appeared to him to be rather productive of a bad effect. After the use of purgatives, consisting of rhubarb and sal. polychrest, he exhibited to his patients, in this affection, a mixture of spirit of harts horn and Hoffman’s anodyne water with great advantage.

He concludes his observations on this subject, with pointing out the external application which may be applied with greatest advantage. And he is inclined to think, that among all these the best consequences may be expected from mercurial frictions.

When it is considered that the treatise now before us consists principally of a minute detail of experiments, it will naturally be concluded that it is impossible for us to give, in every respect, a proper analysis of it. The doctrines, however, deduced from these experiments, are in so many particulars different from the opinions generally received by modern philosophers, that they may justly be considered as meriting particular attention; especially, as they are supported by numerous, and these too, apparently, probable arguments. We shall, therefore, endeavour to present our readers with as full and distinct a view of Mr. Crawford’s opinion as is consistent with the nature of our work.

The author introduces his subjects by pointing out the different senses in which the words
heat and fire have been taken. Following Dr. Irvine, the ingenious professor of chemistry at Glasgow, and some others, he adopts the term absolute heat, as expressing the power or element, which when it is present to a certain degree, excites in all animals the sensation of heat; while sensible heat expresses the same power considered as relative to the effects which it produces. But bodies of different kinds have different capacities of containing heat, as is exemplified in the case of water and antimony. In these, therefore, the absolute heat is different when the sensible heat is the same. And if, with many modern philosophers, we consider the word fire as expressing that unknown principle, which, when it is present to a certain degree, excites the sensation of heat alone; but when accumulated to a greater degree, renders itself obvious to the sight and touch, or produces heat accompanied with light, it signifies the same thing with absolute heat.

Having premised these remarks, he next presents the reader with a view of the general facts upon which the experiments are founded. Heat, he observes, is contained in great quantities in all bodies when at the common temperature of the atmosphere. It has a constant ten-
tendency to diffuse itself over all bodies, till they are brought to the same degree of sensible heat. And if the parts of the same homogeneous body have the same degree of sensible heat, the quality of absolute heat which they contain will be in proportion to their bulk, or quantity of matter.

He considers the mercurial thermometer as being an accurate measure of the comparative quantities of absolute heat, which are communicated to the same homogeneous bodies, or separated from them, as long as such bodies continue in the same form; that is, if the sensible heat of a body, as measured by the mercurial thermometer, be diminished one half, one third, or in any given proportion, the absolute heat will be diminished in the same proportion. But the comparative quantities of absolute heat, which are communicated to different bodies, or separated from them, cannot be determined in a direct manner by the thermometer.

After having premised these general facts, the author proceeds, in the second section, to lay before the reader his own experiments on animal heat, and on the inflammation of combustible bodies. He observes, that experi-
ments for determining the comparative quantities of absolute heat in bodies, are liable to inaccuracy from different causes; particularly from the escape of heat into the air during the time requisite for mixture; from the mutual communication of heat between the vessel and the mixture; and from the difference which is often observable between the heat at the surface and at the bottom of the mixture. After pointing out the precautions by which inaccuracies from these sources may best be avoided, he next presents us with the relation of his experiments for determining the absolute heat of the most common vegetable and animal substances compared with water. As an example of the method in which these experiments were conducted, we shall give a detail of the first in his own words, and mention merely the result of the succeeding ones.

**EXPERIMENT I.**

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<td>Air in the room</td>
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<td>A pound of wheat</td>
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<td>A pound of water</td>
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The mixture being agitated for a short time the temperature at the end of
The mean temperature of the mixture at the end of one minute was 133, at the end of two minutes 129½, at the end of three minutes 126½. The heat carried off by the air in the first minute, being calculated according to Sir Isaac Newton's rule, was nearly 3½. If we add this to 133, we shall have 136½ for the true temperature of the mixture. It was proved that the capacity of the vessel for receiving heat was to that of water, as 1 to 12½.

In the experiment which we are now considering, the vessel was raised from 66 to 133, or 67.5, dividing this by 12½, we have nearly 5.5 for the quotient. From this it appears, that the water was cooled by the vessel 5.5, or the vessel separated 5.5 degrees from the water. The true temperature of the mixture was 136½, subtracting this from 166, we have 29½ for the remainder. The water was therefore cooled 29½ by the wheat and the vessel together. But it was cooled 5.5 by the vessel. It was therefore...
fore cooled 24 by the wheat. But the wheat was raised from 66 to 136½, or 70.5. It follows that the same quantity of heat which will change the temperature of water 24, will change that of wheat 70½. Therefore the absolute heat of water is to that of wheat as 70½ to 24, or very nearly as 2.9 to 1.

From similar experiments he determines the comparative heat of water to be to that of oats as 2½ to 1; of water to barley as 2.4 to 1; of water to beans as 1.6 to 1; of water to the lungs of a sheep as 1.3 to 1; of water to milk as 1.1 to 1; and of a mixture of venous and arterious blood to water as 2.5 to 24.4. Without pretending to enter into the inquiry how far the method here employed for determining the absolute heat of bodies, can, in any case, lead to a certain conclusion, we may yet observe, that one obvious objection occurs to all the experiments as here related. The different articles, which were the subject of them, were tried in very different circumstances. Thus, for example, wheat was tried with the air in the room at 69, and the water added to it was at 166. Barley was tried with the air of the room at 60, and the water added to it was
was at 160. While again, to determine the absolute heat of blood, that fluid was taken at 98, and the water added to it was at 47 degrees only; and in this trial half a pound only of each of the fluids were employed, while in all the former ones, a pound of each of the substances had been used. How far experiments, thus essentially differing from each other, can be a proper foundation for any calculation, future trials must determine. But it would certainly have been much more satisfactory to every reader, who has no opportunity of repeating the experiments, that the different substances, whose absolute heat is compared, had been tried in precisely the same circumstances.

These experiments, however, Mr. Crawford imagines in general prove, that flesh, milk, and vegetables, contain less absolute heat than water; and that water contains less than blood. Blood, therefore, he concludes, contains a greater quantity of absolute heat than the principles of which it is composed. The remarkable accumulation of heat in this fluid, led him to suspect, that it absorbs heat from the air in the process of respiration; and in this suspi-
suspicion he was confirmed by the following considerations.

1. That those animals which are furnished with lungs, and which continually inspire the fresh air in great quantities, have the power of keeping themselves at a temperature considerably higher than the surrounding atmosphere; but that animals which are not furnished with respiratory organs, are very nearly of the same temperature with the medium in which they live.

2. That among the hot animals those are the warmest which have the largest respiratory organs, and which, consequently, breathe the greatest quantity of air in proportion to their bulk. Thus the respiratory organs of birds, compared with their size, are more extensive than those of other animals, and birds have the greatest degree of animal heat.

3. That in the same animal, the degree of heat, is, in some measure, proportionable to the quantity of air inspired in a given time. Thus animal heat is increased by exercise, and by whatever accelerates respiration.

In farther confirmation of this doctrine, our author endeavours to demonstrate by experiment, the following propositions.

1. That
1. That atmospherical air contains a greater quantity of absolute heat than the air which is expired from the lungs of animals; and that the quantity of absolute heat contained in any kind of air which is fit for respiration, is very nearly in proportion to its purity, or to its power of supporting animal life.

2. That the blood which passes from the lungs to the heart by the pulmonary vein, contains more absolute heat than that which passes from the heart to the lungs, by the pulmonary artery.

3. That the capacities of bodies for containing heat are diminished by the addition of phlogiston, and increased by the separation of this principle.

For a view of the experiments by which he attempts to demonstrate these propositions, we must refer our readers to the work itself. And in order to afford full conviction on this subject, not only a candid perusal of what is related by this ingenious author, but a repetition of the experiments also, both in the manner performed by Mr. Crawford, and in circumstances somewhat different, would seem to be necessary.

But
But after endeavouring, in the second section to establish these important facts, he proceeds in the third to offer an explanation of animal heat, and of the heat which is produced by the inflammation of burning bodies. His opinion respecting the cause of animal heat, is, that it depends upon a process similar to a chemical elective attraction. The air is received into the lungs, containing a great quantity of absolute heat; the blood is returned from the extremities highly impregnated with phlogiston; the attraction of the air to the phlogiston is greater than that of the blood. This principle will therefore leave the blood to combine with the air. By the addition of the phlogiston, the air is obliged to deposit a part of its absolute heat, and as the capacity of the blood is, at the same moment increased by the separation of the phlogiston, it will instantly unite with that portion of heat which had been detached from the air. In this manner he supposes the blood to acquire absolute heat.

He next observes, that from Dr. Priestley’s experiments, with respect to respiration, it appears, that the arterial blood has a strong attraction
traction to phlogiston; it will, consequently, he thinks, during the circulation, imbibe this principle from those parts which retain it with least force, or from the putrescent parts of the system. And hence the venous blood when it returns to the lungs is found to be highly impregnated with phlogiston. By this impregnation, its capacity for containing heat is diminished; in proportion, therefore, as the blood, which had been dephlogisticated by the process of respiration, becomes again combined with phlogiston, in the course of circulation, it will gradually give out that heat which it had received in the lungs, and diffuse it over the whole system. Thus, according to our author, in respiration the blood is continually discharging phlogiston, and absorbing heat; and, in the course of circulation, it is continually imbibing phlogiston, and emitting heat.

He concludes from his experiments, that atmospheric air contains much absolute heat; that when it is converted into fixed and phlogisticated air, the greater part of this heat is detached, and that the capacities of bodies for containing heat are diminished by the addition of phlogiston, and increased by the separation of
of it. Hence he infers, that the heat which is produced by combustion, is derived from the air, and not from the inflammable body. Thus his doctrine upon the whole is, that atmospheric air contains in its composition a great quantity of fire. By the separation of a portion of this fire in the lungs, it supports the temperature of the arterial blood, and thus communicates that pabulum vitae, which is so essential to the preservation of the animal kingdom. And finally, by a similar process, it maintains those natural and artificial fires, which are excited by the inflammation of combustible bodies.

Having delivered this doctrine, he next proceeds to explain on this hypothesis the principal facts relating to animal heat, and the inflammation of combustible bodies. On the former of these subjects, he endeavours to shew why breathing animals have a higher temperature than those who are not furnished with respiratory organs; why the animal body has, in certain situations, the power of producing cold, or of keeping itself at a lower temperature than the surrounding medium; why, among different animals, those are the hottest which breathe the greatest quantity of air; why
why, in the same animal, the degree of heat at different periods, is, in some measure, proportioned to the quantity of air inhaled in a given time; and finally, why topical inflammations are accompanied with unusual heat? But the limits of our publication will neither allow of our offering any view of these, nor of suggesting our doubts with respect to them.

For the same reason also, we cannot pretend to follow him in the solution which he gives of the principal facts relating to the combustion of inflammable bodies. We shall, therefore, conclude this subject, by presenting our readers with the account he gives of volcanos, which afford us examples of, perhaps, the most tremendous phenomena in nature exhibited by fire.

It is found, he observes, by experiment, that the phenomena of an earthquake may be imitated by a mixture of iron filings and brimstone, made into a paste with water, and buried in the earth. This, he thinks, may be accounted for in the following manner. The attraction of phlogiston to the acid of sulphur will be diminished both by the attraction of iron to this acid, and by that of water.
In the degree of heat, which is necessary to the inflammation of sulphur, atmospheric air is capable of separating the phlogiston from the vitriolic acid. And Mr. Crawford thinks it probable, that by the assistance of the iron and the water, it may be capable of producing this effect in the common temperature of the atmosphere. If this be the case, it follows, that by the action of the air, which is diffused through the substance of the earth, upon the phlogiston of the sulphur, and by that of the iron and water upon the acid, the sulphur will be decomposed; the air will unite with the phlogiston, the iron with the acid, a quantity of fire will be disengaged from the former, and an inflammable elastic fluid from the latter; and hence a commotion will be excited, accompanied with noise, and the eruption of a flame resembling the phænomena of an earthquake.

May not, says he, a similar mixture of sulphureous and metallic bodies be produced in consequence of the changes which take place in the bowels of the earth? May not these bodies be brought into contact with the water and atmospheric air which are diffused through the earth's substance, or lodged in cavities beneath
beneath its surface. By the action of the air upon the phlogiston, and of the water and the ore upon the acid, may not the sulphur be decomposed as in the mixture of iron filings and brimstone. In this case, a quantity of fire will be disengaged, and an elastic vapour produced; the latter of which, by its sudden expansion, will excite a commotion in the bowels of the earth; and will, at length force its way through the superincumbent strata.

If much combustible matter be lodged in regions where the subterranean fires have been kindled, and if this matter be mixed with atmospheric air, or with substances, which, by the application of heat, produce a fluid which is capable of maintaining fire, the inflammation may be augmented to a prodigious degree; and the rarified vapours may carry along with them in their ascent, a great quantity of ignited materials abounding with phlogiston; by the exposure of which the phlogiston will be discharged, and the flame extended through a large tract of air. In this manner, he thinks, we may account for volcanos, those awful instances of combustion, which are exhibited by nature in the fossil kingdom. And upon the
he concludes, that a variety of important facts are produced in the universe, in consequence of the mutual opposition of fire and phlogiston.

How far future experiments, and solid reasoning will serve to confirm or refute this hypothesis, we cannot take upon us to determine. But from the ingenuity and judgment with which the author has supported it, as well as from the importance of the subject, it may justly be considered as meriting particular attention. And if the doctrine which Mr. Crawford has propounded, and has with so much ability supported, shall be confirmed by the observations of others, it will afford a new and most extensive field of investigation for every philosophical inquirer.

VI.


The dreadful effects which have not unfrequently been observed to result from corrosive sublimate, render it an object of very great
great importance to practitioners to be acquainted with antidotes, by which the influence of this poison may be most effectually counteracted. And these particularly deserve notice, when from trials, in actual practice, they have been found to be attended with success. In a case, treated by Mr. Dumonceaut, such a favourable termination was happily obtained by means of the timely use of sal abfinthii.

A man of a robust habit of body, and sanguine temperament, in the fortieth year of his age, took one evening, about ten o'clock, a considerable quantity of corrosive sublimate, which happened to be in his house, and which had been procured for poisoning rats. He swallowed it, after mixing it in a glass of beer. The instant after he had had taken it, his mouth, œsophagus, and stomach, were very much affected by its caustic powers. Inflammation of the mouth, and a burning heat in the region of the stomach, attended with excruciating pain; soon succeeded to the first impression of the corrosive sublimate. These feelings were quickly propagated through the whole intestinal canal, and were there attended with as severe pains as those of the stomach.

Soon
Soon after, his countenance was very much swelled, and became of a crimson red colour, and his eyes were sparkling. He was affected with anxiety about the præcordia, with inquietude and constant tossing. Amidst these symptoms, his pulse became feverish and small. In this situation, an emetic was given him in a glafs of water, but it had little effect in producing vomiting, and the pains, which were before very violent, seemed to be augmented.

When the patient was in this situation, Mr. Dumonceau was called in, who, with the view of decomposing the metallic salt, immediately exhibited to this patient, a dram of the salt of wormwood, in a glafs of water. He subjoined to it also the use of insipidants, with the view of involving the acid particles. Upon these measures the pains were somewhat abated, yet they returned at intervals with great severity, and symptoms occurred which seemed to threaten a corrosion of the internal membrane of the stomach and intestines; for the matters discharged by stool were observed to be tinged with blood. Yet Mr. Dumonceau, as well as Mr. Planchen, who was also called in, agreed in the propriety of continuing the medicine; and, accordingly, two drams
drams of the sal absinthii, in two ounces of
incrassant decoction, were exhibited to him.
From this he felt very distinctly considerable
relief; and although the pains returned from
time to time with violence, yet they became
by degrees more easy, and by the next morn-
ing, a calm had, as it were, succeeded to the
form. All the alarming symptoms had now
disappeared, but there still remained a painful
sensation through the whole tract of the ali-
mentary canal, and the patient complained of
general weakness and lassitude.

The author, after giving this detail of the
case, which had thus a happy termination,
subjoins a few remarks on this subject. He
observes, that a knowledge of chemical affini-
ties points out the propriety of this prac-
tice. The fixed alkali, by its attraction to the
muriatic acid, the union of which with mer-
cury forms corrosive sublimate, quickly com-
bines with this acid. Upon this, one part of
the mercury is precipitated in the form of a
mercurial calx, and the other part is reduced
to the state of mercurius dulcis. But neither
mercurius dulcis, nor calx of mercury, in a
small quantity, are highly pernicious to the

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ani-
animal oeconomy. From the union again of the fixed alkali with the marine acid, which also takes place, a febrifuge salt is formed, from which no danger can be apprehended.

VII.

Traitemant d'Une Affection Soporeuse, par M. Boyer,
Med. Correspond. de la Société Royal de Medecine.


Mr. Boyer introduces his observation on the singular and alarming case which he has here related, by remarking, that he puts very little confidence on specifics in general, and least of all on those which are highly extolled. For this very circumstance is sufficient, he thinks, to render them suspected. Notwithstanding these general sentiments, however, he reckons it but justice to give a fair and candid account of what passed under his own observation, respecting the use of the volatile alkali fluor, which has of late been highly celebrated at Paris in all the public papers.

A young woman, in the eighteenth year of her age, of a delicate habit of body, and, in some degree, subjected to rachitis; being upon a visit
visit to a relation was, about three in the after-
noon, suddenly attacked with violent convul-
sions. These were attended with foaming at
the mouth, and total loss of sense. In this
situation she was put into bed, and Mr. Boyer
was sent for. Before he came, the convulsive
motions had entirely ceased; he found the
pulse of his patient regular but weak. Her
extremities were cold, and she was affected
with a sound sleep, from which she could not,
by any means, be roused.

The symptoms which were described to him,
he considered as indicating an epileptic fit. But
he was informed, that she had never before
been affected with any thing which could give
the least suspicion of that disease. He was
told also, that the evening before she had
passed some worms, and had eat at dinner a
considerable quantity of chestnuts.

After the use of several external stimuli, com-
monly employed in such circumstances, without
effect, he judged it necessary to exhibit a vomit.
This was given her from a spoon, but not with-
out a good deal of difficulty, her teeth being very
close together. The vomit produced violent
straining, but was accompanied with very lit-
tle evacuation. It had, however, no influ-
ence in the removal of her state of torpor.

He
He then employed, in succession, irritating clysters, and a variety of antihysteric medicines, with no better effect. At length, on the third day from the attack, a large blister was applied between her shoulders. The blister rose well, and during its action she was observed to sigh, but gave no other sign of sensibility.

All these measures having proved fruitless, and the affection having now continued to the fifth day, the torpor and other apoplectic symptoms being nothing diminished, and the pulse becoming more weak, he resolved upon a trial of the volatile alkali flour, which he considers, however, as nothing else than the volatile spirit of sal ammoniac, which has for a very long time been commonly used in medicine in similar cases. Almost immediately after the first spoonful, the patient was evidently much agitated, and cried out, she was poisoned, and must instantly have some water. Cold water was given her, but soon after taking it she fell into the same stupor as before. Next morning another dose was given her, the immediate effect of which was the same as the evening before; but with this difference, that after being roused from the stupor, it did not again return. The patient
patient complained only of pain of her head, which, however, gradually left her, and she soon recovered her former health.

Having given this relation of the case, Mr. Boyer next states some queries on this subject. He asks, how the volatile alkali can here be supposed to act. Does it operate, says he, as a specific? Did it remove the cause of the complaint? But what was the cause? And whatever it was, could it be supposed to be destroyed in an instant? It can hardly, he thinks, be here supposed to have operated as a stimulus, since before that, he had employed stimulants both externally and internally, frictions, emetics, blisters, &c. without any good effect. He concludes with observing, that whatever may be the case, and however decisive this fact may appear in favour of the volatile alkali, yet as he had before the misfortune to entertain doubts with regard to its efficacy, and as he thinks it not impossible that the other remedies may have contributed to the success, he promises to take the first opportunity of repeating this practice in similar cases. And it is to be hoped that he will communicate the result of his trials to the public.

Sect.
I.

A Case of Hydrocephalus, by Dr. Robert Butler Remmett, Physician at Plymouth.

It is exceedingly to be lamented that, in a science of so much importance to mankind as is that of medicine, conclusions are frequently formed at random, and thus handed down from century to century, without the smallest inquiry into the arguments by which they may be supported. When we have at last, however, been induced by accident, or some more laudable motive, to examine the grounds of our opinions, we have too often had
had abundant reason to regret our former negligence, and wonder at the ignorance with which we have so long persisted in the most dangerous practices. The present approved method of treating the small-pox, and several other disorders, would sufficiently evince the truth of this observation; but I have been more particularly led to it by a case of hydrocephalus, for which I was lately consulted. The event was indeed fatal, but as the disorder is not very common, and the method of treatment is new, and contrary to the express prohibition of some other physicians, I think it my duty to offer it to the faculty, and shall be very happy if these cursory observations lead some more able practitioners to improve upon the hints I shall now throw out to them.

A. B. was born, after a natural labour, August 9, 1778, and being examined, was found to have a very large head, with the sutures of the cranium very open, and an evident fluctuation of some fluid within it. From this time, to the age of two months, the disorder advanced very considerably, and then I was consulted, and found, besides the former symptoms, the eyes of the child much protruded, and starting, as it were, from the head.
head. In every other respect she was perfectly healthy, and a very strong girl.

The gradual progress of the disorder, the fluctuation of a fluid at theutures of the cranium, and the absence of every anaerobic appearance, left me no doubt that there was an accumulation of water between the dura and pia mater.

To discover a probable method of cure was not so easy a matter; but having learnt from a similar, as well as from the present case, that little or nothing was to be expected from all the ordinary remedies of dropsy, and that no relief could be obtained from the application of blisters, which appeared to me to be the most probable means of cure, I determined, in conjunction with Mr. J. Woolcombe, an excellent surgeon of this town, to try what might be done by a cautious and gradual extraction of the water. Having chosen a place, at the opening of the futures, where we might be sure to avoid the sinuses of the dura mater, and have a depending orifice, a small puncture was carefully made with a lancet, and ten ounces of a clear pellucid fluid were drawn off the first time, which was on the 7th of October.
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To obviate any inconvenience that might have arisen from lessening the pressure on the brain, we kept our hands constantly and equally applied all over the head during the operation, and afterwards rolled on a tight bandage. This being a new operation, we thought it necessary to observe the greatest caution, and were therefore unwilling to take off more than ten ounces, till we might be enabled to form a better judgment of the consequences, but as the child was not, in the smallest degree, disordered by the evacuation, we afterwards determined to repeat it from time to time, as circumstances might require.

On the 9th of October we accordingly took off twelve ounces more; and on the 12th fourteen ounces; by this time the futures were close, and the appearance of the head was almost natural, our little patient being still in good health. The secretion in this, as in most other dropical affections, went on, however, in spite of the evacuation; but it was not till the 9th of November that we thought it necessary to make another puncture, and as the head was then but moderately enlarged, we drew off only twelve ounces. By the 7th of Decem-
December, the disease had made a more rapid progress, and then we drew off thirty-two ounces before the head could be reduced to a natural appearance; the child was all this while perfectly healthy, and continued so till the 24th of December, when, without any apparent reason, at the distance of seventeen days from the last operation, she suddenly fell into an atrophy, in which she lingered to the 4th of January, when she died.

It was particularly fortunate for me that her death did not happen sooner; but as it may yet be suspected that her end was hastened by my treatment of her, and the consequent admission of air to the tender meninges of the brain, I think it necessary to assure my readers that the puncture being made in the most simple manner was always found again, and scarce visible after a day or two, and never discovered the slightest appearance of inflammation. So little reason is there to imagine that the wound was ever productive of any bad effects; but every idea of this kind must be totally removed by the subsequent dissection, from which it appeared that there was not the least trace of any previous inflammation. But that my patient had so many other evils to encounter, that it was truly wonderful she could live and thrive so long.
The next morning after her death, being permitted to inspect her head, we found, to our great astonishment, the whole cavity of the cranium full of this clear, pellucid fluid, of which we collected about two quarts. The dura mater, with its processes, was entire; but we could not at first discover any appearance of brain, and after the most minute examination, we could only trace the medulla oblongata descending into the spine; and behind the orbits of the eyes a very small quantity of a medullary substance, indistinctly resembling that of the brain; what we saw, however, was quite entire, and covered by the pia mater, and I have already remarked, that the fluid was perfectly clear and pellucid, so we had not the least reason to adopt the opinion of Morgagni, who endeavours to prove that in all such cases the absence of brain must have arisen from its dissolusion in the preternatural fluid contained in the cranium.

In Bonetus, as well as in Morgagni, similar dissections are to be met with. It is not, therefore, to excite the astonishment of my readers, or because I suppose this to be a new case, that I relate it. My only wish is to call the attention of the faculty to this very important disease; that
that by repeated dissections it may be known in what state the cavity of the cranium is generally found, in those who die of this species of hydrocephalus. Should it often appear as I saw it, every idea of cure must be banished from our thoughts; but should it on the contrary be happily discovered, that mine was an an unfavourable case, and that the brain itself is not so materially disordered in most instances of this disease, I think I have shewn that the evacuation of the water is perfectly safe, and that it may as easily be made as by the common paracentesis of the abdomen.

How far the last operation is itself proper has, indeed, been doubted by some; but if there has been a single cure promoted by it, (and many such may, I am sure be produced) should we not be much more inclined to have recourse to a similar operation, in a disease, the consequences of which are idiocy, and a train of evils, the greatest and most deplorable to which humanity is subject.
II.

The History of a singular Case of Rabies Canina terminating favourably, by the late James Til-
ton, M. D. of Dover-County, on the Delaware; communicated to Dr. Duncan by Mr. William Grisley, Student of Medicine.

In June last, I visited Mrs. K. aged forty-
seven years; she had been in June, eigh-
teen years before that, bit by a mad dog; her husband being a physician, immediately scarifi-
cied the slight wound in her ankle made by the dog's tooth, and applied a caustic to it. He gave her also such medicines as he thought best. During his life-time, for seventeen years after the accident, the wound on her leg frequently broke out into a running sore, especially every spring of the year; he always promoted the discharge from the wound by proper diges-
tives, until it inclined to heal up of itself, and then he would let it cicatrize, and besides this, every spring he took some blood and gave her a mercurial purge or two.

After his death, these precautions being neglected, the first spring (or rather early in the
fummer) following, the parts about the cicatricium swelled and grew painful, but did not break out into a running wound. She bathed her leg in some warm bath, but omitted the bleeding and physic she had been used to in the spring-time. Soon after, she found herself strangely disordered in a manner she could not describe; but so as to make her very restless and uneasy, and affected her mind with a kind of fearfulness and distress, that was altogether unaccountable. This had not lasted above a day or two before she awoke in the night, raving mad with a frothing at the mouth, frequent convulsions about the stomach, throat, and face, and the most horrible dread of water. She was found in this condition about one o'clock in the morning, on the 19th of June last, when the two most adjacent physicians being called in, a blistering plaster was applied to the old cicatrix, and she was bled to the quantity of sixteen ounces; but as she was incapable of swallowing any thing, no more was done for her at this time.

Blooding moderated her raving; but so far was her mind from being restored to right reason, that the night following, she broke away from her attendants, stripped herself naked, and
and ran out into the fields. It happened, however, to rain that night, and her abhorrence of the water forced her to return to the house again where she continued, to appearance, very mad, and very fearful, till daylight, none of the family daring to approach her for fear of injury. As soon as it was light, she set off for the woods most adjacent, but being pursued by some women they took her, put a shift on her, and tied her down in bed.

On the 21st of the month above mentioned, happening to be in the neighbourhood, I visited her out of curiosity rather than from the expectation of doing her any service. I found her in a restless agony, that went off with convulsions about the stomach, throat, and face, which occasioned several mouthfuls of a frothy saliva to be put out involuntarily. After this, she had an interval of reason, in which she could talk rationally, though much disturbed by an uncommon anxiety, which she said, could not be described; and thus exacerbations and remission of her disorder returned one after another continually, she had not so much as swallowed her spittle since the 19th; and to use her own expression, had not even the motion of swallowing; her countenance appeared florid.
florid and sanguine, her respiration quick and laborious, her pulse full, and but little more quick than natural; her tongue was much swelled, and a frothy matter rested constantly about her lips, which she spit carelessly about on every side. She could not bear the name of water to be mentioned to her by any other person, though she would sometimes cry out, Water, herself. The sight of a spoon, or the noise of the well-pole, would throw her into convulsions. She would sometimes complain vehemently of thirst, and call for water; but when the cup was offered, she would fall into convulsive agonies, with ravings. I happened to mention warm bath as a suitable remedy; she instantly cried out, Don't mention water, oh! water, water, terrible water; screamed in the most hideous manner, was convulsed all over, put out mouthfuls of frothy salivæ, and calmed again. All these actions seemed to be involuntary. In her intervals of reason, she would beg the bystanders to keep off from her, for her inclination was good to hurt any of them she could.

Both the other physicians who had seen her, plainly discovered their despondency of her recovery; and the patient was still farther convinced
vinced of certain death, by what her husband had told her in his life-time, in whom she pro-
feffed implicit faith. I therefore found it a fruitless task to persuade her to use any reme-
dies whatever, until an old friend of mine, distinguished by his benevolence above all his
good qualities, called at the house in consequence of my visit, which he had heard of. He related
a case from the London Magazine, in which the patient was recovered from a dreadful hy-
derphobia, by falling from a high place, wounding the temporal artery, and bleeding almost to death; he, therefore, earnestly recom-
manded a large bleeding, and I took oc-
casion, at the same time to observe, that a
doubtful remedy was better than none. By
the good old man's importunity, rather than
my reasoning, she at length consented to be
bleeded, and I immediately took between 20
or 30 ounces. From the time the blood began
to run, she became calm, and by the evening,
without any other help, was able to drink
some milk, which, however, she chose to be
four rather than fresh.

Next morning (the 22d) I visited her again,
and found her quite calm and sensible; she had
no raving fits since the day before, had been
rarely
rarely convulsed, and that in a slight degree; and what was more pleasing than all the rest, she was able to drink four whey, though she did not like to hear of water. There was now no froth about her mouth, she breathed easily and naturally while quiet, but seemed a little agitated with a kind of panting after talking; which, she said, gave her pain. The swelling of her tongue had gone down, but she complained of a burning heat in her stomach; her pulse was rather smaller but not quicker than natural.

Being now encouraged to hope for longer life, she consented to whatever should be advised. Several of the faculty being present, we soon agreed that bleeding should be repeated, which I immediately performed ad deliquium; after this a bolus of five grains of calomel was given, to be purged off with an ounce of Glauber’s salts, dissolved in four whey, an hour afterwards; but the salts being rejected by her stomach, a dose of jalap, in the form of a bolus, was substituted. This occasioned her first to vomit a quantity of green slimy matter, and afterwards purged her. After the purge, an anodyne bolus of opium, camphor, and castor, was directed, but none of
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of her attendants would prevail on her to take it; for she said opium always disagreed with her, and her husband had altogether disapproved of her taking it some time before his death. Mercurial friction were also advised, and a plaster of galbanum and opium to be applied to her throat and jaws, and these were done accordingly. The wound on her leg was renewed by a blister, and dressed with an ointment gently escharotic, to promote the discharge from it. The patient being at a considerable distance from my place of residence, I did not see her again till the 24th, I then found her so calm and reasonable it was unnecessary to confine her. She complained of great weakness and lowness of spirits, a sickness at stomach, and the burning heat continued, but lower down in her bowels. She had no appetite, and what little she took (which was the only food she had taken since the 22d) lay heavy on her stomach. She was now and then seized with a convulsive sob or two, and flight spasms of the muscles of the head and eyes, especially if she talked much, which also occasioned the panting in her breath above mentioned. Her pulse was weak and small. The small quantity of mercury, directed on the 22d,
22d, had made her mouth sore, and caused her to spit a little. She appeared to the attendants to sleep moderately, but she declared she had no good sound sleep, that her imagination was always disturbed, and that she had a strange propensity to think she should be better, and even well, if she could get into the woods alone.

It was now earnestly recommended to her, that she should sup frequently of any liquid nourishment, the most approved off, at least every hour; that a glyster of decoct. alth. vinegar and oil, with a little nitre, should be administered night and morning; and if she could not venture to take opium by the mouth, that sixty drops of liquid laudanum should be added to the evening glyster. By help of the mercurial friction, the present degree of spitting was to be kept up, a plaster of Ther. Venet. was ordered to the stomach, and in case a delirium should happen, bleeding was advised.

On the 29th, I visited her again, and found the glysters before directed had been altogether neglected through a mistaken modesty; and the rest of our advice had not been much more regarded; a little of the mercurial oint-
ment had been once or twice rubbed on, and the plaster of Venice treacle was applied to her stomach, but this last being suspected for a delirium that came on soon after, it was exchanged for some pounded rue. After this, she again fell into a slight delirium, but was instantly relieved by bleeding. Her son, who blooded her, told me, her blood appeared blacker, or darker coloured, than in either of the former bleedings, but that a considerable portion of it changed into serum upon standing. He also gave her some affa feotida and castor, which seemed to have a good effect upon her spirits.

Notwithstanding her neglect of drinking freely, and most of the advice given at my preceding visit, except bleeding, she now appeared quite composed, without any of her convulsive throbs, or the least spasmodic affection, though she said these troubled her sometimes at night. Her abhorrence of water was now quite gone, so that she could drink it without any emotion. She, however, still felt some degree of that burning uneasiness in her bowels, complained of a lowness and oppression of spirits, and that her mind was still liable to fearfulness and strange impressions of imagi-
imagination, which she had not the power to control.

After remonstrating against her negligence, I advised a repetition of three grains of mercurius dulc. over night, to be purged off next morning with some fenna and salts; that she should sup more frequently and plentifully of some liquid nourishment than she had done; that she should be familiar in washing with water as well as drinking of it; and, as soon as she was able, that she should remove to a convenient place, and use the cold bath.

Some days after this she fell into a slight delirium, and bit the arm of one of her attendants, but was instantly relieved as usual by bleeding, which was her resource in every instance of emergency; and was certainly the principal remedy in bringing about a happy cure. From this time she had no return of her disorder, but began to recover from that weak and low state, which fasting, evacuating medicines, and large bleedings had reduced her to. I have taken frequent occasions to visit her within these three months past, and find no traces of her madness left. It is true, she recovered but slowly from her weak and languid
guid condition, and her health has never been quite so vigorous since as before. This, however, was probably owing to an obstinacy in her temper, which made her always reject the better half of those helps that were recommended to her. The cold bath in particular, she constantly evaded, though frequently recommended with the greatest importunity.

This woman was always of a very hysterical habit, whence an ingenious young gentleman of the faculty, took occasion to observe, that possibly all her complaints might arise from that source, that the hysterical affection counterfeit all other disorders, and why not the hydrophobia. But does not the preceding history evince to the contrary? We may observe, the disorder took its first rise in the wounded part of the leg, from whence it made a gradual progress according to the usual course of the canine poison, and broke out into violence during sleep, rather than when she was awake. Her being cured, is no evidence her disorder was not from infection, nor the long interval between the bite and its effects, for we have authentic histories to prove that both are possible.
III.

The History of a Case of Ascites, remarkable for the Quantity of Water drawn off by Tapping. By Dr. William Scott, Physician in Hawick.

A Woman, in the thirty-fifth year of her age, when in the seventh month of pregnancy, had a violent bilious colic. Her belly was collybive, and excessively swelled, attended with great thirst; but upon the administration of two or three emollient injections, the operation of which gave relief, and, drinking a quantity of water-gruel which brought on vomiting, the symptoms were mitigated. About three days after her delivery, which was natural, she was again seized with the colic; but upon the repetition of the injections, and a dose of clarified tincture, she was again relieved. Upon feeling her belly, I found a hardnes in the right side, all along under the short ribs, which plainly demonstrated that the liver was schirrhous.

For five months after delivery she had a return of the colic every fourth or fifth week. About this time the child was ordered to be weaned. One month after this she had symp-
toms of the catamenia, which terminated in the colic without any discharge from the uterus.

The colic returned regularly, always about the time of menstruation for three months; from this time her belly began to swell, accompanied with costiveness and scarcity of urine. To remove the swelling of her belly, which evidently depended on a collection of water, the operation of the paracentesis was performed, and from February 1777, to May 1778, 928 pints of water were drawn off at twenty-four successive tappings at different intervals, as will appear from the subsequent table. The water, for the first four times was limpid, resembling whey. Afterwards it became muddy, and for the last five times it seemed to consist principally of purulent matter. Upon the death of this patient, which happened soon after the twenty-fourth tapping, the following appearances were discovered on dissection. The omentum was almost entirely gone; the liver, uterus, and ovaria, were in a shrivelled state; the mesenteric glands were very much enlarged, and upon being cut open, seemed to contain purulent matter. The right kidney was in its natural state, but the left was much enlarged, and the ureter thickened in its coats.
coats. The coats of the colon and rectum were also much thickened, and adhered to the neighbouring parts.

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The first column marks the number of times for which the tapping was performed. The second the number of weeks intervening between each particular operation and the preceding one. And the third, the quantity of water, in English pints, drawn off at each operation.

Total of Water 928
The History of an uncommon Case in Midwifery, by Mr. William Spier, Surgeon, of Ardee, County of Louth, Ireland, communicated to Dr. Duncan.

I was in the morning of the 21st of March last called to the assistance of M. R. a poor woman in this town, who was in labour of her first child; she was twenty years old, of a small stature, and with a narrow pelvis; but without any other apparent deformity. The midwife, who attended her from the beginning of her illness, informed me, that the woman had come to her full time, and had been in labour for the five preceding days; she said her pains had been much stronger and more severe since yesterday evening than before; that the membranes were not as yet broken, nor the waters discharged; but that in place of them, putrid coagulated blood had continued to flow abundantly from the vagina for half an hour.

As soon as I came, I was immediately solicited to try some method of delivering the woman, who was now somewhat exhausted by the
the violence of the flooding. I was not a little surprised upon touching, to examine the progress of her labour, and endeavour to find out what might be uncommon in her case, to discover a large tumor, soft to the touch, and of a longitudinal form, covering the os internum. I at first mistook this tumour for the membranes, and I imagined the flooding to proceed from some mismanagement of the midwife; but, upon a more minute examination, to find out the source of the flooding, I discovered it to proceed from the tumor. I found also that this tumor was divided near its middle, by a pretty thick membrane into two separate sacs. As the woman was now grown languid, and her pulse feeble, I thought it the most eligible method to make an opening into the most remote sac to allow its contents to be evacuated. This I accordingly did with the nail of my fore-finger, and immediately upon the opening being made, there gushed out a great quantity of putrid coagulated blood. This gave her some relief for the present. In the interim, the parts were frequently fomented with an emollient decoction; and in the intervals of the fomentation, a warm cloth was kept continually applied. Two hours and a quarter,
quarter after the blood was discharged, the membranes broke and the waters came away. The child’s head presented itself, but was strictly locked in the pelvis. I waited that evening, that night, and next morning, in expectation that nature would assist the birth, but was at length sorry to find myself disappointed in my expectation. The few lingering pains which she had the preceding evening had left her. She was now become languid, and her pulse intermitting. In this critical situation, I was determined upon making trial of the forceps, as recommended in these dubious cases by that learned and experienced professor of midwifery, Dr. Young, a gentleman to whom I shall ever acknowledge myself under the greatest obligations. I accordingly tried them, and in a short time, delivered her of a dead male child, which, from its livid appearance, seemed to have been dead a considerable time in the womb. She met with no laceration of the perinæum, nor had she any incontinence of urine; accidents which frequently ensue after præternatural cases; but she complained at the change of weather, of

Vol. VI. No. 24. H h pains
pains about the region of the pubis. Her lochia were at first very offensive, but shortly after they became less so. The woman had a speedy and good recovery, and is now so well as to take care of her usual business.
WE are sorry that it has not been, before this, in our power to fulfil our promise of giving some account of the illustrious Dr. Haller. The many panegyrics on this eminent man, which have lately been delivered and published at almost every remarkable seat of medical literature in Europe, now afford us ample materials for a very full and particular account. But by the limits of our publication, we are necessarily restrained within very narrow bounds. And we can therefore propose to present our reader with a very general account only of the most remarkable particulars.

Hh 2 Albert
Albert von Haller was born at Bern, on the 16th of October, 1708. He was the son of an advocate, of considerable eminence in his profession. His father had a numerous family, and Albert was the youngest of five sons. From the first period of his education, he shewed a very great genius for literature of every kind; and to forward the progress of his studies, his father took into his family a private tutor, named Abraham Bailleodz. How far the rigid severity of this pedagogue contributed to the rapid improvement of his pupil, may, perhaps, be a question. But such was the discipline he exerted, that the accidental fright of him, at any future period of life, excited in Haller very great uneasiness, and renewed all his former terrors. It is, however, probable, that if any circumstance, besides uncommon natural genius, tended to forward his acquisition of knowledge, he was no less indebted to an original delicacy of constitution than to the severity of his teacher. As it was, perhaps, from this circumstance that he had little relish for the common amusements of other children; and in these he indulged himself very little in them.

But
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But to whatever cause it is to be attributed, according to the accounts which are given us, the progress of his studies, at the earliest periods of life, was rapid almost beyond belief. When other children are beginning only to read, he was studying Bayle and Moreri; and at nine years of age he was able to translate Greek, and was beginning the study of Hebrew. Not long after this, however, the course of his education was somewhat interrupted by the death of his father; an event which happened when he was in the thirteenth year of his age. After this he was sent to the public school at Bern, where he exhibited many specimens of early and uncommon genius. He was distinguished for his knowledge in the Greek and Latin languages; but he was chiefly remarkable for his poetical genius: and his essays of this kind, which were published in the German language, were read and admired throughout the whole empire.

Having made this proficiency in the preliminary branches of education, he was now fully qualified to enter on the study of that profession, for the practice of which his future life was intended. And in the sixteenth year
of his age, he began the study of medicine at Tubingen, under those eminent teachers Du-vernoy and Camerarius. The commencement of his medical studies was marked by an event characteristic of those industrious exertions by which he was afterwards distinguished. Determined, with unremitting industry, to dedicate his whole time to the prosecution of a study which he hoped would render him useful to mankind, he became a fugitive from the Muses, and committed to the flames all those little poetical essays which were then his principal, or rather his only amusement.

He continued engaged in the study of medicine at Tubingen for the space of two years, when the great reputation of the justly celebrated Boerhaave drew him to Leyden. Nor was this distinguished teacher the only man, from whose superior abilities, he had there an opportunity of profiting. Ruysh was still alive, and Albinus was rising into fame. Animated by such examples, it is not to be imagined that his affiduity would be relaxed. There he spent all the day, and the greatest part of the night, in the most intense study. And the proficiency which he made, gained
him universal esteem both from his teachers and fellow-students.

From Holland, in the year 1727, he came to England. Here, however, his stay was but short, and it was rather his intention to visit the illustrious men of that period than to prosecute his studies at London. He formed connexions with some of the most eminent of them. He was honoured with the friendship of Douglas and Cheffelden, and he met with a reception proportioned to his merit from Sir Hans Sloane, president of the Royal Society. After his visit to Britain, he went to France; there, under those eminent masters, Winflow and Le Dran, with the latter of whom he resided during his stay in Paris, he had opportunities of prosecuting anatomy, which he had not before enjoyed. But the zeal of our young anatomist was greater than the prejudices of the people at that period, even in the enlightened city of Paris, could admit of. An information being lodged against him to the police for dissecting dead bodies, he was obliged to cut short his anatomical investigations by a precipitate retreat. Still, however, intent on the farther prosecution of his studies,
he went to Basil, where he became a pupil to
the celebrated Bernouli.

Thus improved and instructed by the lec-
tures of the most distinguished teachers of that
period; by uncommon natural abilities, and
by unremitting industry, he returned to the
place of his nativity in the 26th year of his
age. And not long after this he offered him-
self a candidate, first, for the office of phy-
cian to an hospital, and afterwards for a pro-
фессорship. But neither the character which
he had, before he left his native country, nor
the fame which he had acquired and supported
while abroad, were sufficient to combat the in-
terest opposed to him. He was disappointed
in both. And it was even with difficulty, that
he obtained in the following year, the appoint-
ment of keeper of a publick library at Bern,
an office, the exercise of which, was, indeed,
by no means suited to his great abilities. But
it was the more agreeable to him, as it afford-
ed him an opportunity for that extensive read-
ing by which he has been so justly distin-
guished.

The neglect of his merit which marked his
first outlet, neither diminished his ardour for
medi-
medical pursuits, nor detracted from his reputation, either at home or abroad. And soon after he was nominated a professor in the university of Goettingen, by our late gracious sovereign George II. The duties of this important office, he discharged with no less honour to himself, than advantage to the public, for the space of seventeen years. And it afforded him an ample field for the exertion of those great talents which he possessed. Extensively acquainted with the sentiments of others respecting the economy of the human body, struck with the diversity of opinions which they held, and sensible that the only means of investigating truth was by careful and candid experiment, he undertook the arduous task of exploring the phenomena of human nature from the original source. In these pursuits he was no less industrious than successful, and there was hardly any function of the body on which his experiments did not reflect either a new or a stronger light. Nor was it long necessary for him, in this arduous undertaking to labour alone. The example of the preceptor inspired his pupils with the spirit of industrious exertion. Zinn, Zimmerman, Caldani, and many others, animated by a generous
emulation, laboured with indefatigable industry to prosecute and to perfect the discoveries of their great master. And the mutual exertion of the teacher and his students, not only tended to forward the progress of medical science, but placed the philosophy of the human body on a more sure, and an almost entirely new basis.

But the labours of Dr. Haller, during his residence at Goettingen, were, by no means confined to any one department of science. He was not more anxious to be an improver himself, than to instigate others to similar pursuits. And the intimacy which subsisted between him and Baron de Munchausen, the first minister in Hanover, who was the friend and patron of his merit, enabled him to set on foot institutions admirably calculated for this purpose. To him, the Anatomical Theatre, the School of Midwifery, the Chirurgical Society, and the Royal Academy of Sciences at Goettingen, owe their origin. Such distinguished merit could not fail to meet with a suitable reward from the sovereign under whose protection he then taught. The king of Great Britain not only honoured him with every mark of attention which he himself could bestow, but
but procured him also letters of nobility from the Emperor.

The ripened fruits of that genius and industry which were at first neglected, now drew the attention of almost every Mæcenas in Europe. On the death of Dillenius, he had an offer of the professorship of botany at Oxford; the states of Holland invited him to the chair of the younger Albinus; the king of Prussia was anxious that he should be the successor of Maupertuis at Berlin. Marshal Keith wrote to him in the name of his sovereign, offering him the chancellorship of the university of Halle, vacant by the death of the celebrated Wolff. Count Orlow invited him to Russia, in the name his mistress the empress, offering him a distinguished place at St. Petersburgh. The king of Sweden conferred on him an unsolicited honour by raising him to the rank of knighthood of the order of the polar star; and the emperor of Germany did him the honour of a personal visit, during which, he thought it no degradation of his character, to pass some time with him, in the most familiar conversation.

Thus honoured by sovereigns, revered by men of literature, and esteemed by all Europe,
rope, he had it in his power to have held the highest rank in the republic of letters. Yet declining all the tempting offers which were made to him, he continued at Goettingen anxiously endeavouring to extend the rising fame of that medical school. But after seventeen years residence in that university, an ill state of health rendering him less fit for the duties of the important office, which he held, he solicited and obtained permission from the regency of Hanover to return to his native city of Bern. His fellow-citizens, who might at first have fixed him among themselves, with no less honour than advantage to their city, were now as sensible as others of his superior merit. A pension was settled upon him for life, and he was nominated at different times to fill the most important offices in the state. These occupations, however, did not diminish his ardour for useful improvements. He was the first president, as well as the greatest promoter of the Oeconomical Society at Bern; and he may be considered as the father and founder of the Orphan-Hospital of that city. Declining health, however, restrained his exertions in the more active scenes of life, and for many years he was confined entirely
entirely to his own house. Even this, however, could not put an end to his utility; for with indefatigable industry he continued his favourite employment of writing till within a few days of his death, which happened in the 70th year of his age, on the 12th of December 1777.

After what has been said, to sum up his character would be superfluous; to enumerate his improvements or his writings would much exceed the limits of our publication. It is sufficient to observe, that those extensive works, his Elementa Physiologiae and Bibliotheca Medicinae, will afford, to latest posterity, undeniable proofs of his indefatigable industry, penetrating genius, and solid judgment. But he was no less distinguished as a philosopher, than beloved as a man; and he was not more eminent for his improvement in every department of medical science, than for his piety to God, and benevolence to all mankind.

* * * * *

That admirable institution, which has long subsisted at Paris under the title of La Société Libre d'Emulation, the objects of whose inquiries have been so much directed to public utility,
utility, has proposed a prize question for the present year, the proper solution of which must be considered as of the utmost importance. In their programme they observe, that numerous and melancholy instances of the deliterious effects resulting from the use of kitchen utensils, yielding matters of a poisonous quality, had justly excited the attention, not only of physicians, but of the public in general. And although those of copper and lead be unquestionably the most dangerous, yet it is universally allowed, that those also of pewter, iron, and even earthen ware, are very far from being free from inconveniences. Considering, therefore, improvements on this subject as well meriting attention, they have allotted the sum of nine hundred livres, as an encouragement to inquiries and trials with regard to it. The question is proposed in the following terms.

Trouver une matière, ou une composition quelconque, avec laquelle on puisse fabriquer des ustensiles de cuisine, capables de soutenir tres-longtemps, la plus forte ebulition, les alternatives subites du froid, et de la plus grande chaleur, qui n'ayent aucun des inconvénients du cuivre, du plomb, des étamages, convertes ou vernis
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vernis ordinaires, et qui soient aussi solides et moins chers, s'il est possible, que les ustensiles d'usage.

Memoirs on this subject are directed to be directed, au Bureau Royal de Correspondance générale, rue des Deux Portes. S. Sauveur, a Paris.

* * * * *

The many extraordinary cures which have of late been performed, by means of medicated vapour baths, in London and Dublin, must necessarily suggest to the attentive practitioner, the idea of furnishing other places also with this useful and important remedy, in some of the most obstinate diseases. It is with particular pleasure, therefore, we learn, that such baths are now erecting in different places. Dr. Hunter, of York, in conjunction with Mr. Garencieres and Whaley, apothecaries in that city, has lately fitted up there, at a very considerable expence, baths, on a construction similar to those of Dr. Kelly in the neighbourhood of London. These are now completed, and open to patients at a moderate rate, from eight in the morning till ten at night. And it is to be hoped that the gentlemen who have carried
carried this undertaking into execution, will meet with a proper return for having provided a remedy, no less pleasing than efficacious, for the numerous diseases which derive their origin from obstructed perspiration and confined humours.

But in smaller towns, all the returns which could reasonably be expected from medicated baths, would be by no means sufficient for defraying the expence of such constructions as those at London and York. It is therefore much to be wished, that proper trials were made of more simple contrivances for this purpose. From these, there is reason to presume, that many, at least, of the benefits of this mode of cure might be obtained.

An ingenious physician, who has the charge of a county hospital in England, and whose attention to every thing that can improve his profession is highly worthy of imitation, in a letter to Dr. Duncan, informs him, that he has lately employed medicated vapours with his patients, by means of a common still and vapour-bath chair, connected by a proper tube; and that, in some instances, this practice has been attended with great success. We hope,
in some future number, to be able to give a more full account of this practice. Meanwhile, it may not be improper to observe, that the application of medicated vapours in this way, can be tried anywhere, at a very trifling expense.

* * * * *

It is now upwards of a year since we mentioned that a third edition of Dr. Cullen's Synopsis Nosologiae Methodicae was in the press at Edinburgh; and that this work, which had formerly been contained in one volume octavo, was now to be so far enlarged, that it would extend to two. But, after the first of these volumes had been printed off, the learned author was induced to suspend this work for some time. He has now, however, again resumed it; and it is to be hoped that the whole will soon be ready for publication.

* * * * *

Dr. Charles Webster, of Edinburgh, has been, for some time, engaged in preparing for publication, a selection of the best inaugural dissertations on practical subjects, and arranging them in such a manner as to form one connected system. This work is now in the press, and is entitled, Systema Medicæ

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Praxeos, complectens Dissertationes Argumenti Medico-Practici Selectiores. It is intended to exhibit to the public not so much the labours of the students whose names the dissertations bear, as to give a view of the doctrines respecting particular diseases, and of the method of cure, delivered by the most eminent teachers of the practice of medicine at Edinburgh, particularly those of the late Drs. Rutherford and Gregory, a proper account of whose practice was never published by themselves; and of Drs. Cullen and Duncan, both of whom, in the lectures which they at present deliver, recommend many modes of treatment in particular diseases, which they consider as improvements, and which never have appeared in print, unless in the form of inaugural dissertations by their pupils. These, however, are seldom exposed to sale, and very rarely read beyond the precincts of the university where they are published. The present work, therefore, will, probably, furnish a view of modern practice, not inferior to any one which has of late appeared.

Dr.
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Dr. Home has, for several years, been preparing for publication the result of his observation and experience at the Royal Infirmary of Edinburgh, where he has, every winter, in conjunction with Dr. Gregory, the care of the clinical patients. This work is now in the press, and is entitled, Clinical Experiments, Histories, and Dissections. Besides containing accurate histories of the cases of particular patients, a distinct view of the treatment in each, and the principal observations which were delivered in lecture; it exhibits also a faithful account of trials which have been made with the greatest part of the new remedies lately introduced into practice; and a minute detail of the effects which have been observed to result from them.

* * * * *

A work is at present in the press at Edinburgh, by Dr. Gregory, entitled, Conspectus Medicinae Theoreticae; in Usum Academicum. In this publication, which is intended principally, as a text-book for his lectures, the physiology and general pathology are conjoined. Thus in treating of any function, as for exam-ple
ple respiration, he considers the manner in which it is performed, its uses, its varieties, as voice, speech, weeping, laughing, &c. its disorders, as cough, sneezing, and dyspnœa, of various kinds, their causes, effects, and general principles of cure, whether radical or palliative.

* * * * *

A new edition of Mr. Bell's treatise on the Theory and Management of Ulcers, of which an analysis was given in a former number of this work, is in the press, and will soon be published. In this edition, the author has made several alterations, and not a few additions, which must encrease considerably the value of a work, which has already deservedly met with a very favourable reception from the public.

SECT.

The Medical Register for the year 1779, 8vo. London.

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Experiences propres à faire connaître que l'alkali volatile fluor est le remède le plus efficace dans les asphyxies ; avec des remarques sur les effets advantageux qu'il produit dans la morsure de la vipère, dans la rage, &c. Par M. Sage. 12mo. Paris.


Physique du corps humain, ou physiologie moderne, avec des remarques, sur la santé, la nature, la cause, et le traitement des maladies, à l'usage des étudiens en chirurgie et en médecine,
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M. Per-
M. Percival Pott, de la Société royale de Londres & chirurgien de l'hôpital de S. Bar-tholemi, ouvrage traduit de l'Anglois avec des observations, & des additions. Par M. Beerenbroek, docteur en medicine, associé au college royal des medecins, & a la société royale de medicine d'Edimbourg. 8vo. Bruxelles.

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